

**Professional Framework Emergency Nursing Care Project
Steering Group Meeting**

**Venue: Meeting Room, NIPEC, 2nd Floor, Centre House,
79 Chichester Street, Belfast**

Date: 3rd September 2015

Time: 15.00 - 16.00

Notes of Meeting

In attendance

Linsey Sheerin, Chair, Emergency Nursing Network, RCN (LS)

Frances Cannon, NIPEC, Project Lead (FC)

Roisin Devlin, NIPEC, Professional Officer (RD)

Sharon McRoberts, Assistant Director Nursing Workforce & Education, SEHSCT (SMcR)

Helen McNeilly, Lead Emergency Nurse Practitioner NHSCT (HMcN)

Geraldine Byers, Nurse Consultant Emergency Care, BHSCT (GB)

Heather Finlay, Nursing Officer Workforce and Education, DHSSPS (HF)

Diane Gillespie, Senior Sister A&E, BHSCT (DG)

Anne-Marie Philips, Nurse Education Consultant, CEC (AMP)

Siobhan Donald, Nurse Consultant, PHA (SD)

Mandy Hawthorne, Sister, RBHSC (MH)

Teleconference Call

Martina Brown, Emergency Nurse Practitioner, WHSCT (MBR)

Olive MacLeod, EXoN NHSCT (OMacL)

Dr Vidar Melby, Senior Lecturer, UU (VM)

Apology

Garrett Martin, Royal College of Nursing (GM)

Moira Mannion, Assistant Director Nursing Workforce & Education, BHSCT (MM)

Jill Fleck, Dept Manager - Emergency Medicine A&E, SEHSCT (JF)

Mary Burke, General Manager – Medicine & Unscheduled Care, SHSCT (MB)

Johanna McMullan, Lecturer in Education, QUB (JMcm)

Item	Notes	Action
1	Welcome and introductions	
	LS welcomed everyone and thanked them for attending the meeting.	noted
2	Minutes from previous meeting	noted
	LS went through the minutes from the previous meeting and they were agreed by the group	
3	Update of the project to date	
	RD gave an update on the project to date and what had been achieved	LS
4	Feedback from the Band 3 scoping tool	RD
	<p>In MM's absence RD gave an update on the Band 3 sub group. She highlighted that each Trust was represented and that a scoping tool of skills currently be carried out by Band 3 staff was sent to and completed by all Trusts.</p> <p>It was felt important that NVQ/QCF level 3 be completed no earlier than 6 months in ED and by no later than 18months</p> <p>There was only 1 ED that had a specific Band 3 ED induction programme</p> <p>SMcR asked if this could be shared among the other Trusts – RD to action</p> <p>From the results of the scoping tools, RD compiled a Framework for Band 3 staff which was agreed by the sub group – this is to be circulated around the Steering Group for comments</p> <p>There was some discussion re specific skills to be undertaken by Band 3 staff and OMacL reminded people re the delegation Framework and registered nurses' responsibility re the same</p>	
5	Feedback from ENP sub group	SMcR
	<p>SMcR feedback that scoping tools were distributed to all Trusts for ENPs to complete and there were a total of 33 completed forms (1 department completed a tool on behalf of all their ENPs)</p> <p>The highest response came from those that were qualified the longest period of time</p> <p>There was a wide variation in the scope of practice and</p>	

	<p>education and the ENPs within RBHSC held a Band 6 post</p> <p>The more experienced ENPs were keen to extend their scope of practice with appropriate training and supervision - They also were keen for in house training and support from consultants</p> <p>A definition of an ENP was circulated for the steering group to read and RD will circulate it for comment</p> <p>It was highlighted that a need for a regional JD would be beneficial – RD stated that she had sent out Trust JD to the sub group but there was no consensus on the best one</p> <p>VM asks would it be possible to align the JD with the Australian standards – VM to forward same to RD for circulation to the steering group</p> <p>SMcR suggested that a regional JD may be a piece of work that the workforce leads take forward and will go back to them for endorsement</p> <p>GB highlighted that ENPs were senior members of nursing staff and this needed to be reflected in the Framework – OmacL stated that there needed to be caution about introducing a managerial role into a clinical role – GB highlighted that she was not suggesting that and that it was a leadership role she was referring to</p> <p>VM also highlighted the importance of ENPs in leadership/ practice development roles</p> <p>RD to circulate the Framework for comment – she asked the steering group not to distribute the Framework as it was very much in draft form</p>	
6	Manchester Triage Update	FC
	<p>FC stated that the Framework had been circulated to all Trusts for comments</p> <p>She stated while the Framework's layout may need adjusted slightly, the content would not change</p>	
7	Communique	Noted
	RD circulated the latest communique for noting	

8	ECA Update	RD
	<p>RD gave an update on the ECA competency portfolio</p> <p>She highlighted that it should be ready for pilot by the end of the year – then a second bid would be put in to allow it to become electronic – there would also be bids to look at development for an ENP, Band 6/7 and Band 3 piece of work</p> <p>The next meeting is the first week in December</p>	
9	Discussion re final vision for the Framework	
	<p>RD gave a final vision for the Framework and how all of the work would link together</p> <p>This would be an interactive site with plenty of experiences from ED nurses and links to appropriate courses and learning</p> <p>VM asked would it be useful to create an ED specific work based induction programme in line with the University – SMcR stated if VM sent her a proposal she would table it at ECG</p> <p>RD will write to the ExDoN and ED departments asking for volunteers</p>	
10	Review of PID	
	<p>LS went through the PID and the aims and objectives and it agreed that the project was on course to achieve these</p>	
11	Agreed next steps	
	<p>FC will discuss the possibility of a business case with NIPEC Chief Exec for the IT to allow the Framework to be interactive</p> <p>Rd will send out all documents to the Steering group for comment</p> <p>Rd will send out a doodle poll for the next meeting in Jan</p>	