

PACESETTER SCHEME 2020-2022 APPLICATION FORM		
Health Board	Cwm Taf University Health Board	
Pacesetter Scheme Title	Advanced Training Practice Hub & Spoke Model	
What is the problem the scheme will try to address?	General Practice is currently facing an unprecedented workforce crisis, coinciding with increasing demands on primary care with an ageing population with multiple comorbidities and increasing chronic diseases in the wider population.	
	This is not limited to the GP workforce but extends to a shortage of Practice Nurses and Advanced Nurse Practitioners. Presently there is no clear plan at a cluster level to recruit and retain enough GPNs into primary care and we will be in a situation where there is both an acute shortage of GPs and practice nurses, at a time when we are facing the greatest demand on services that we have ever faced. GP practices continue to recruit nurses who are already established practice nurse staff, so this means that they are in essence moving the workforce around rather than attracting the next generation.	
	New roles, such as pharmacists, physician associates etc. are making a positive impact but specific training programmes to equip them with the skills and competencies to work in Primary Care are not established.	
Short description of the scheme. (no more than half a page - embed 'Plan on a Page' if available or add simple template as annex 2)	There are two elements of this scheme, the first concentrates on providing exposure to primary care for pre-registration student nurses. We propose the development of a model that will provide placements to undergraduate nursing students that will offer them in-depth and sustained exposure to primary care whilst being supported by mentorship and training.	
	The second element of the scheme encourages and supports general practitioners in employing newly qualified nurses. Although nurses are deemed fit to practise at the point of registration within any environment where nursing activity occurs, this is always within the scope of their particular skills and experience.	

	This model will provide the scaffolding for the training of newly qualified nurses into practice nurses, and potentially provide a training model for all multi-professional roles. This model has already been extended to include Advanced Nurse Practitioners and Clinical Pharmacists and in the future could include, paramedics, physician associates, physiotherapists, OTs etc.
Allocation requested (£)	£575,000 per year
Start date of the scheme.	Started
Duration of the scheme. (maximum 2 years)	Different elements of the advanced training hub and spoke model have commenced at different times. As is the case with all training the programmes take time to establish it-self and can only be evaluated when trainees complete the programmes. Although the scheme started in 2017 the Health Board is looking for a further 2 years funding in order that the outcomes of the training programmes can be evaluated properly.
Overarching aim of scheme. (What are you hoping to achieve?)	To develop structured training environments, which are owned and run by clusters which support the development of confident competent primary care workforce.
Objectives of the scheme. (The steps you to achieve the aim)	To increase the number of structured educational learning placements within Primary Care within Cwm Taf Morgannwg for Pre-registration nurses, ANP's and Pharmacists.  To promote primary care nursing as a first choice career pathway.  To enable GP's and primary care clusters to work together to focus on workforce planning and development and "growing their own".  To develop the local footprints educational training capacity and capability via increasing its ability to accommodate multi-professional education/training and development opportunities.  To encourage the establishment and lead the development of educator networks.  Improve education quality and governance and act as a local coordinator of education and training for primary and community care.  To ensure a continuous supply of staff capable of successfully working in this environment at all levels and provide succession planning.

	To encourage the up-skilling of existing primary care staff to act as mentors and supervisors as professionally appropriate.  To create and maintain local relationships so that mentorship and supervision skills can be shared across a cluster footprint.  Making sure cluster education/training provision is appropriate for primary care need.  Collecting feedback and sharing best practice on a cluster and also inter-cluster basis to improve the quality of all placements.  Collaboration between Cwm Taf Morgannwg UHB and the University of South Wales and Cardiff University, GP practices. And for CTMUHB to ensure that we train and support skilled, competent and confidential individuals who wish to work within Primary Care in Cwm Taf Morgannwg.
Describe here how the scheme aligns to the wider strategic agenda and indicate which components of the Primary Care Model for Wales, Strategic Programme for Primary Care, A Healthier Wales the scheme addresses. (refer to annex 1)	The core principles of the Primary Care Model for Wales and the Strategic Programme for primary Care and Healthier Wales is; planning care locally; improving access and quality; equitable access; a skilled local workforce; and strong leadership.  The information contained within this proforma demonstrates that the Advanced Training Practice Hub and Spoke Model aims to include all of these principles, giving back control at a cluster level (although supported by the Health Board) to develop a multi-professional workforce for the future which is fit for purpose, has the relevant skills and competencies necessary to meet the challenges and needs of the populations.
Describe how stakeholders, including patients and communities, will be involved in the design, delivery and review of the scheme.	The Health Board's communications team has been supportive in promoting the roles within primary care as part of the 'know your own team' via twitter, Facebook, intranet 'share point' page and wider promotional events have been undertaken as part of the public forums, public events such as Big Bite, 50 plus forums. This has also been promoted to professionals through the Primary Care Newsletter.  GP practices are key to the delivery and the development of a training infrastructure within their practices. We already have very close relationship with the University of South Wales and regular meetings are held to discuss any identified issues as well as the development of the scheme.
Describe expected outcomes. (How will you know when you have achieved your aim - embed draft logic model if available – annex 2)	Hub & Spoke practices established widely throughout Cwm Taf Morgannwg Increase number of newly qualified nurses choosing practice nursing as a career. Increased number of ANP's working within Cwm Taf University Health Board area. An established training programme in place for multi-disciplinary team members transitioning into primary care teams.

