

A Strategic Framework

for Developing Practice Development Knowledge,
Skills and Expertise in Northern Ireland

Operational Plan

Facilitating the Development of Practice



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This operational plan was developed in partnership with Nursing and Midwifery representatives from the University of Ulster, the Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC), all five Health and Social Care Trusts, Queen's University, Belfast and the Royal College of Nursing.

Introduction and Purpose of the Operational Framework

In 2009, 'A Strategic Framework for Enhancing Practice Development Knowledge, Skills and Expertise in Northern Ireland' was developed as a partnership between The University of Ulster, NIPEC, the Health and Social Care Trusts, Queen's University, Belfast and the Royal College of Nursing. This framework sets out a vision for the systematic development of practice development knowledge, skills and expertise with the intention of achieving a regional, joined up approach to the development, commissioning and evaluation of practice development learning programmes, which are strategically appropriate and better reflect organisational needs.

In 2010 an implementation group was established with the remit to:

1. Promote ownership of the strategic framework within all Health and Social Care Trusts in Northern Ireland.
2. Encourage strategic working between education providers across Northern Ireland.
3. Inform the development of a range of learning opportunities that will facilitate the growth of skills and expertise across the novice to expert learning and development framework.
4. Influence the design of Trust based activities that will facilitate the growth of skills and expertise across the novice to expert learning and development framework.
5. Design and agree a process to quality assure learning and development opportunities.
6. Provide guidelines for the evaluation of Practice Development activities to demonstrate its value to enhancing person-centred care/cultures.

The framework was officially launched in October 2011 at a seminar in Belfast attended by individuals representing a range of key stakeholder groups. The key strategic issues for implementation identified were:

1. Location of practice development within existing Health and Social Care Strategy.
2. Collaboration between all stakeholders.
3. On-going development of practice development knowledge, skills and expertise.
4. On-going development of facilitators.

Key Message:

- Collaboration between all stakeholders
- On-going development of Practice Development and facilitation knowledge, skills and expertise

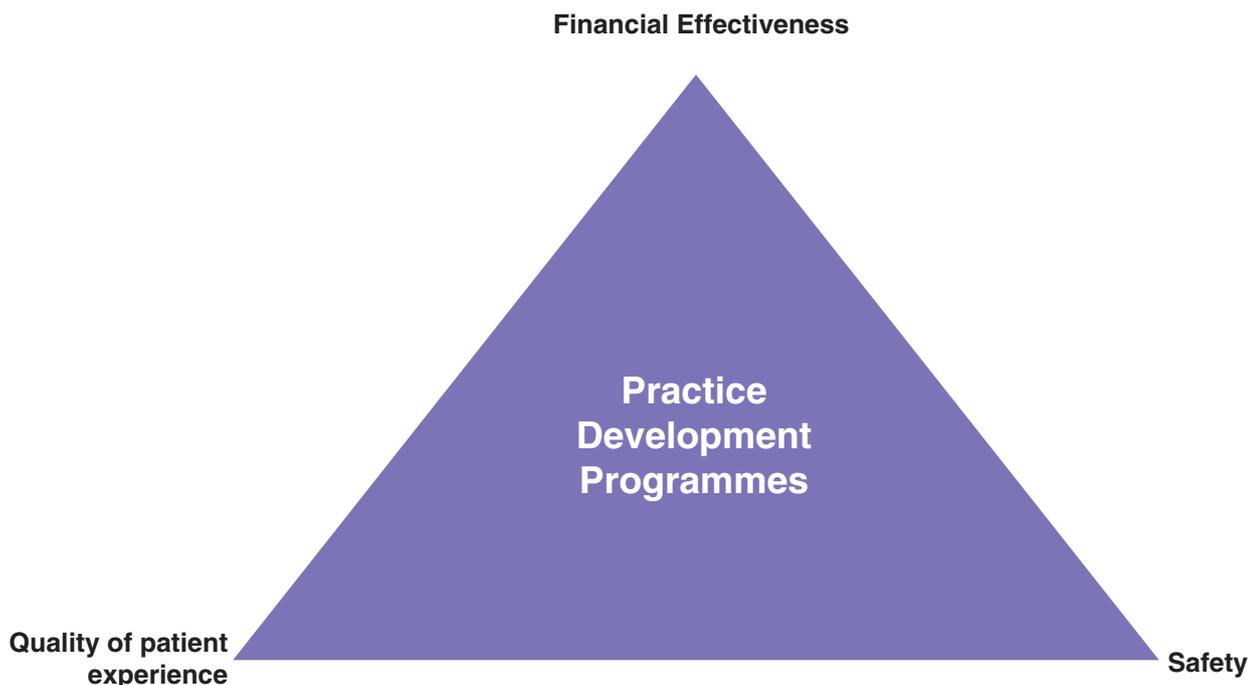
The Benefits of the Strategy to Health & Social Care Services

