



## Post Registration Masters in Nursing Project Working Group Meeting

9<sup>th</sup> April 2019 9:30am 02D09 Jordanstown Campus

**Present:** Bernadette Gribben NIPEC, Toni McAloon UU, Tracie Fleming NHSCT, Sharon Burnside SHSCT, Helen McGarvey UU, Cathal O'Neill Independent Sector, Carol Chambers BHSCT, Annetta Quigley WHSCT, Pat Gallagher DoH, Fidelma Carolan Unison, Sue Foster NI Hospice, Annette Agnew UU.

Via teleconference: Sharon McRoberts SEHSCT, Gladys McKibbin HR.

**Apologies:** Tom Rush PPI volunteer, Clare Martin Unison, Heather Weir NI Hospice, Liz laird UU

	Agenda Topic	Discussion Notes	Action By whom
1	Welcome & introductions	Everyone welcomed and introductions completed	
2	Apologies	Apologies noted	
3	Tor Working group	ToR agreed. ToR will be removed as an item from the agenda. If needs be, it can be raised again under AOB	
4	Confirmation of minutes from 12 <sup>th</sup> March 2019	Minutes approved	
5	Project Initiation Document (PID)	PID agreed pending discussion around 'mentor' role PID will be uploaded to NIPEC website	

6	Learning Outcomes/DHSSPS Attributes Framework	<p>Attributes framework to be integrated into this programme. A meeting arranged on 1 May with Head of Patient Safety &amp; Improvement SEHSCT and Q 20/20 Project Manager PHA</p> <p>Once on the register, students will have met the requirements for Level 1 and the MSc will address Level 2. It was agreed that the 6 statements under delivering improvement should be the outcomes of the placements. Normally in practice, participants would receive a Certificate and green badge – discussion ongoing as to whether these students could also be eligible for the badge</p>	Project Manager/ Project Lead and MSc Course Director
7	University Structures & MSc application	<ul style="list-style-type: none"> <li>• Meeting took place with OU representative to discuss altering their timelines to allow their students to apply for this course. As this is organized centrally in Milton Keynes, OU to enquire and respond. No response received as yet.</li> <li>• QUB students complete the week of 5/9/19.</li> <li>• UU students complete the week of the 26/9/19.</li> </ul> <p>Registration week 30<sup>th</sup> Sept – 4<sup>th</sup> October Degree would not be conferred by the start of the course Project Lead discussed with Head of Admissions UU how we can get students registered on MSc. Head of Admissions has agreed to check that each student has met the degree criteria and will also accept a letter from QUB confirming their students have also met criteria. Project Lead &amp; MSc Course Director to meet with head of admissions 29<sup>th</sup> April to discuss communications with potential students regarding admission to course.</p>	<p>Project Lead to follow up</p> <p>Project Lead &amp; MSc CD</p>
8	Feedback from subgroups:		
(i)	Curriculum planning	3rd meeting will be held this afternoon and the group have moved on to module content and assessment methods. In addition to Research and the dissertation the modules will cover quality/leadership and	

		communication. Discussion will also be around a format of the dissertation that is achievable. Attributes framework content will be integrated across the modules.	
(ii)	Recruitment/Selection	<p>One application process appointing to both band 5 and the MSc.</p> <p>Adult BSc Hons Nursing students (2019) graduating from a NI University with at least a 2:1 classification</p> <p>Must have an offer of a permanent HSC band 5 post in NI – This criteria will be reconsidered at the next Recruitment/Selection subgroup meeting on 2 May</p> <p>Online application through BSO</p> <p>Short listing will be done by 2 members of HSC based on general band 5 criteria and additional requirements of post – an additional checklist will be provided to demonstrate how students meet criteria of course</p> <p>Applicants will rank trusts in order of preference</p> <p>Interview panels will be timed to occur after the June exam board (7<sup>th</sup> June UU, QUB to confirm) from which the students will be able to self-predict degree classification.</p> <p>One person would represent each HSCT on the panels</p> <p>A waiting list will be created, for the first 2 weeks, in case of any withdrawals.</p> <p>Independent Sector may sit on the panel as an assessor but will not carry a vote.</p> <p>Advertising will be done via BSO/HSC/ UU emails /social media/NIPEC</p> <p>In addition to Standard band 5 contract students must agree:</p> <ul style="list-style-type: none"> <li>• To a placement rotation programme,</li> <li>• No self-selection of placement areas</li> <li>• Commit to remaining in post for 2 years</li> </ul>	Project Lead to raise at Recruitment/Selection subgroup meeting on 2 May

