

Primary Care – Registered Nurse Degree Apprentice (RNDA) Pathways Event

Natalie Bradley, Apprenticeship Relationship
Manager, NHS England, North West

NHS
England



House Keeping

- Please introduce yourself in the chatbox.
- Please remain on mute during the presentations.
- We will have opportunities for Q&A at points during the webinar.
- During the Q&A please use the 'raise hand' function.
- Please add questions and comments into the chatbox at any time.
- Slides will be shared following the webinar to those who attended

Webinar Team



- Natalie Bradley – Apprenticeship Relationship Manager – NHS England, North West
- Jean Hayles - Deputy Regional Head of Nursing, Midwifery & Public Health NHS England, Northwest
- Olivia Murphy/ Carla Slater – Primary Care Training Hubs
- Michael McNamee - Regional Workforce Lead - Nursing & Midwifery NHS England, North West
- Jacqui Gladwin and Claire Tinsley - Widening Participation & Apprenticeship Team - NHS England, North West
- Simon Dennis - Head of Commercial, Salisbury Managed Procurement Services, Salisbury NHS Foundation Trust
- Deborah Holden, Jay Blackshaw, Cherie Ainscough- Primary Care PEF Team
- Joeann Flannigan – Apprentice case study

Agenda

| Item | | Time | Presenter |
|------|--|-------------|--------------------------------|
| 1 | Housekeeping | 1:00-1:05 | Natalie Bradley |
| 2 | Welcome | 1:05-1:15 | Jean Hayles |
| 3 | Apprenticeship Basics | 1:15-1:25 | Natalie Bradley |
| 4 | Meet the primary care training hubs | 1:25-1:35 | Carla Slater/ Olivia Murphy |
| 5 | RNDA Pathways/ Funding | 1:35-1:50 | Mike McNamee |
| 6 | Levy Transfers | 1:50-2:05 | Jacqui Gladwin/ Claire Tinsley |
| 7 | Procurement | 2:05-2:15 | Simon Dennis |
| 8 | Intro to the PEF team/ Employer case study | 2:15- 2:25 | Primary Care PEF Team |
| 9 | Menti-meter activity | 2:25 – 2:30 | Natalie Bradley |
| 10 | Apprentice case study | 2:30-2:45 | Joann Flannigan |
| 11 | Questions | 2:45-3:00 | Natalie Bradley |

Welcome

Jean Hayles - Deputy Regional Head of Nursing,
Midwifery & Public Health NHS England, Northwest



Welcome & Introduction

- Workforce, Training and Education Directorate

‘to support the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place’

- Aim of today: To support the growth of the Registered Nurse Degree Apprenticeship within the Primary Care setting

“The NHS is a great place to work and an apprenticeship is a stepping stone to a great future – yours and ours! Together we can achieve great things.”

Background: Apprenticeships in healthcare

350 Career pathways across the NHS and in healthcare settings in England.

Over 100 of these career pathways are supported by Apprenticeships.

One of the most popular apprenticeships in the NW is the Nursing Associate.

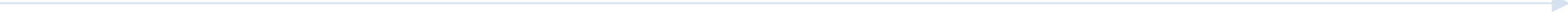
NHSE, (Legacy HEE) DHSC along with Skills for Care have developed career pathways for Nursing in PC.



More than 350 NHS careers. An apprenticeship is a great way in!

[@HealthCareersUK](#) [@healthcareersuk](#) [Healthcareers](#) [@healthcareers](#) www.healthcareers.nhs.uk

2019

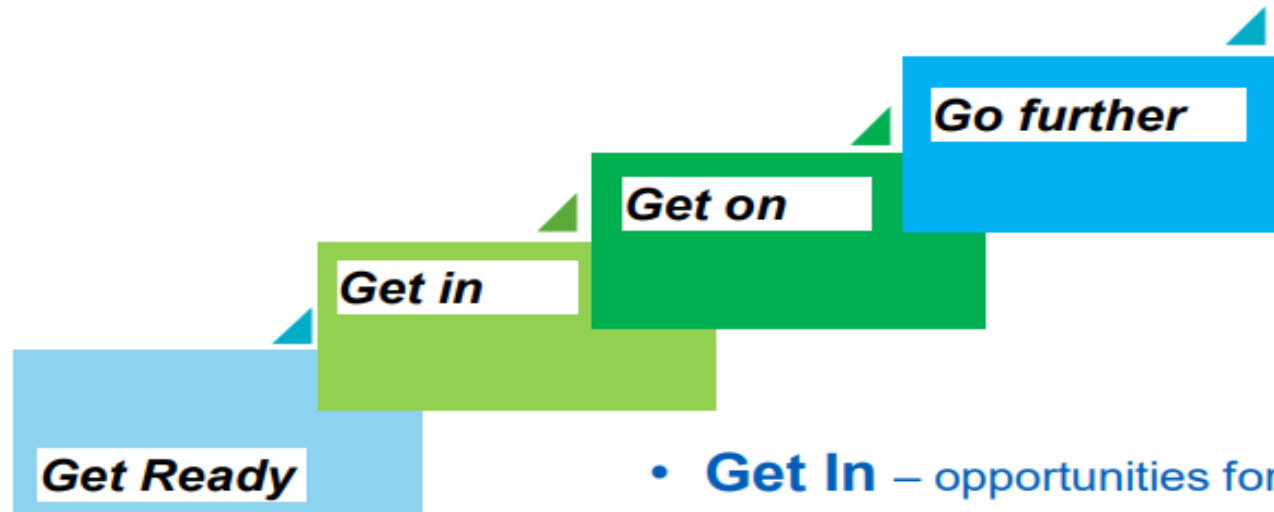


Apprenticeship Basics

Natalie Bradley – Apprenticeship Relationship
Manager – NHS England, North West



Talent for Care



- **Get In** – opportunities for people to start their career in a support role
- **Get On** – support people to be the best they can be in the job they do, including occupational competence
- **Go Further** – provide opportunities for career progression, including into registered professions

What is an apprenticeship?

- An apprenticeship is on the job training leading to a national qualification, available for both new and existing staff.
- Apprenticeships are an employment-based route.
- Typically combine on-the-job training at an employer's site with off-the-job training provided by a training organisation.
- You can use apprenticeships to develop new and existing staff in both clinical and non-clinical roles in Primary care.