The modernisation of health and social care services is aimed at improving health outcomes, raising the quality of service delivery and improving the patient experience across the pathway of care. These aspirations are underpinned by principles of safety, effectiveness, efficiency, equity, access, and patient participation. Practice Development uses systematic processes to focus specifically on developing people and transforming their practice to achieve effective person centred care. Both approaches are necessary for clinical and cost effectiveness. As outlined in the strategy document, practice development with its focus on person-centred care:

- Translates complex organisational and strategic agendas into practical reality for staff and patients.
- Engages staff with the larger vision by creating links with their own aspirations.
- Achieves sustainable change through facilitated work-based learning , staff empowerment, knowledge translation, and fostering positive team relationships.

Thus the implementation of practice development programmes in organisations impacts on three key aspects of the organisation:

- Financial effectiveness
- Quality of patient experience
- Safety



Practice development programmes with their commitment to facilitating the development of effective workplace cultures that are person-centred ensures that the quality of the patient experience is kept at the forefront of activities but always with consideration for key safety agendas and financial probity. Thus practice development is critical to the achievement and sustainability of key strategic priorities and enables Trusts to meet productivity, efficiency, safety and quality targets, as it equips frontline staff with the knowledge, skills and expertise to create local cultures of effectiveness.

The Skills Escalator and how to use it

At the heart of the Strategic Framework for enhancing practice development knowledge, skills and expertise in Northern Ireland is 'The Skills Escalator' (Appendix 1). This escalator identifies the learning outcomes that individuals should have achieved at the 5 different levels, with the underpinning assumption that movement should be dependent on attaining the knowledge and skills at each level before moving to the next. It is essential that systems and processes are in place to enable staff to assess their existing practice development knowledge and skills in order to determine the 'level' at which they enter the framework and pursue their development.

In Appendix 2 we identify a range of learning activities that may meet identified learning needs. These activities reflect the different levels of the skills escalator.

How to use the escalator?

In order to use the skills escalator effectively, an individual practitioner needs to be able to position themselves on the continuum from novice to expert. This involves undertaking a 'learning-needs analysis' of existing knowledge and skills by using processes such as 360 feedback, reflective appraisal and peer-review. The principle of generating portfolio evidence to demonstrate acquisition of knowledge and skills is similar to that used with other competency frameworks, for examples, Attributes Framework (BHSCT & SEHSCT 2010) and Ward Sister/Charge Nurse Competency Framework (NIPEC 2010).

Nurses and midwives can access a range of learning and development resources and keep a record of their practice development activities by creating their own electronic portfolio at www.nipec.org it's easy to do, free to access and it is a secure site. In addition, details of practice development projects and initiatives can be added to or viewed on the All-Ireland Practice and Quality Database at www.nipec.org

Key Message:

- There needs to be systems and processes in place to enable staff to assess their practice development knowledge and skills
- To use the skills escalator effectively, practitioners need to be able to position themselves on the continuum from novice to expert

Pathways to Developing Practice Development Knowledge, Skills and Expertise

Below, we provide three scenarios of 'typical examples' of individuals who are developing their practice development knowledge, skills and expertise. Table 1 is a working example of how individual practitioners can present outcomes from their learning and development against the skills escalator (using the example of 'Mary' who has no experience of practice development).

No experience of Practice Development

Mary has been qualified for 6 months and is working in a rehabilitation unit for older people. She feels that there are many aspects of practice she would like to change in the unit that would enhance the experience for patients, but is conscious that there is a very experienced nursing team who have worked in this area for many years. Mary is unsure where to start and feels she is lacking the knowledge and skills that would enable her to engage in changing practice. When speaking with an Education Facilitator about her concerns she is asked about her awareness of practice development as an approach to promoting person-centred practice. Mary has never heard of practice development and is encouraged to attend a range of introductory modules that include: understanding the principles of practice development; exploring person-centredness in practice; and how to learn in and from practice through critical reflection. These modules have now enabled Mary to engage in some challenging conversations with her team about practice issues.