		<ul style="list-style-type: none"> <li>• Must have access to car/travel for community placement</li> <li>• Annual leave not taken during teaching time</li> </ul> <p>Indemnity challenges for students when in the independent sector, may need an honorary contract – but indemnity will be arranged by independent sector, further discussion required.</p> <p>Access NI and RQAI requirements – once HSCT recruitment done and Access NI done, that would also cover the independent sector</p> <p>As a rule of practice, students should not be ‘Nurse in charge’ in the Independent/Voluntary Sector unless due to unforeseen circumstances.</p> <p>All placement areas will need to have a current educational audit &amp; the presence of sign mentors.</p> <p>NI Hospice enquired if the pilot programme was only for newly qualified nurses employed by the HSCT or was it applicable to Hospices and Independent sector. Project Manager confirmed that it only applied to those HSCT employees in line with ECG Funding processes</p>	<p>Project Lead will raise with HR at next Recruitment/Selection meeting on 2 May RQIA to confirm via email. Unison to follow up this action</p> <p>Project Lead to raise at next Placement/Rotation 2 May</p>
(iii)	Placement Rotation	<p><b>Placement flow</b> – it was agreed that option 3 would be implemented: 1 placement x 6 months, 2 placements x 4.5 months, 1 placement x 9 months.</p> <p>Full time only posts – this needs to be included in the criteria</p> <p>As students are not in the Trust setting 5 days a week they may have difficulty completing preceptorship within first 6 months. This needs to be managed by the Trust.</p> <p><b>Placement areas</b> - It was agreed that students would be placed in areas that are currently very good and striving to do more.</p>	Project Lead to action

		<p>Independent Health &amp; Care Providers (IHCP) are represented at this group and accounts for approx. 50% of our care homes. Contact needs to be made with other Care Homes via UU Placement Office.</p> <p>NI Hospice will accept students from any of the Trusts.</p> <p>All Macmillan professionals are employed by partner organisations so any clinical placements would be via the employing Trust.</p> <p>Independent Sector – waiting to hear back from interested parties.</p> <p>The issue on how students on long term sick leave/ maternity leave progress on this programme will need to be addressed by steering group.</p> <p>AD from SEHSCT to share presentation on communicating the benefits of this programme to senior staff.</p> <p><b>Band 7</b> - It was agreed that the Band 7 role title would be MSc Project Coordinator and they would be responsible for:</p> <ul style="list-style-type: none"> <li>• Project start up:</li> <li>• Communication with placement areas re the project</li> <li>• Creation of a clinical culture to support the MSc trainee</li> <li>• Collaborating with the clinical areas to identify clinical facilitators</li> <li>• Generation of the 2-year placement flow for each MSc trainee</li> <li>• Support for the MSc trainee in both HSC and Independent/Voluntary Sectors</li> </ul> <p>HR and Unison to review JD.</p> <p>This Band 7 should start in May. Will be discussed at next steering group</p> <p>It is anticipated the band 7 will be a member of the clinical education teams on secondment as there will then be continuity when the role</p>	<p>Project Lead to action</p> <p>Independent Sector representative to follow up Chair to raise at Steering group</p> <p>SEHSCT AD to share presentation</p> <p>Project Lead to send existing and new JD to HR and Unison to review.</p> <p>Chair to raise at Steering group</p>
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		<p>expires after 9 months and continued support is integrated into the existing clinical education teams.</p> <p>Mentoring support– each MSc Trainee will have a preceptorship mentor in their first placement. After that a band 6 or above will be allocated to support Trainees as a ‘clinical facilitator’. A similar level of support would be available in independent homes</p> <p>The student will be called an ‘Masters trainee’.</p>	
9	Communication Strategies	<ul style="list-style-type: none"> <li>• Sub groups report into working group</li> <li>• Working group reports to Steering group</li> <li>• Steering group reports to CNO</li> <li>• Steering group updates CNMAC SWE</li> </ul> <p>To ensure effective communication all the Trusts and NI Hospice are to establish an implementation group to liaise throughout their organisations.</p> <ul style="list-style-type: none"> <li>• SHSCT – discussed at Governance meeting</li> <li>• SEHSCT – meeting 19<sup>th</sup> April</li> <li>• WHSCT – not yet but planning</li> <li>• NHSCT – in planning</li> <li>• BHSCT – in progress</li> <li>• Hospice – updates happening</li> </ul> <p>Updates will be given at next meeting</p> <p>It would be beneficial to have a Trust HR representative on each implementation group.</p> <p>Project Lead developing a communique to be sent out.</p> <p>Photographs to go on website and Twitter</p>	<p>All Trusts and NI Hospice</p> <p>Project Lead to action</p>

Confirmed

		Communications at UU will be through the Course committee / CML c/o the Course Director	
10	Evaluation processes	Project Lead and CD to consider short term evaluation strategy within UU Funded PhD which could also look at other programmes e.g ANP All evaluation processes are still on the table	To be raised with CNO
11	AOB	Chair will update group once there is news regarding funding	
12	Next meeting	It was agreed that a few more monthly meetings were required. Next date – 8 May 2019 10 – 12 noon	