Apprenticeship Levels

There are different levels of apprenticeships, from level 2 to degree level. This enables employers to select the most relevant apprenticeship for the requirements of the job role and the apprentice's previous experience, and to provide a clearly defined progression pathway for apprentices



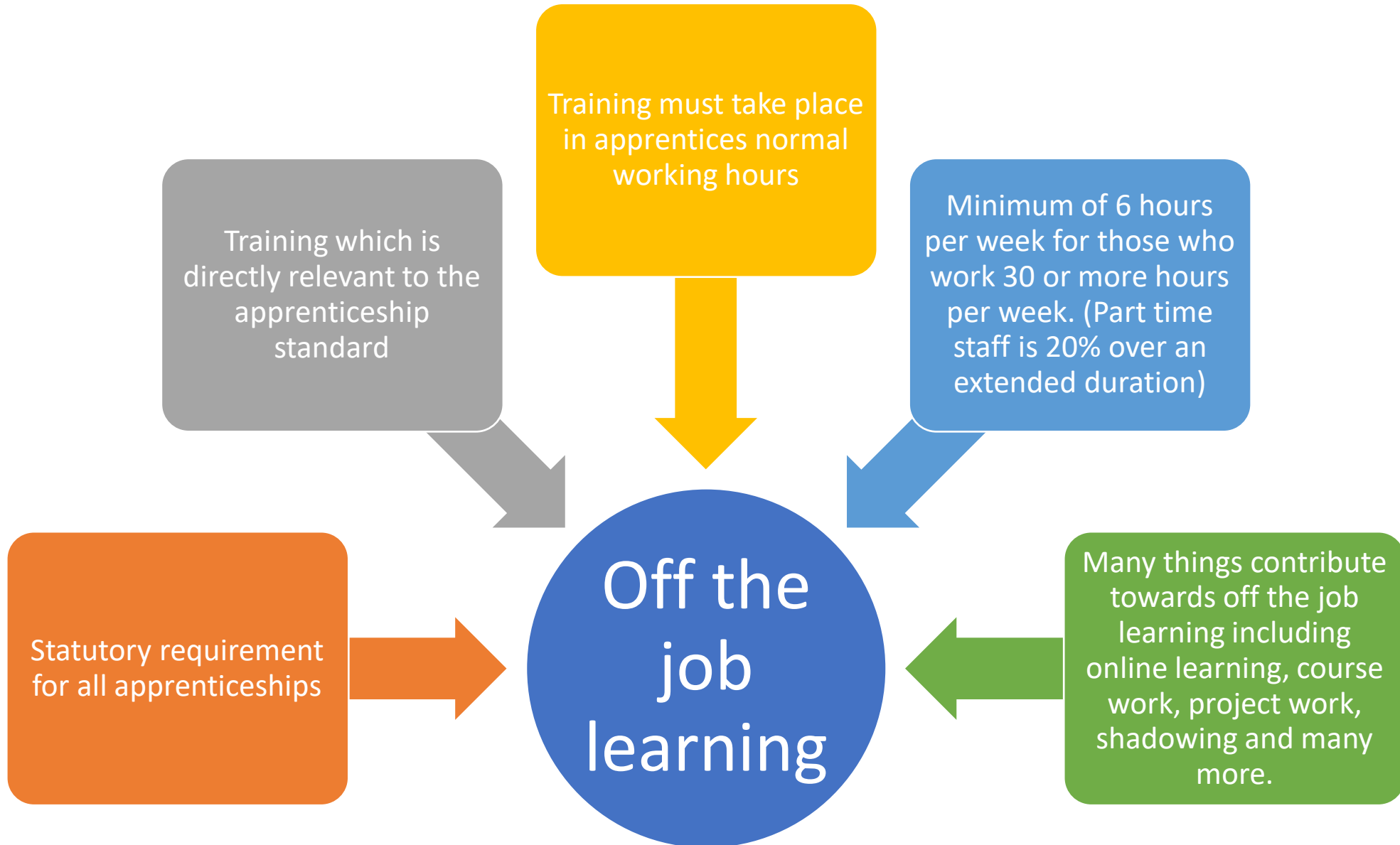
| | |
|--|-------------------|
| Level 7 apprenticeship | M Level |
| Level 6 Apprenticeship | BSc Degree Level |
| Level 5 Apprenticeship | Foundation Degree |
| Level 3 Apprenticeship | A level |
| Care Certificate plus Level 2 Apprenticeship | GCSE |

Apprenticeships available

| Apprenticeship Standard | Level |
|--|-------|
| Advanced Clinical Practitioner | 7 |
| Physicians Associate | 7 |
| District nurse | 7 |
| Specialist community and public health nurse | 7 |
| Registered nurse degree (NMC 2018) | 6 |
| Nursing associate (NMC 2018) | 5 |
| Healthcare assistant practitioner | 5 |
| Senior Healthcare Support Worker | 3 |
| Healthcare support worker | 2 |
| Adult Care Worker | 2 |
| Lead Adult Care Worker | 3 |
| Senior leader (degree) | 7 |
| Chartered manager (degree) | 6 |
| Operations / departmental manager | 5 |
| Associate Project Manager | 4 |
| Team leader / supervisor | 3 |
| Business administration | 3 |
| Customer Service Specialist | 3 |
| Customer Service | 2 |

- Many others are also available. Many will build to a career pathway i.e. Nursing or Admin
- Please visit HASO: <https://haso.skillsforhealth.org.uk/standards/>
- Or the Institute's website: <https://www.instituteforapprenticeships.org/apprenticeship-standards/>

Off the Job Training



Benefits of Apprenticeships

Apprenticeships bring a number of tangible benefits, they can create skilled, motivated and qualified employees and, if used properly, can help to address skills shortages across the workforce.

Increased flexibility
of the workforce

Develop your
existing workforce

Apprenticeships
have lower attrition
rates

Attract and recruit
from a wider pool
of people in your
local community

Recruit a more
diverse and local
workforce

Improve retention

Reduce training
and recruitment
costs

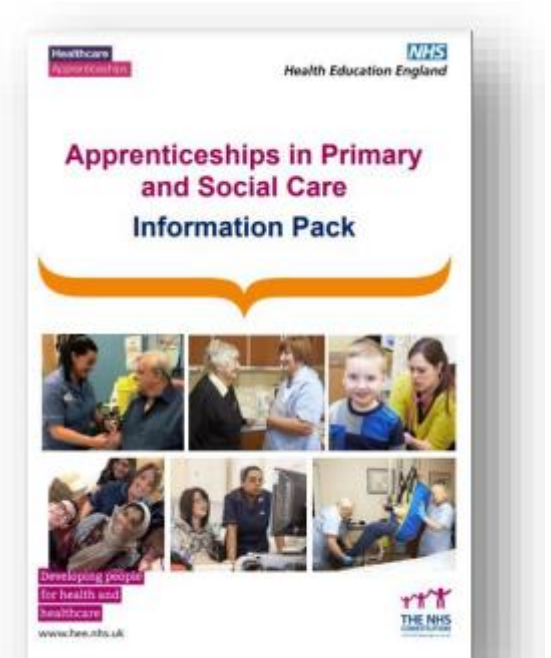
Create a flexible
training route

Recruiting a more
local workforce to
improve staff
retention

Apprenticeships in Primary and social care

Apprenticeships can be used to develop skills in administration, customer service, and in specialist back office skills, such as finance and IT. Apprenticeships are also available for roles such as:

- Healthcare support
- Management
- Team Leading
- Administration
- Adult care



- HASO - <https://haso.skillsforhealth.org.uk/primary-and-social-care-apprenticeships/>
- Skills for care - <https://www.skillsforcare.org.uk/Developing-yourworkforce/Apprenticeships/Apprenticeships.aspx>

Get in touch

If you need any further information then please do get in touch, you can email me on –