Foundation knowledge

Sheila has completed a foundation practice development module and would like to advance her learning and experience with the concept. She seeks professional advice from a practice development facilitator in her trust. Firstly Sheila is advised to further her studies within practice development by taking a facilitation and leadership module, which will focus on knowledge of leadership and models of facilitation. During the module she experiences a range of facilitation methods currently being promoted in her trust, namely Action Learning Sets, Clinical Supervision and Critical Companionship. With a good grasp of these models she, with the assistance of an experienced facilitator and some funding, is able to develop an action learning set in her clinical area which ultimately examines a person centred issue.

Experienced in Practice Development

Caroline has been working as a Ward Sister in a busy surgical unit for 5 years. She has initiated a range of practice development activities in her unit and has received help in doing so from the 'Practice Development Facilitator' employed in her clinical directorate. She also undertook an 'introduction to practice development' 2-day short course which helped her link the work she had been doing to key concepts (such as evidence-informed practice, and, person-centred practice). Through this short course and the learning she has undertaken through her collaboration with the practice development facilitator, Caroline has developed a good foundation understanding of key theories, tools, methods and ways of developing practice. Using the skills escalator, Caroline has identified that she is operating at the 'competent' level. However, now Caroline needs to develop her knowledge and skills further and have a greater theoretical understanding of practice development frameworks, models and tools in order to help create the learning environment and person-centred culture of her unit. She is involved in other Trust-wide initiatives (such as Productive Ward) and believes that developing her practice development knowledge, skills and expertise further would greatly help her to integrate all these developments in her unit. Caroline's manager supports her assessment and agree that Caroline should apply to attend a 'Practice Development Foundation School'.

How HSC organisations can move forward?

Whilst this document has highlighted how the skills escalator can be used by an individual nurse or midwife, or indeed another health professional, it is important to also identify some steps that will enable HSC organisations to support this agenda. The following are some action areas that should be considered:

- undertaking an assessment of learning needs using the practice development skills escalator at team and/or organisational level, supported by the guidance provided by NIPEC (2008), and using these results to inform the education commissioning process
- developing an understanding within the organisation of the range of practice development products that can be commissioned to address the needs identified, for example, Developing Practice in Healthcare Programme and Postgraduate Certificate in Facilitating Learning and Development, Practice Development Module (Level 2 Diploma, and Level 3 Degree), Leading and Facilitation Module (Level 3 and 7)
- building capacity for engaging in practice development within teams by ensuring a cohort from any one team has the opportunity of a shared learning and development experience
- delivering practice development programmes that are flexible to take account of the diverse learning needs that will exist across teams
- integrating the Practice Development Knowledge and Skills Framework formally into appraisal systems and person development plans.

Developing Facilitation Expertise

The implementation of the strategic plan is dependent on the on-going availability of skilled facilitators who can facilitate the learning and development of others, as well as practice development programmes in Trusts. Therefore collaboration will be fostered with the 'International Practice Development Collaborative' [IPDC] and local education providers for the development of facilitation expertise.

Key Message:

Organisations need to:

- Assess learning needs
- Understand the range of Practice Development products available
- Build capacity for engaging in Practice Development
- Integrate the Practice Development knowledge and skills framework

References

Benner, P. (1984) *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*. California: Addison-Wesley.

Belfast Health and Social Care Trust & South Eastern Health and Social Care Trust (2010) *Professional Attributes Framework*. Belfast Health and Social Care Trust & South Eastern Health and Social Care Trust.

NIPEC (2010) *Supporting Professional Development. A Competence Assessment Tool for Ward Sisters/ Charge Nurses*. Belfast: NIPEC.

NIPEC (2008) *Learning Needs Analysis for Nurses and Midwives. A Guide for Ward Managers and Team Leaders*. Available at <http://www.nipec.hscni.net/pub/LNA%20Dec08.pdf> Accessed 20th March 2012.

