Analysed: Government plans for nursing education

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The government has revealed its ambitions for nursing and healthcare education. Jo Stephenson has looked over the details and analysed what they will mean for the profession.

All nursing students will learn about dementia and once qualified can go on to do a new qualification in caring for older people, as part of the government’s plans for the healthcare workforce.

The plans also highlight the need for more focus on developing community nurse capacity, and opportunities for healthcare assistants to enter nursing and midwifery.

The measures are included in a mandate document setting out the government’s priorities for the body Health Education England from now up to March 2015.

Older people

The mandate said all nurses “need to be competent in managing and delivering care for older people”. The content of degrees will be reviewed to ensure new nurses have the right skills to look after older patients and all undergraduate courses will include training in dementia by September 2015.

All existing NHS staff, including nurses, will get dementia awareness training by 2018. Meanwhile HEE will work with the Department of Health, Public Health England and the nursing profession to develop “a bespoke older persons’ nurse postgraduate qualification training programme”.

The first nurses are due to start the course in September. Those who complete it will then have the chance to join an Older Persons’ Nurse Fellowship programme. “This will enable nurses in this field to access a clinical academic pathway,” said the mandate.

Though not precisely the same, the move echoes recommendations in the Francis report in care failings at Mid Staffordshire Foundation Trust for the creation of a registered older person’s nurse.

Royal College of Nursing head of policy Howard Catton said that while it was important to have nurses with specialist skills who could lead and mentor others it was important to recognise that the “overwhelming majority” of nurses would be working with older patients in the future.

“If we think we’re going to deal with a future ageing population with a postgraduate course for a small number then we can’t,” he said. “We must not miss the fact that older people are going to be the lion’s share of the majority of patients that nurses are caring for in the future and those are skills everybody needs.”

Community nursing
The targets set for HEE also reflect efforts to move more care into community settings.

The plan promises all nursing students will get work experience in a community setting by September 2015 and more support for nurses who want to move from acute care to work in the community, including “easy access conversion courses”.

The move is clear recognition of the growing evidence of the pressures faced by nurses working in community settings. The Queen’s Nursing Institute, the RCN and others have repeatedly warned of increasing caseloads, case complexity and an ageing workforce.

“Increasing the numbers of general practitioners and community nurses will be crucial”

Latest workforce figures revealed that while many areas of nursing were seeing a rise in numbers, the opposite was true for district nursing – in contrast to the government’s long-term strategy of moving more care delivery into the community.

“Increasing the numbers of general practitioners and community nurses will be crucial in delivering more proactive and community based care to all and in providing in producing more personalised care for frail older people,” said health minister Dr Dan Poulter in an introduction to the document.

However, Mr Catton cautioned that five years would be the minimum period needed to establish the necessary community workforce shift.

“The scale of the challenge and complexity of it mean this is a least going to be a five year programme of work to start to move the nursing workforce into a place where it’s really able to support some of these service changes and increasing patient needs and demands,” he said.

Dignity and compassion

In addition, the document reiterates the government’s focus on dignity and compassion among the NHS workforce.

New recruits to NHS education courses will be expected to pass a “values-based” test from next year in a bid to embed respect, dignity and compassion in future workforces – in line with government policy following the Francis report into care failings at Mid Staffordshire Foundation Trust.

Health Education England’s mandate from the government stated it must “ensure that selection into all new NHS funded training posts incorporates testing of value-based recruitment by March 2015”.

According to the mandate, the test should ensure the “importance of values as well as skills, and the need to treat patients with respect and dignity” in training programmes funded by HEE.

The need to instil a system of values as well as skills into the NHS was one of the central lessons of the Francis report, according to the Department of Health.

Health minister Dan Poulter said: “Patients have the right to feel confident that they will be treated with dignity and respect.
“Compassionate care must be at the very heart of our NHS,” he said. “This mandate will make sure that NHS employers only recruit health and care workers with the right skills and the necessary caring values to give patients, carers and their families the treatment they deserve.”

**HCA scheme for aspirant nurses**

The mandate also confirmed the continuation of a controversial pilot scheme that sees aspiring nurses spend up to a year doing paid work as an HCA before embarking on a nursing degree – signalling that ministers look set to drive through the idea, despite opposition from the profession at large.

Eventually the government would like to see all prospective nursing students first gain frontline care experience, learn core care values and develop their knowledge and skills, stated the document.

The mandate reveals at least two more cohorts of students will embark on the pilot scheme – one starting in October this year and one in February 2015.

But Mr Catton said there was still big questions over the value for money of the scheme and whether it was feasible or necessary for all nurses to do it.

**“People may have come into the service with the best intentions but lost sight of those values”**

Howard Catton

He said the real test would be whether those who’d gone through it stayed in nursing: "Does it mean people who come in this way are better prepared or more immune to the pressures and demands of nursing?"

Overall, he said simply focusing on the values, attitude and behaviour of people coming into the profession may not be enough to address key issues around the culture of the NHS.

“When we look at where things have gone wrong, the issues with attitudes and behaviours are with people who have been in the service for a longer period of time who may have come in with the best intentions but lost sight of those values,” he said.

“We need to be paying as much attention to people once they have been in the service or caring for a few years to support them to stay true to those values and ensure they don’t get burnt out.”

**Support for healthcare assistants**

Meanwhile, the mandate stresses the importance of providing opportunities for HCAs to move into nursing and midwifery. Measures include helping support workers to access fully-funded, part-time degrees and the new Nursing Higher Apprenticeship announced earlier this year.

Measures to support this includes developing clearer career paths for HCAs and maternity support workers and helping more to access fully-funded part-time degrees with new courses to "support greater social and workplace mobility for health support workers” introduced by September 2015.

In general, there will be more support for NHS staff who want to become nurses to do part-time training to fit in with family life or work.

The document confirms Health Education England is working with education providers to establish a course to help staff to enter nursing by this route. It is expected to be up and running by October with 100 staff signed up. The ultimate aim is to roll it out across the NHS.
The Department of Health also wants Health Education England to look into developing new “bridging programmes” into professional training on top of the Nursing Higher Apprenticeship announced earlier this year.

Overall, Mr Catton said the “direction of travel and guiding principles” of the mandate were sound, including the fact it recognised the need to increase nurse numbers, take action to address weaknesses in community care, need to invest in band 1 to 4 staff and support wider career development.

“This flags up a number of key issues that clearly require attention and they have made a good start on some of those,” he added.