- Natalie.Bradley@HEE.nhs.uk

Meet the Primary Care Training Hubs

Carla Slater – Greater Manchester Primary Care Hub

Olivia Murphy – Lancashire and South Cumbria Primary Care Hub



Primary Care Training Hubs

Cheshire and Merseyside

Faye Horobin - Training Hub Programme Manager

Faye.horobin@nhs.net

cmthub.co.uk

Greater Manchester

Carla Slater - Senior Apprenticeships Coordinator

Carla.slater1@nhs.net

gmthub.co.uk

Lancashire and South Cumbria

Olivia Murphy - Apprenticeships Manager

mbpcc.apprenticeships@nhs.net 07735161775

lscthub.co.uk

The Training Hub Teams are available to help employers with apprenticeship queries and applications

- ✓ Information on local course options
- ✓ Application support including
 - Levy Transfer requests
 - Practice Assessor training
 - ULE/Audit and NMC paperwork
- ✓ Placement support
- ✓ Apprenticeship queries
- ✓ Role related additional training

Pathways – Nursing Associate to Registered Nurse

Michael McNamee - Regional Workforce Lead -
Nursing & Midwifery NHS England, North West



Pathways – Part 1

Step 1 – What is your workforce development need? Identify the skills gaps of your workforce and vacancies. Estimate how much salary funding you have to spend on apprenticeship roles.

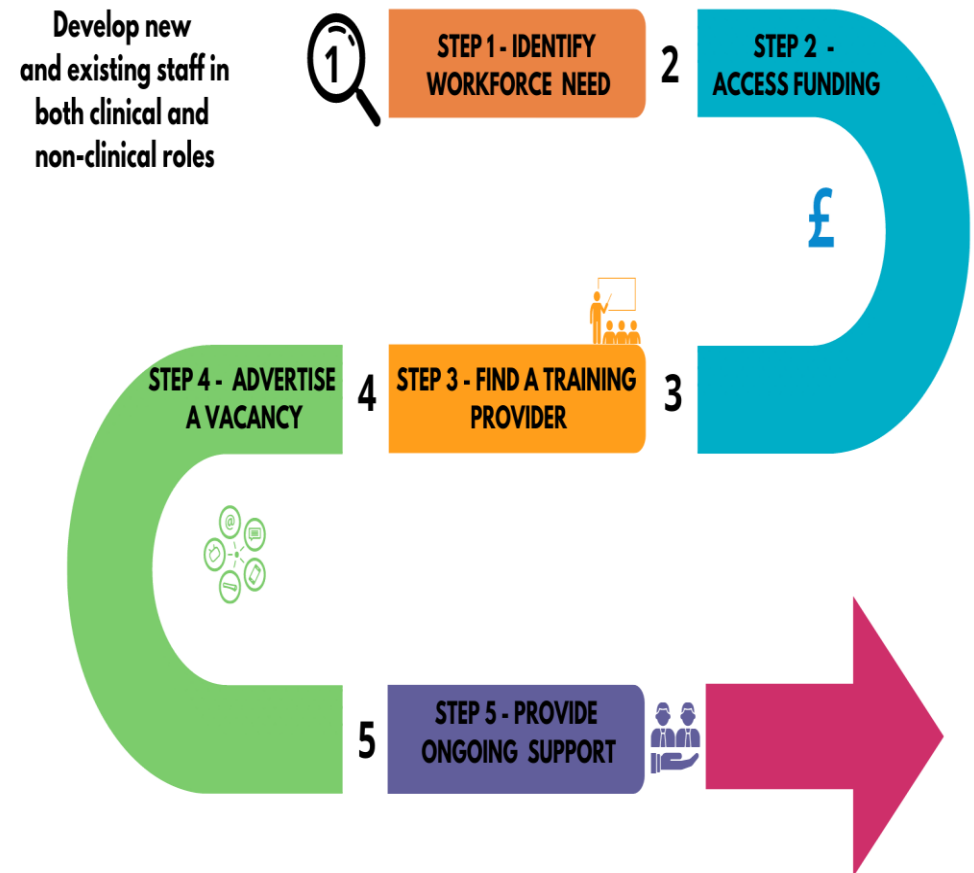
The [costing calculator](#) and [pathway planning](#) tools may help.

Step 2 – Access [funding](#) either via the Levy (if you have a wage bill over £3million), reserve government co-investment or find a levy transfer.

Step 3 – Select an [apprenticeship standard](#) and choose apprenticeship training and assessments. Find a training provider who will offer the right apprenticeship and assess your apprentice during their training.

Step 4 – Advertise a vacancy: you can work with your training provider to help with advertising and shortlisting. You may identify an existing employee or recruit a new apprentice.

Step 5 – Provide ongoing support for the apprentice. Help them to adjust to the workplace by planning workload and providing the necessary opportunities to complete practical tasks in line with training goals.