	Primary care teams consisting of multi-disciplinary team members working effectively across all cluster areas.		
Has this idea been tested previously, locally, nationally or elsewhere in UK and if so how does this proposed scheme offer new learning?	The initiative mirrors the very successful nurse training scheme that has been operating in England for a number of years; it is based on a model used in Yorkshire which has been running since 2009 and has recruited significant numbers of student nurses into primary care. The Advanced Training Hub Initiative will ensure that trainees are exposed to the 'true' challenges of providing care in the community within a supportive team-based working culture and not in isolation, and for a meaningful period of time. Not aware of any similar training programme for pharmacists or other professions.		
Describe how this scheme is different to what is already in place locally or what has been tested elsewhere.	The Health Boards has taken on pre-registration nurses and pharmacists for many years. However, the placements in primary care tend to be very short and part of wider rotational training programmes in acute, community and primary care. Previously the focus has generally been on acute services and therefore the trainees spend more time in the acute services and because of this they choose a career after qualification in the acute sectors where they have been given the opportunity to work longer as part of a team.  This scheme enables trainees to spend a significant amount of time within Primary Care setting and gives the ownership for workforce development back to clusters. It provides them with the autonomy to plan for their workforce needs, and supports GPs and Nurses to work collaboratively to train their future workforce.		
future workforce.  DETAILS OF THE SCHEME			
Describe the key stages of the scheme and timescales for each stage. (quarterly or relevant intervals)	We already have one Training Hub practice in place with 7 spoke practices providing placements to undergraduate nurses. This year we would like to see this number increased to include the Bridgend practices. There are ten practices in total. They have been approached and the relevant information provided. We envisage that over the course of the next 12 months we will have signed up these ten practices as spokes which will provide an additional 30 placements per year to undergraduate nurses. This provides scope for 54 pre –registration nurses to have exposure to practice nursing in one academic year.		
	We currently have three nurses enrolled on the MSC in Advanced Clinical Practice 4 nurses commenced the ANP 3 year programme in autumn 2017 who will qualify in 2020 and there will be second intake of a further 4 nurse places in the new academic year in the autumn 2019. They will be		

	due to qualify in 2023. The nurses are required to work within a named GP Practice alongside their "Designated Supervisory Medical Practitioner (DSMP) for 2 sessions per week. At the same time they will shadow their designated ANP mentor one day per week, and also work in OOH setting for one session per week.
	The pharmacy transition programme last year was part of a pilot project in conjunction with HEIW. There were 10 pharmacists placed in GP practices, 2 of which were placed within Cwm Taf Morgannwg. We expect to have 4 pharmacists placed this year.
	We are in discussions with the practice nurse educators to develop an educational programme that will be accessible to newly qualified nurses who are employed by GP practices. The training plan will incorporate the unique skills required for practice nursing and will ensure that these skills are acquired within a set timescale agreed with the practice. This plan will be finalised this year and we aim to be offering this scheme to practices by January 2020.
Describe the governance and project management arrangements for the scheme including lead	Each element of the programme has an identified clinical lead and a project manager supporting. In addition to this there is support from the Senior Nurse for Primary Care and also the clinical nurse educators.
roles. (project support, clinical and non-clinical lead(s)	A workforce Steering Group has been established to the delivery and monitor progress of the entire programme
	Progress against the pacesetter objectives is monitored through monthly Clinical Business Meetings and reported through to the Primary Care Committee which is a sub group of the Board.
Describe the plans and key milestones for monitoring progress and evaluation. (attach an outline logic model and	Pre- Registration Nursing Two pre-registration student nurses have completed their consolidation within general practice because of their experience during their placement, with a third due to return to the practice in which they spent their 6 week placement for their consolidation.
evaluation plan, if available- see annex for template)	To date one nurse has gone on to be employed as a practice nurse straight from qualifying. There has been overwhelmingly positive student evaluation with feedback from the University Of South Wales showing students rate their time with the hub and spoke model within the top 5% of placements.