APPENDIX 1: PRACTICE DEVELOPMENT LEARNING AND DEVELOPMENT FRAMEWORK

The Skills Escalator

The framework presented in Figure 1 is based on the idea of a skills escalator connected to Benner's (1984) five levels of competence: novice, advanced beginner, competent, proficient and expert. The Framework attempts to identify the learning outcomes that individuals should have achieved at the 5 different levels, with the underpinning assumption that movement should be dependent on attaining the knowledge and skills at each level before moving to the next. It is essential that systems and processes are in place to enable staff to assess their existing practice development knowledge and skills in order to determine the 'level' at which they enter the framework and pursue their development. Processes such as 360° feedback, reflective appraisal and peerreview are critical to the assessment of existing knowledge and skills against the skills escalator as set out in Figure 2, to the success of such assessment and the subsequent development opportunities availed of.

A summary of each level of development is provided below.

1. As a **novice**, the individual will focus on gaining an understanding of some of the core components that are central to practice development. At this stage there would not be an expectation that individuals would understand how these components fit together.
2. As an **advanced beginner** the individual begins to explore the theory of practice development and other related concepts that will inform this understanding, such as leadership, facilitation and active learning. At this stage individuals also begin to reflect on the attributes required to engage in practice development.
3. As a **competent** practitioner, individuals will continue to build on their theoretical understanding of practice development, but also start testing some of their knowledge and skills in practice. The understanding of team working and group dynamics begin to become important at this stage, as do the methods used for evaluating practice change.
4. As a **proficient** practitioner, individuals begin to apply a level of critique to their practice development activities and can clearly articulate links between concepts. At this level there is the expectation that individuals would contribute to the knowledge webase and to the further development of practice development approaches.
5. As an **expert**, individuals are performing at the highest level, facilitating systematic and rigorous practice development programmes with the aim of generating new knowledge and making links between theory, research and practice.

Figure 1: “The Skills Escalator”

<p>NOVICE</p> <p><i>Acquiring a basic understanding of PD principles</i></p>	<p>ADVANCED BEGINNER</p> <p><i>Acquiring an understanding of PD theory, models and frameworks and their applicability to practice</i></p>	<p>COMPETENT</p> <p><i>Developing competence in the application of theories, models, frameworks & tools.</i></p>	<p>PROFICIENT</p> <p><i>Critical application of theories, models, frameworks and tools.</i></p>	<p>EXPERT</p> <p><i>Leading PD and contributing to the development of new knowledge</i></p>
<p>The learner should acquire a basic understanding of:</p> <p>PD principles of Collaboration, inclusion and participation.</p> <p>PD methodologies.</p> <p>Principles of person- centred practice.</p> <p>Reflective practice.</p> <p>Values and making values and beliefs explicit.</p> <p>Workplace culture.</p> <p>Evidence informed practice.</p> <p>The context (unit, organisational, strategic and policy) of practice.</p> <p>Self & peer assessment using reflective appraisal and 360^o feedback.</p>	<p>The learner should acquire an understanding of:</p> <p>Underpinning theories of PD focusing on how these theories enable emancipatory change.</p> <p>Different forms of evidence for practice.</p> <p>Principles and models of facilitation and mentorship.</p> <p>Active learning approaches and frameworks.</p> <p>The necessary attributes and skills for developing practice.</p> <p>Using and informing policy and strategy in the context of undertaking PD.</p>	<p>The learner should know how to apply their understanding of:</p> <p>Theories of PD in the context of changing patterns towards effective person centred workplaces.</p> <p>Models, frameworks and tools and their critique in practice.</p> <p>Reflection on and evaluation of personal effectiveness.</p> <p>Team effectiveness and working with groups.</p> <p>Evaluation frameworks taking account of different stakeholder perspectives.</p> <p>Policy and strategy developments and the contribution of PD to these.</p>	<p>The learner should be able to critique and generate new understandings of:</p> <p>How to create learning cultures using active learning approaches.</p> <p>The development and application of evaluation frameworks in practice.</p> <p>Systematic processes to generate knowledge in and from practice.</p> <p>Leadership in developing practice.</p> <p>Influencing practice development in strategic and political contexts.</p> <p>The use of practice development methodology to enable the implementation of key strategic developments, such as clinical supervision, patient experience standards, person-centred care, productive ward and LEAN.</p>	<p>The learner should be able to collaborate with and lead on practice development and practitioner research programmes that:</p> <p>Contribute to the ongoing development of facilitation skills and PD capacity building.</p> <p>Generate new knowledge through masters level and doctoral level programmes.</p> <p>Influence strategy and policy.</p> <p>Enables practitioner research to be realised.</p> <p>Making explicit links between, practice, knowledge, skills, tools, methodologies and theories</p>
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Appendix 2: Learning Activities Matched to the Skills Escalator