• Pathways –Part 2

Higher Education Institutions - Validated / Offering RNDA Programme / Northwest

University of Bolton

University of Salford

Open University

BBP University Limited

Liverpool John Moores University

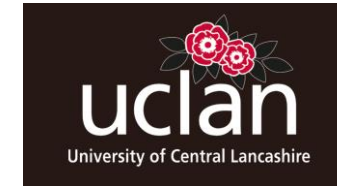
UCLAN

University of Chester

University of Cumbria

Edgehill University

Manchester Metropolitan University



Edge Hill University

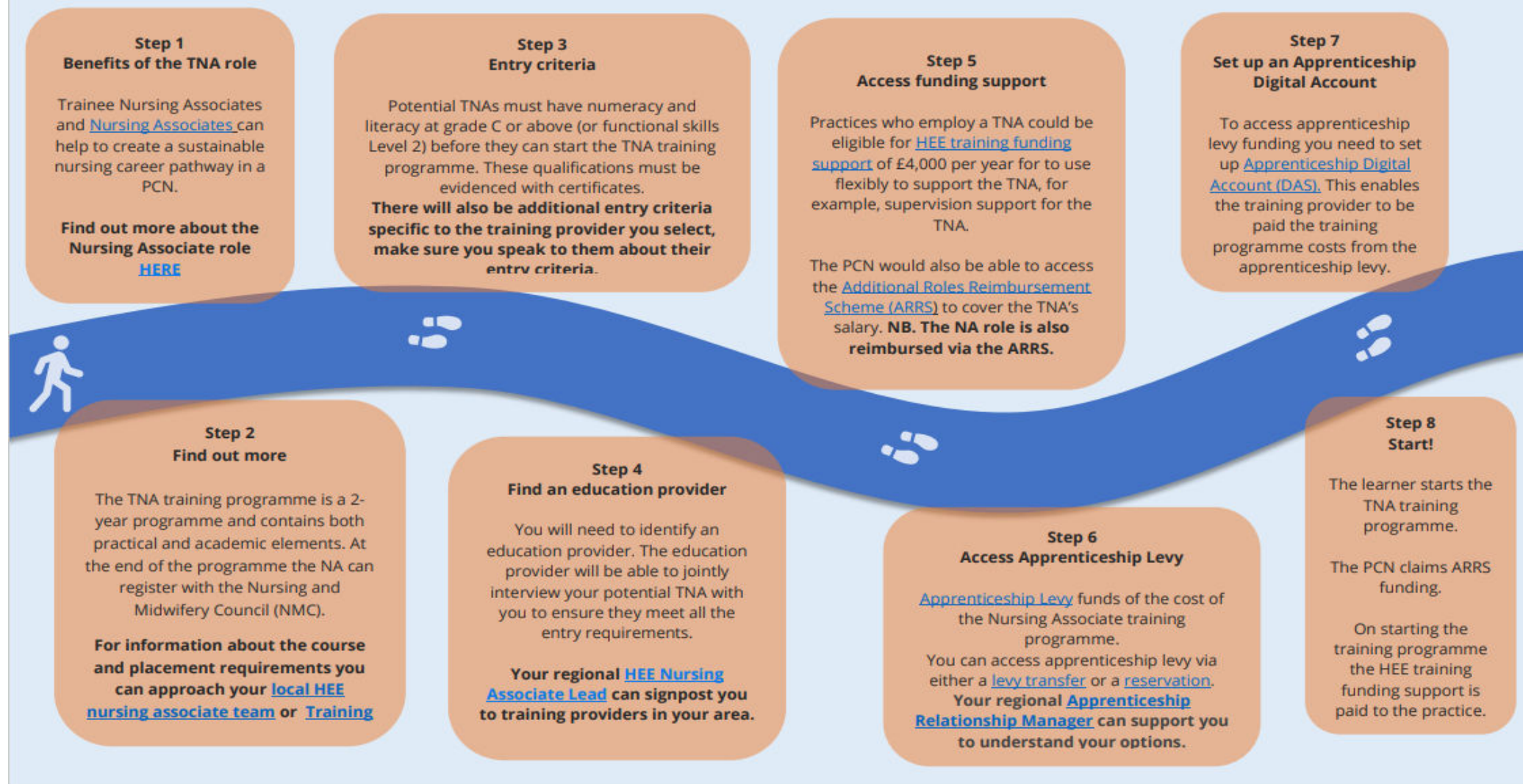


Trainee Nursing Associates in Primary Care Pathway

The pathway below shows the steps to employ Trainee Nursing Associate (TNA) in Primary Care

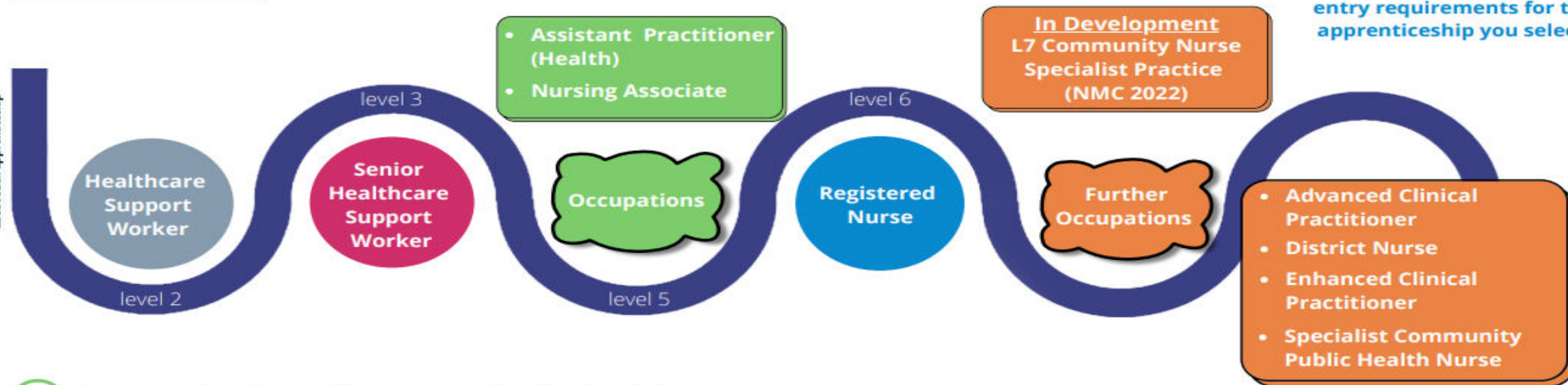
Hiring TNAs into the PCN will enable the nursing workforce to focus on more specialist nursing skills such as urgent care, minor illness and patients living with complex long-term conditions. This role sits within a nursing career pathway and improves retention of the primary care nursing workforce by providing progression and development opportunities.

**Please note this is an example pathway, these steps may occur in a different order depending on the practice and people involved.*



APPRENTICESHIP STANDARDS IN PRIMARY CARE NURSING

Career progression is not linear.
You can step in or out at any
point depending on your
experience, career goals. You
must check that you meet the
entry requirements for the
apprenticeship you select.



- ✓ An apprenticeship combines practical training in a job with study
- ✓ Apprentices are employed and receive a salary
- ✓ Full-time apprentices are entitled to a minimum of 6 hours per week 'off the job' training time as part of their job.*
- ✓ If not already achieved apprentices will undertake maths and English qualifications
- ✓ A qualification taken during an apprenticeship is equal to the same qualification taken elsewhere
- ✓ Depending on the apprenticeship, upon successful completion, apprentices may be eligible to apply for professional registration

*The off the job minimum requirement for a part-time apprentice remains unchanged at 20% of their normal working hours.
The new 'off the job' hours policy change only applies to new starts from 1 August 2022.

You may also be interested in public health, mentoring, teaching, leadership or management apprenticeships.



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Funding – Part 1

- **ARRS – Additional Roles Reimbursement Scheme**

1. In 2022 NHS England expanded the list of roles that are eligible under the ARRS.
2. This now includes reimbursing training time for Nursing Associates to become registered Nurses (RNDA).



3. Both trainee nursing associates and registered nursing associate roles are already reimbursable via ARRS (from October 2020).
4. From October 2022 PCNs (Primary Care Networks) are now also able to claim reimbursement for nursing associates training to become a registered nurse. This is where nursing associates can undertake a 'top up' programme, utilising Recognised Prior Learning (RPL), to train to become a registered nurse while continuing to deliver their nursing associate role within the PCN.
5. The reimbursable amount is equivalent to a band 4 salary.
6. This has been added into the [Network contract DES](#) from October 2022 (see B11.4 and B11.5 for full details)

Funding – Part 2

- There are three ways to access funding to pay for apprenticeship training, this funding does not cover salary costs – you will have to fund the apprentice's salary.
1. **Apprenticeship Levy** Employers with a pay bill over £3 million each year pay the apprenticeship levy. Levy paying employers can spend their apprenticeship levy funding on apprenticeship training.
 2. **Reserve government co-investment** If you don't pay the apprenticeship levy you can reserve funding, where the government pays 95% of the training costs and the employer pays the remaining 5%.
 3. **Levy Transfers** Levy paying employers can transfer some of their annual levy to other employers. These transfers cover 100% of the training costs of the apprenticeship (you still need to cover salary)

Questions



Levy Transfers

Jacqui Gladwin and Claire Tinsley - Widening
Participation Team NHS England North West



The Apprenticeship Levy

- Implemented in April 2017
- Organisations with an annual pay bill over £3million pay 0.5% of their monthly pay bill into Digital Apprenticeship Service (DAS) account.
- Funds can be used to pay for Apprenticeship training only.
- Levy paying organisations can transfer up to 25% of their annual levy pot to a number of SMEs.

