

**Regional Collaborative for NI Action Plan:
Strengthening the Commitment for Learning Disabilities Nursing**

Meeting 27th January 2015 @ 2.00pm

Meeting Room, NIPEC, 3rd Floor,, Centre House, 79 Chichester Street, Belfast

In attendance

Dr. Glynis Henry, CEC, (Chair)
Maurice Devine, DHSSPS/CEC
Frances Cannon, NIPEC, Project Lead
Bryce McMurray, SHSCT
Esther Rafferty, BHSCT
Gordon Moore, SEHSCT
JP Watson, FSHC
Lorraine Kirkpatrick, FSHC
Denise Martin, PHA representing Molly Kane
Owen Barr, UU
Peter Griffin, QUB
Wendy McGregor, RQIA
Rachel McMaster, WHSCT (Teleconference)
Sharon McRoberts SEHSCT
Leslie-Anne Newton, ARCuk

Apologies

Laurence Taggart, Reader UU, representing RCN
Carol Cousins, FSHC
Donna Morgan, NHSCT
Olivia Boyda, WHSCT
Sarah Boyd, Pre Registration, QUB
Rita Devlin, RCN
Eileen Dealey, WHSCT

Agenda Item	Notes & Action	Person Responsible
1.	<p><u>Welcome and Introductions</u></p> <p>Glynis welcomed everyone to the meeting particularly new members:</p> <ul style="list-style-type: none"> • Sharon McRoberts, representing the Education and Workforce Leads for the five HSC Trusts. • Rachel McMaster (WHSCT) representing Post Registration Learning Disabilities students - via teleconference • Leslie-Anne Newton from ARCuk. 	

	<p>Apologies Laurence Taggart who is delighted to be invited to be a member, is an apology for today's meeting</p> <p>Sarah Boyd.</p> <p>Denise Martin attended on behalf of Molly Kane.</p> <p>Action: Frances to brief Laurence after this meeting</p>	FC
2.	<p><u>Notes of last Meeting</u></p> <p>Glynis referred to notes of last meeting and indicated that matters arising are picked up in agenda.</p> <p>Notes of previous meeting checked for accuracy and signed off.</p>	
3.	<p><u>Information Seminar Update</u></p> <p>Frances reported that to date there has been four seminars delivered in four of the five HSCTrusts. In total there have been 61 attendances. Plans are in place to organise a seminar in the remaining Trust.</p> <p>It had been anticipated that Learning Disabilities nurse from the Independent/Voluntary sector would have attended these events. Due to low turnout from the Independent Sector an information seminar has been organised for the Independent Sectors via JP Watson, Four Seasons who will open it up to other Independent Sector Providers.</p> <p>Overall very positive engagement and well received, Maurice gave highlevel messages from seminars thus far. Certainly a good exercise to raise awareness re the StC NI Action Plan</p> <p>Issues Arising</p> <ul style="list-style-type: none"> • Lack of career development for LD Nursing • Desire to re-establish the LD Professional Forum • Identified need for nursing outcomes measurement tool • Desire for LD Nurses to be allowed and facilitated to do LD Nursing <p>Glynis thanked the professional leads for organising events</p> <p>Discussion. Due to staffing pressures there was lower than anticipated attendance at the BHSCT information seminar</p> <p>Action: Agreed potentially another session in BHSCT at a later date. Frances to liaise with Esther.</p>	FC

	<p>Leslie-Anne suggested it would be useful to have session in the Voluntary Sector as they employ Learning Disabilities Nurses</p> <p>Action FC to Link with Leslie-Anne to arrange</p> <p>Acknowledgement that career pathways for LD nurses have diminished in light of service modernisation</p> <p>Agreed that this group is well placed to think about career pathways for Learning Disabilities Nursing into the future</p> <p>Glynis suggested the Collaborative need to articulate how Learning Disabilities Nursing should be developed into the future.</p> <p>Owen reflected on learning from the ROI and the career pathways for Learning Disabilities Nursing developed there. He referenced the Shape of Caring (SoC) Review and its implication on the 4 fields of practice as they currently stand and how and if they will be maintained. Glynis and Owen gave overview of the SoC review. Lead by Lord Willis for DOH England/NMC Owen suggested that the SoC review is likely to suggest a direction of travel rather than be prescriptive. Glynis stated CNMAC has put forward responses to contribute to the Shape of Caring review</p> <p>Glynis suggested it was important the NI Collaborative priorities and analyses the feedback from the seminars and link these with priorities identified by the Collaborative</p> <p>Action: When information Seminars completed Maurice and Frances to prepare a short report detailing key findings</p>	<p>FC</p> <p>MD FC</p>
<p>4.</p>	<p><u>ARC</u></p> <p>Leslie-Anne has joined the Collaborative following a teleconference with Glynis and Maurice to help explore how we might best engage service users in taking forward the work of the collaborative & the NI Action Plan.</p> <p>Leslie-Anne suggested having a service user around the table may not necessarily be the best way to engage.</p> <p>ARC is exploring various options of how to engage with service users in a meaningful way. She suggested ARC will have a proposal paper developed by the end of January 2015. The proposal paper is likely to have four options. The Collaborative will then need to select a preferred option – this will be based on the needs of the group are.</p> <p>Discussion centered on the need for the collaborative to be clear as to what it wants from service user representation, consider associated costs and explore how engagement with service users with learning disabilities will be funded.</p>	