As a direct result of the scheme there are now 15 nurse mentors in place throughout the practices in Cwm Taf Morgannwg with 10 being new as a result of the project and there is one new sign off mentor. This has provided development opportunities to these practice nurses, which allows them to share their expertise and experience through mentorship whilst students are placed in the practice.

#### Advanced Nurse Practitioner

An evaluation around the induction onto the programme and an annual end of year evaluation has been developed.

### Pharmacy Transition Programme

Cardiff University has completed an evaluation of the first 6 months of the programme. We are awaiting the feedback. The evaluation includes the competency framework, training programme and roles of the pharmacist tutor and clinical supervisor.

There has been positive informal feedback from GP Pharmacists and tutors in respect of structured approach and use of clinical network.

#### **Evaluation of Educational Component**

Pre- Registration Nursing

The student nurse successfully completes their Batchelor of Nursing Degree and has gained insight into the skills required to become a practice nurse.

#### GPN Ready Scheme

At the end of the two years the Practice Nurse will have completed the training programme that was put in place and have achieved the competencies required in line with the RCGP Practice Nurse framework

#### Advanced Nurse Practitioner

The nurse will successfully complete their MSc in Advanced Clinical Practice.

### Pharmacy Transition Programme

The pharmacist will have gained the skills required to work within the primary care setting This transition programme does not provide any qualification but is to ensure that the pharmacist is safe and competent to work within the GP sector. It will then lead on to other qualifications e.g. Independent prescribing, minor illness module training, anticoagulation training etc.

Describe what resources (expertise and financial) has been allocated for evaluation.	The Health Board is fortunate in that it has its own Primary Care Research department who are providing support.  The Clinical Leads for the pre-registration and ANP training programmes and the pharmacy programmes have strong connections with the respective Universities and are lecturers for the formal
	academic nursing and pharmacy syllabuses.
Outline the ways you plan to share the learning locally and nationally.	Learning is being share widely. The GP lead and project lead from the Health Board takes every opportunity to share this scheme widely. They have met with Welsh Government and HEIW colleagues, pacesetter events, local cluster leads meeting and they have met on an individual basis with others from different Health boards. There appears to be a lot of interest in this scheme as it gives the ownership back to clusters and offers robust training programmes.

## Annex 1

Primary Care Model for Wales	TICK
1. An informed public	
2. Empowered communities	
3. Support for well-being, prevention and self-care	
4. Local services (inc more services in the community)	Х
5. Seamless working	
6. Effective telephone systems	
7. Quality out of hours care	X
Directly accessed services	
). Integrated care for people with multiple care needs	
Estates and facilities support MDT working	
1. IT systems enable cluster communications and data sharing	
2. Ease of access to community diagnostics supporting high-quality care	
3. Finance systems designed to drive whole-system transformative change	
A Healthier Wales - The Ten Design Principles (page 17)	TICK
. Prevention and early intervention – enabling and encouraging good health and wellbeing	
Safety – healthcare does no harm, enabling people to live safely in families and communities	
Independence – supporting people to manage their own health and wellbeing and remain in their own homes	
Voice – Empowering people to understand, manage and make decisions about their health, wellbeing and care	
Personalised – services tailored to individual needs and preferences	
Seamless – services and information which is not complex and co-ordinated	
'. Higher value – better outcomes and patient experiences	X
3. Evidence driven – understand what works, evaluating innovative work and learning from others	

9. Scalable – Ensuring that good practice scales up	
10. Transformative – news ways of working are affordable and sustainable and change or replace approaches	Х
Aims of the primary care pacesetter fund	TICK
Sustainability – contracting general medical services at cluster level	Х
Use of digital technology to improve access	
3. Delivering more care in the community	
The Strategic Programme for Primary Care	TICK
Prevention and wellbeing	
2. 24/7 Model	
3. Data & Digital Technology	
4. Workforce & Organisational Development	X
5. Communication & Engagement	
6. Transformation & the Vision for Clusters	