<p>NOVICE</p> <p><i>Acquiring a basic understanding of PD principles</i></p>	<p>ADVANCED BEGINNER</p> <p><i>Acquiring an understanding of PD theory, models and frameworks and their applicability to practice</i></p>	<p>COMPETENT</p> <p><i>Developing competence in the application of theories, models, frameworks & tools.</i></p>	<p>PROFICIENT</p> <p><i>Critical application of theories, models, frameworks and tools.</i></p>	<p>EXPERT</p> <p><i>Leading PD and contributing to the development of new knowledge</i></p>
<p>RCN: An introduction to practice development principles and facilitation skills (certificate level)</p> <p>QUB : Person Centred Assessment (degree level)</p> <p>QUB : Practice Development (level 2 and 3 see footnote)</p>	<p>UU: Understanding practice development (degree level)</p> <p>UU: Facilitation and leadership (degree level)</p> <p>UU: Practitioner as researcher (degree level).</p>	<p>UU: Practitioner research project (degree level)</p> <p>UU: Enhancing practice development (masters level)</p> <p>UU: Facilitation and leadership in developing practice (masters level)</p> <p>UU: Enhancing skills in developing practice (masters level)</p> <p>QUB : Person Centred Assessment (masters level)</p> <p>UU: International-Practice Development Collaborative, Practice Development School (degree level)</p>	<p>UU: Critical inquiry in Developing practice (masters level)</p> <p>P G Cert. Health and Wellbeing (Facilitating learning and development (masters level)</p>	<p>UU/QUB : MS c Research Modules (masters level)</p> <p>UU: International Practice Development Collaborative, Advanced Practice Development School (masters level)</p>

The QUB Practice development module is normally available at level 3. However, in line with current commissioning arrangements, QUB will consider running the module at level 2 for 2 concurrent years, where trusts can provide sufficient numbers. Level 2 numbers should be made available to the QUB business and contracts manager.

Table 1: Worked example for Mary as a novice practice developer

Learning outcomes for novice	Sample of evidence
PD principles of collaboration, inclusion and participation	<p>During my pre-reg I had experience of working within small groups on a designated project focusing on nutrition in acute settings for older people. This required the group to negotiate the plan of action and who would take responsibility for each aspect of this work. <i>(Evidence: Final report).</i></p> <p>I have no understanding currently about practice development as an approach.</p>
PD methodologies	I have no knowledge of practice development methodologies.
Principles of person-centred practice	<p>During my pre-reg programme I was exposed to the concept of person-centredness. However, as part of my perceptorship programme I have been supported to attend a workshop to enable me to understand how the principles of person-centredness informs the care planning process.</p> <p><i>(Evidence: anonymised care plan and reflective learning from workshop).</i></p>
Reflective practice	<p>I have much experience from my pre-reg programme and recent Perceptorship Programme of completing critical reflections on elements of my practice using John's model.</p> <p><i>(Evidence: extract from portfolio).</i></p>
Values and making values and beliefs explicit.	I am unsure how this relates to my practice.
Workplace culture	I have some awareness of the concept of workplace culture, but I have limited understanding of how a workplace culture can be assessed and supported to be different.
Evidence informed practice	<p>As part of my pre-reg programme I was expected to use evidence to inform my assignment work and ensure application of best practice during my placements with the support of my mentor. I am becoming aware that there can be a gap between theory and practice and I am unsure how to bridge this gap in collaboration with my colleagues. Also, I am beginning to understand that evidence has many forms.</p> <p><i>(Evidence: reflective account focusing on the delayed mobilisation of an older person, which would be contrary to best practice).</i></p>
The context (unit, organisational, strategic and policy) of practice.	This area is new to me and is a significant learning need for me to be addressed.
Self & peer assessment using reflective appraisal and 360° feedback.	I have had limited exposure to this type of assessment.