	<p>Action: LAN to send proposal to Frances to circulate to group members and based on comments may set up a quick meeting with final decision at next Collaborative meeting in April.</p>	<p>LAN/FC</p>
<p>5.</p>	<p><u>Recording Care Documentation Learning Disabilities Nursing</u></p> <p>Esther gave an overview of the HEF pilot in BHSCT, Muckamore Hospital setting and Adult Learning Disabilities Community Team setting. The enhanced IT infrastructure in the hospital setting makes it easier to implement there, compared to the community setting. Esther also gave an overview of electronic MDT Record/ documentation being implemented. The record has been adapted from the acute nursing care record. The electronic record allows additional assessments to be added to meet the needs of service users with Learning Disabilities. The system allows log into the ECR – to check e.g. medication and link to safeguarding plans.</p> <p>Nursing in Muckamore is taking the lead in pilot and the implementation of the HEF. Esther reported that the PHA is supporting the BHSCT approach regarding MDT electronic record and the HEF pilot.</p> <p>Glynis invited feedback and discussion.</p> <p>There was discussion by members in regards to which is the best outcomes tool to demonstrate the contribution of nursing to person centered care.</p> <p>Some members advised that HONOS and Recovery STAR are two other outcome measurement tools, however there was acknowledgement that there is limited experience in using these in practice</p> <p>It was noted that HEF is applicable to adults and not, at this time, applicable to Children.</p> <p>The strength of opinion expressed by members was that person-centered care planning based on a holistic nursing assessment, well-constructed objectives with nursing care/nursing interventions being evaluated is fundamentally the best way of demonstrating the nurse's contribution to the delivery of care.</p> <p>Members also acknowledged that different Trusts have different systems.</p> <p>There was discussion that the use of the HEF was probably 'easier' in the hospital based setting.</p> <p>SHSCT is working toward one electronic MDT record based on NISAT Tool and plans are in place for roll out across its' Learning Disabilities services soon. He suggested there is a place for outcome tools to be added into the electronic record.</p>	

	<p>SEHSCT awaiting the outcomes of the Pilot in the BHSCT</p> <p>Glynis drew discussions to a conclusion that it would be beneficial if members of the Collaborative could visit the BHSCT and see for themselves the use of the HEF and the MTD and nursing record</p> <p>Action: Arrange visit of the collaborative to see the HEF and the MDT electronic record and nursing record in practice to coincide with the next StC NI Collaborative meeting on the 16th April Frances to arrange with Esther and send out arrangements to the group</p> <p>Frances to contact nurse consultant for visit to learn more about eHEF</p> <p>Recording Care</p> <p>Maurice Devine reported that Mental Health have agreed to progress a Mental Health care pathway</p> <p>The recording care project ideally striving toward standardised nursing care record for use by Learning Disabilities nurses across 5 HSC Trusts. There was discussion regarding what the NI Collaborative has been asked do in terms of the StC recommendations. It was agreed this group's primary focus was to develop and embed an outcomes measurement tool for Learning Disabilities nursing and that work to develop and progress nursing care record for this nursing field of practice would be progressed through the Regional Recording Care initiative.</p>	<p>FC</p> <p>FC</p>
<p>6.</p>	<p>LD workforce Scoping Tool</p> <p>Frances had contacted NMC for data relating to Learning Disabilities nurses in NI. The data from NMC presented by Glynis.</p> <p>Action: Frances to send out to group members for information</p> <p>Revised Learning Disabilities Nursing Workforce Scoping Tools presented in light of feedback from members</p> <p>Adult Trust scoping Tool Page 1 Add column for WTE Add row for comments box under each staffing establishment table across all questionnaires Add a comments section to allow respondents to indicate in their opinion the number of staff who work in more than one setting Page 2 delete Specialist and replace with additional to read Additional Community Learning Disabilities Qualification Page 3 Separate Residential and Support Living into two separate tables Page 4 change age ranges from 25 to under 25 change 25-29 to 26-29 Page 5 question 6 change to read "...employed in your Learning</p>	<p>FC</p>

	<ul style="list-style-type: none"> ➤ Visit BHSCT to see the HEF and MTD documentation being used in practice to coincide with April meeting ➤ Amend scoping tools and send into system for completion end March/April ➤ Trusts /Organisations to send initiative examples to Frances for consideration as being incorporated in the StC UK 2015 Conference and the three year on Report ➤ Trusts /Organisations to populate KPIS form their setting and submit to FC by end of February 	
12	<p><u>AOB</u></p> <ul style="list-style-type: none"> • Call for good Practice in medication prescribing <p>Action FC to send email out to Collaborative</p> <ul style="list-style-type: none"> • Revalidation: <p>Glynis gave a short overview of pending NMC Revalidation from December 2015, the revalidation pilot in the WHSCT and the imminent release of the revised NMC Code. Glynis advised the Collaborative that under the NMC revalidation model registrant will be required to revalidate against the revised code and asked members to begin consider revalidation from the perspective of Learning Disabilities Nurses</p> <p>Glynis updated the group regarding the Nursing & Midwifery Strategy being developed by CNMAC sub group chaired by Professor Tanya McCance.</p>	
	<p>Date time next meeting 16th April Muckamore (early start)</p>	