Apprenticeship Funding

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- 3. Levy Transfers.** Levy paying employers can transfer some of their annual levy to other employers. These transfers cover 100% of the training costs of the apprenticeship (you still need to cover salary).

What is the apprenticeship levy transfer?

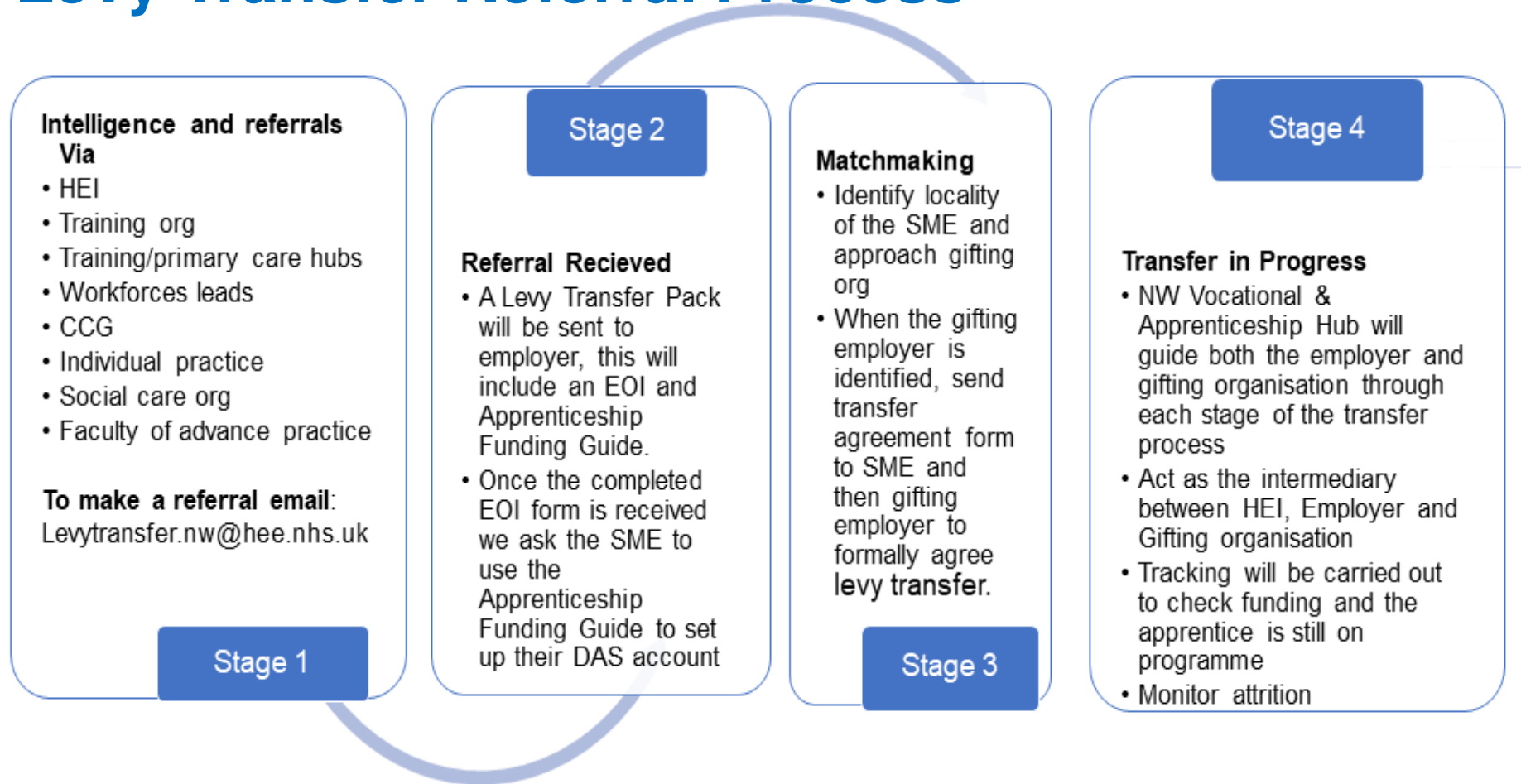
- Training for the apprenticeship via will be paid in full (no co-investment)
- Transfers can only be used to pay for training and assessment for apprenticeship standards and only for **new apprenticeship starts** - this can include existing staff
- Any employer wishing to receive and use any transferred funds must register and set up an account with the apprenticeship service, and have a signed agreement with the Education and Skills Funding Agency
- Transfers are managed through the apprenticeship service, with payments made monthly from the sending employer account into the receiving employer account
- Funds cannot be transferred to employers with fewer than 50 employees where the apprentice is aged 16 to 18 years old (or 19 to 24 years old who has an education, health and care plan, or is a care leaver) as those apprentices are eligible for full government funding.

Reservation of Funds

- If a levy transfer is not preferred or available, SMEs can opt for reservation of funds
- You can only reserve for the current or future months – reservations can be made up to 3 months in advance. The reserved funds cannot be used for apprenticeships that started before the reservation was made.
- You can only have a combination of up to 10 ‘active’ or ‘used’ reservations at any time. From April 2022, reservation levels re-set – employers can make up to 10 new reservations in the financial year 2022 – 2023.
- You pay 5% towards the cost of training and assessing your apprentice. The government will pay the rest (95%) up to the funding band maximum. The 95% is paid via the DAS in monthly payments, the 5% is paid to the apprenticeship provider via an invoicing process at a frequency agreed.

NW Vocational Hub

Levy Transfer Referral Process



Apprenticeship information webinar



The monthly session will cover:

- Apprenticeship standards overview including funding rules / legal requirements
- Employer responsibilities - supporting apprentices throughout their apprenticeship standard
- Apprenticeship provider responsibilities
- Apprenticeship data and trends
- Apprenticeship standard funding (including reservation of funds and transfers) and procurement
- Apprenticeship standards including pipelines and pathways
- Support, Information, Guidance and Resources
- Booking - To book a place please use this [link](#). These sessions will be delivered via Microsoft Teams.

Government Employer Incentives

Incentive payments for hiring a new apprentice

Existing £1,000 payment the Government provides for new 16 - 18 year old apprentices and those aged under 25 with an Education, Health and Care plan, where that applies.

Increase in bursary for care leavers.

Young care leavers starting an apprenticeship from August 2023 will receive a £3,000 bursary – triple the amount that is currently on offer. The bursary available to care leavers undertaking apprenticeships will increase from the current allowance of £1,000 to £3,000.

Employers are also given a £1,000 bursary to take on a care leaver apprentice. Click [HERE](#) for further information

Primary Care Support



Lancashire &
South Cumbria
TRAINING HUB

Olivia Murphy, Apprenticeship
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Carla Slater GMTH Senior Apprenticeship
Coordinator - 01204 546124
Web: gmthub.co.uk
Web: boltongpfed.co.uk



Faye.horobin@nhs.net
07860899749

Healthcare Apprenticeships Standards Online



Healthcare
Apprenticeships

Helping employers find the right apprenticeship standard

LOOKING TO BECOME
AN APPRENTICE?

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<https://haso.skillsforhealth.org.uk>

Thank You!

Getting in Touch

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Claire.Tinsley@hee.nhs.uk

Levy Transfers – North West

levytransfer.nw@hee.nhs.uk

Talent for Care

talentforcare@hee.nhs.uk

Healthcare Apprenticeships Standards Online

<https://haso.skillsforhealth.org.uk>

Procurement

Simon Dennis - Head of Commercial, Salisbury Managed
Procurement Services, Salisbury NHS Foundation Trust



Background

- Salisbury NHS Foundation Trust have been providing supported procurement services in education since 2016 through our strategic partnerships with HEE, NHS England and Professional Bodies.
- We handle over £500m of apprenticeship spend across over 200 client organisations and 450 education providers.
- We look after all sizes of employer from GP practices to running national apprenticeships.
- All at no cost to employers – we become your extended Apprenticeship team.
- We operate independently and also through our national and regional strategic partnerships.
- Being an NHS Trust, we know your pressures, your priorities, and the support you need as employers.

The right solution for each requirement

National Framework

- Employers can direct award any standard without a further competition should they wish.
- High quality threshold set and evaluated by partner organisations with specialist knowledge.
- Easier, streamlined process for employers where they know the provider they want to work with.

Regional Collaborations – Employer Led

- Fully supported process for employers including further competitions.
- Ability to set a higher degree of quality requirements through further competition.
- Tailored to local / regional needs, including study methods, puts employers in the driving seat to manage the market.

NHSE (WT&E) / Salisbury Evaluated Procurements



- The only specialist health education procurement service.
- A service from the NHS, for the NHS (and other partners).
- Higher level competitions are the only national procurements evaluated by system partners, subject matter experts, and employers.
- No cost to employers at any time.
- No need to employers to conduct expensive and lengthy local procurements – fully managed service where a further competition is requested by employers.
- Regularly updated for new standards and providers to join, and fully compliant with Public Contract Regulations.
- Stringent entry thresholds and checks on providers to ensure high quality training delivery.
- Streamlined, easy process.

“The procurement process with you guys has taken so much stress out of our daily lives, you wouldn't believe it. If you ever need a testimony for other Trusts please, please don't hesitate to get in touch. I no longer have sleepless nights about procurement thanks to this!”

NHS Employer

Why procure?

- Salisbury, with NHS England (Workforce, Training & Education) are leading on national procurements for NHS (and other) employers, in support of the development of Apprenticeship and other routes into study, across all sector of apprenticeships and professional development education.
- Apprenticeship levy funding is counted as public money and therefore demonstration of best value is required.
- Public spending sits within Public Contract Regulations 2015, the underpinning legislation – a “light touch” regime is in place but this does not mean “no touch”.
- From January 2021, mandatory Social Value evaluations will be included in all procurements.
- Procurement enables employers to be protected by the correct NHS / employer contract (DHSC requirement).
- **Procurement is not about the cheapest** – it is about selecting the right providers to deliver the right “product” in the best way for both parties.
- The principle objectives are to streamline provider selection for employers, to ensure consistent quality across courses, and to assist education providers in understanding, and planning for, the size of the marketplace. We also aim to increase innovation in support of the new learning methods discussed in the NHS Long Term Plan.
- This is not NHS England / Salisbury selecting the provider – this will provide a menu of providers to enable employer choice all of whom have met certain criteria to ensure employers of a quality programme.

Minimum provider requirements

Minimum entry criteria applied:

- Providers must hold a valid UKPRN and be registered on the Register of Approved Training Providers managed by the ESFA (and RoEPEO where offering End Point Assessment).
- Where a provider has an Ofsted rating, this must be Grade 1 or Grade 2, which must relate to apprenticeship delivery.
- Where a provider has an Ofsted monitoring visit report, this must be 'Significant Progress' or 'Reasonable Progress', which must relate to apprenticeship delivery.
- Suppliers with no Ofsted rating/visit must be able to demonstrate success rates above the national average for apprenticeships.
- Suppliers must agree to the published NHS Terms without amendment.
- Bidders must include 1 resit per module, and 1 resit at EPA, without additional charge to employers.

Selecting quality providers

| | |
|------------------------------------|---|
| Innovation | Delivery methods that reflect the variety of work patterns, skillsets, and academic ability levels within the NHS (and wider) workforce. |
| Social value | Approaches that truly widen participation (e.g., entry criteria not reliant on UCAS points or recent A levels) and approaches that reflect Social Value Modelling . |
| Sustainability of workforce | Programmes that help employers develop a long-term workforce pipeline – not just delivering an education course. |
| Genuine apprenticeships | Responses that recognise apprentices are employees, not students, and that reflect the work-life challenges and support their educational journey. |

Who can use the Framework?

Salisbury's procurements are established at the outset for all public and third sector organisations, including health, local authorities, and education institutions.

Additionally, any charity receiving public funds for their activities is eligible, along with smaller organisations such as GP practices, hospices and larger government departments and arm's length bodies.

Other private sector organisations who wish to use the procurements to work in partnership with other organisations can join; they just don't need to meet the public contract regulations part of the contract, but they can certainly call-off providers through Salisbury so they get the same supplier commitments.

Framework Ordering Process

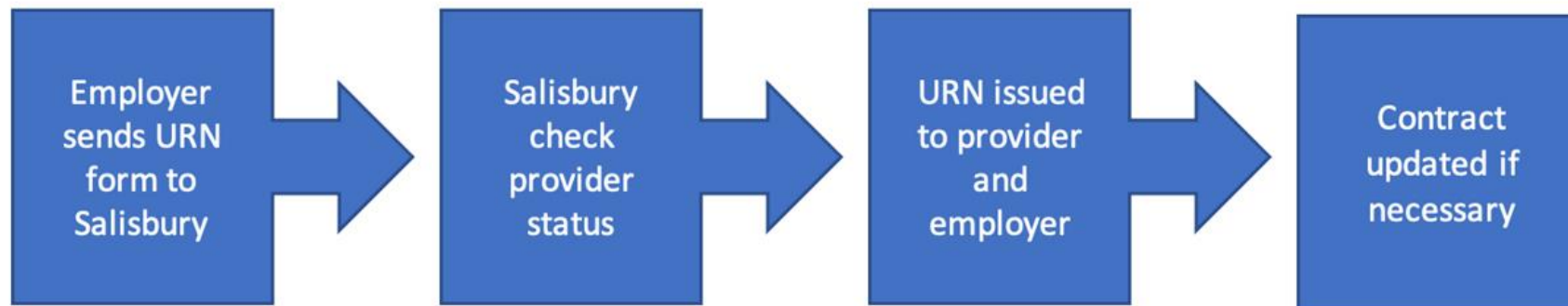
- The URN (Framework Order) process is your protection that the correct and current contract is being used for your providers and gives you compliance with the Public Contract Regulations, and DHSC contract requirements for NHS organisations.
- Please complete the order form and send to Salisbury when you know the number of learners who will be enrolling.
- This includes commitments to free resits / retakes, protection from penalty charges, and ensures providers' commitments on national procurements are included within the contract.
- Salisbury will automatically check most current contract version is in place but cannot do that without a URN form for enrolments.
- **Please do not sign Education Provider contracts as the correct contract will be issued by Salisbury.**

Ordering Process

First time with provider or new standard with existing provider



New enrolment / cohort with existing provider



Primary Care PEF Team

Deborah Holden
Cherie Ainscough
Jay Blackshaw



Primary Care PEF'S

What we do -

- Work collaborative as a regional team
- Best Evidence Based Practice
- Create resources
- Represent and report on a regional and national level
- Advise PCN, Employers and Practices how the NA role can support their workforce needs
- Network and signpost to correct support
- Assist / Advise on audits and quality assurance of the learning environment

Contact Details

- Jay Blackshaw – J.blackshaw@nhs.net
- Cherie Ainscough – Cherie.ainscough@nhs.net
- Deborah Holden – Deborah.holden7@nhs.net

Employer Case Study

- Carrer Pathway
- PCN Model
- Use of funding
 - ARRS
 - Additional Funding
- Plan for the future
- Supporting and enabling others

IRWELL MEDICAL PRACTICE CASE STUDY



The Practice's new strategic solution to generate significant workforce growth and quality improvements utilising the new role of **Nursing Associate (NA)**

AT A GLANCE

Challenges

- University requirements
- Understanding NA Scope
- Estate size

Benefits

- Direct savings: £4,091.80 pa
- Indirect savings: £14,136.80 pa
- 716 additional nurse hours
- 104 additional pharmacist hours
- No cost incurred if ARRS available
- PCN approach
- Improved quality and patient safety



"For over 4 years, we've been developing and deploying the new role of the NA for both the practice and PCN using both **Apprenticeship** and **ARRS** routes"

"Our mission is to provide effective career development and quality learner opportunities. Ultimately improving the practice and patient experience"

Angela Ormrod

Nurse Manager
PCN Lead Nurse Rossendale East

OBJECTIVES

Following the Shape of Caring review recommendations, HEE's initiative is to develop, implement and monitor a programme of work to deliver the recommendations for widening access and developing the nursing and caring workforce.

SOLUTIONS

The Nursing Associate is a new support role in England that bridges the gap between healthcare support workers and registered nurses to deliver hands-on, person-centered care as part of the nursing team.

BENEFITS

Benefit One

The savings for the practice and PCN both direct and indirect are estimated to be approximately £18,000

Benefit Two

Additional sessions were able to be facilitated by utilising the TNA/NA role. The practice implemented programmes for future workforce requirements, such as training in spirometry, contraception reviews, LTCR, LD reviews, and dementia reviews

Benefit Three

Using the programmes and training identified above this has reduced the practice nurse workload. This allows them to focus on improving the quality of care of patients with more complex health requirements. Some successful outcomes are highlighted here:-

NA's are receiving training in spirometry, so they can assist with the backlog of patients awaiting this test.

The TNAs have been given training in contraception reviews, carrying out pill checks, and administering depo injections under a robust practice protocol and supervision of a registrant.

They are carrying out work in the care home on the personalised plan of care.

The team of Trainee Nursing Associate's are taking part in a PCN project, exploring the quality of dementia reviews, and ensuring carer reviews are conducted. Ensuring that the carer reviews meet the patient's needs in accordance with the dementia-friendly practice.

Benefit Four

As part of the ARRS roles, they have employed 5 TNA's to work in the practices and in the care home with nurses. Using the developed programme and quality learning environment, the PCN benefits from 5 NA's once qualified whilst the practice receives the tariff.

Benefit Five

By increasing the workforce numbers and a "grow your own" quality, it ensures the GPN has time for more complex care management of patients.

Recognition and special thanks dedicated to Pennine Lancashire locality, Irwell Medical Practice, Angela Ormrod and Nyomi Hope for all the assistance and knowledge shared to create this case study [01/12/22].

NYOMI HOPE

NURSING ASSOCIATE

IRWELL MEDICAL PRACTICE



BACKGROUND

Nyomi started with Irwell Medical Practice in the autumn of 2017 as a Health Care Assistant (HCA). She had previously worked in an LD day service and a care home for approx 10 years.

After completing initial training in her HCA role, she was keen to develop herself after concentrating on her family of three children. She commenced the new **Trainee Nursing Associate (TNA)** training with the support of her practice manager. Nyomi studied at the University of Central Lancashire (Preston Campus) using an **apprenticeship route** supported by her practice.

NEW CONCEPTS

Nyomi assisted with a new pioneering concept of a one-stop clinic that a GP set up for the management of suspected hypertension.

During this clinic, Nyomi would carry out physiological observations and investigations such as BP, pulse, waist measurement, weight and height, calculate BMI and 24 hr BP fitting, bloods, ECG, and urine analysis, alongside giving lifestyle advice as needed with appropriate onward referrals to the up and active weight management service.

On average this freed up 180 more minutes of the GPN, saving approximately £3,400 per annum.

HERE FOR BOTH OF YOU

Nyomi spent a morning each week (Three hours) facilitating the baby clinic alongside the Dr. Nyomi would weigh and measure the baby and complete the red book. Obtain information such as weight, BP, and pulse for the mum's 8-week post-natal check. This has increased the GP capacity within the clinic. Nyomi has gained child hours enabling her to spend time with GPs who may address safeguarding concerns or have a discussion with other members of MDT. This assisted Nyomi's development of partnership working.

"WHILE I WAS ON THE COURSE I ENJOYED
HIKING AND ATTENDING THE GYM AROUND
WORK AND FAMILY, TO MAINTAIN MY
OWN MENTAL HEALTH AND WELL-BEING"

JOURNEY

Nyomi joined the Trainee Nursing Associate programme in January 2019 intake working 30 hours per week. At that time all of Nyomi's outcomes were paper-based and her placements were arranged and organised collaboratively by the training hub, hospital link, Nyomi, and the Practice Leads.

The team was keen for Nyomi to embrace the TNA role and work beyond a Health Care Assistant (HCA) role. They worked in collaboration examining what she could do and achieve as a TNA aligned with the new scope of practice linking this with her learning outcomes from the university.

MDT SUPPORT

Nyomi was able to work with the wider Multi-Disciplinary Team (MDT), spending time with the practice pharmacist for Three weeks as part of her medicine management module.

This afforded Nyomi the opportunity to carry out some high-risk drug monitoring. Nyomi was able to run the search, call patients and arrange appropriate appointments for whatever the patient may need, i.e. bloods, ECG, urine, etc.

Then the following week would ensure that the results had been actioned and appropriate follow-up arranged if needed.

This allows the Pharmacist to prioritise other work for Two hours per week on average. Over a year this is a saving of approximately £2,300.

REVIEW

In the final 6 months of Nyomi's course, we looked at gaps in service and how we were going to help Nyomi make the transition from TNA to an NMC registered NA.

We felt it was important whilst meeting the needs of the service, to enable Nyomi to express how she wanted to develop her role.

PROGRESSION

Nyomi expressed in August 2021 that she wanted to pursue her top-up degree in Mental Health (MH) Nursing.

The practice fully supported this, recognising the benefits to the practice and PCN of having a Mental Health nurse's attributes to draw upon. Nyomi started her course in June 2022 as an apprentice student and will continue to work at the surgery, this showcases career development to others in the Primary Care workforce.

CHALLENGES

Nyomi expressed that the course requirements were challenging at times. However, it gave her a "comfort zone push" and expanded her knowledge.

Difficulties balancing home-work life balance on occasion. These were overcome with good resilience techniques and utilising support networks.

Feeling isolated as a primary care learner with lots of focus on acute care, I now value the PC TNA PEF creation of a PC TNA/NA Community of Practice.

BENEFITS TO THE PRACTICE

OVERVIEW OF SAVINGS TO BE ADDED

- Ability to 'grow your own' nursing workforce
- improved staff retention through career progression
- improved service delivery and patient care

"MY HOPE IS TO CREATE A MENTAL HEALTH
SERVICE WITHIN MY LOCAL PRIMARY CARE
CENTRE SUPPORTING THE LOCAL
COMMUNITY"

SERVICE DEVELOPMENT

Nyomi expressed a passion for supporting military veterans, therefore Nyomi was supported in her aim. She exceeded expectations by achieving the practice a status of a military veteran-friendly practice, this builds patient trust and report whilst supporting Care Quality Commission quality requirements.

Nyomi was also keen to be involved in the care of learning disability patients. Time was set aside for Nyomi to undergo learning disability training in annual reviews, and sit-in sessions were facilitated. Nyomi now manages the call and recall of learning disability patients within the practice, ensuring that they receive an annual review with all appropriate screening, and the carer also receives a carer review.

As a success of this, Nyomi now conducts all the Learning Disability reviews. This equates to 72 hours alleviated for nurses to focus on other duties alongside saving approximately £1,600 pa.

BENEFITS TO NYOMI

Nyomi expressed that the experience broadened the depth and breadth of knowledge she had when caring for patients.

When she qualified as a Nursing Associate, she was part of a profession that had standards and regulations, this gave her a scope of practice that was expanded considerably from her HCA role.

She feels that she has progressed and opportunities for further progression have now opened up to her. Nyomi continues to develop and seeks out every learning experience.

What's Next?

With the support and strict protocols developed in place, and working within professional NMC boundaries, a NA/Trainee MH Nurse like Nyomi can have a varied and extensive role in General Practice.

Recognition and special thanks dedicated to Pennine Lancashire locality, Irwell Medical Practice, Angela Ormrod and Nyomi Hope for all the assistance and knowledge shared to create this case study [01/12/22].

Menti-meter activity

Natalie Bradley – Apprenticeship Relationship
Manager – NHS England, North West

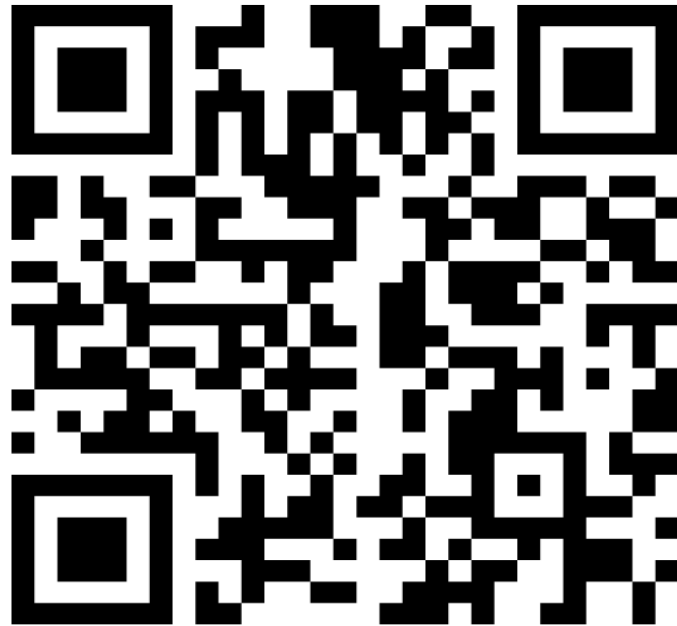


What 3 things will you take away from today's event?



<https://www.menti.com/alqevgc35762>

What would you like to see covered at future events?

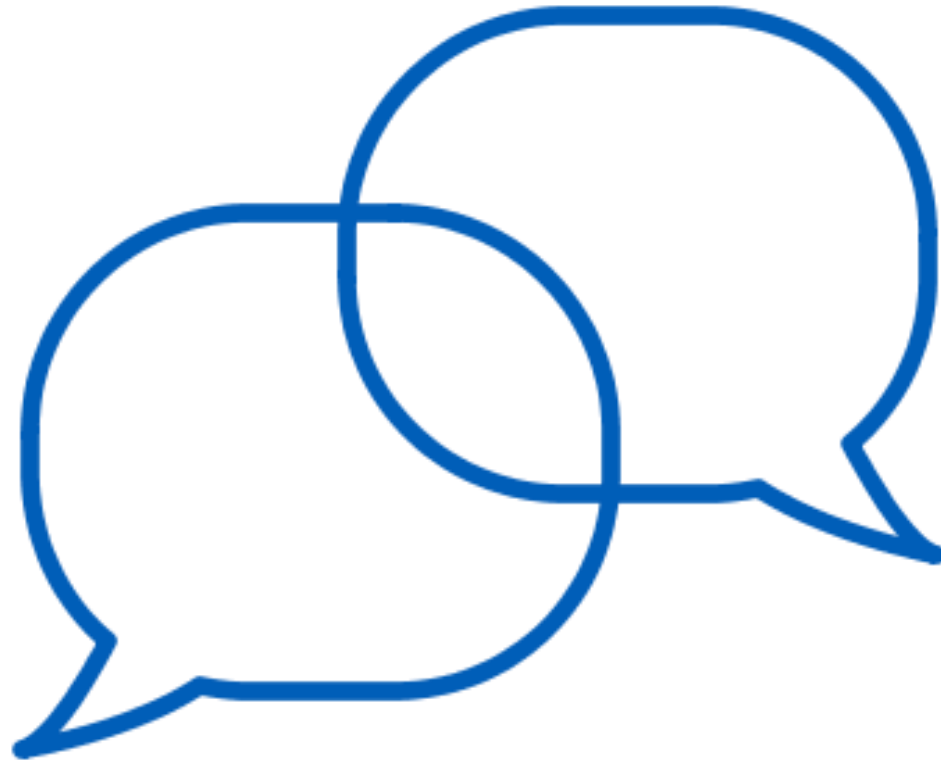


<https://www.menti.com/alqevgc35762>

Apprentice Case Study

Joeann Flannigan – RNDA Apprentice

Q & A opportunity



Thank You