

**Northern Ireland Practice and Education Council
for Nursing and Midwifery**

***Professional Framework for Emergency Care
Nursing***

Project Plan

April 2014

1.0 Introduction

- 1.1 NIPEC has been asked by the Chief Nursing Officer (CNO) to take forward a workstream to further the professional development of the Emergency Care Nursing Workforce in Northern Ireland

2.0 Background

- 2.1 Within Northern Ireland all Health and Social Care (HSC) organisations have undergone significant change over the past decade. Reconfiguration of service delivery and the implications of strategic policies such as *Transforming Your Care* (DHSSPS, 2011) which is driving the transition of service delivery from predominantly hospital based care to community settings have placed an increased demand on Emergency Departments (ED)¹. The total number of attendances at Emergency Departments in Northern Ireland is estimated at approximately 715,000 per year. Across HSC Trusts, the total number of attendances per 1,000 of the population varies from 525.7 in the Belfast HSC Trust compared to 286.5 in the Northern HSC Trust (DHSSPSNI, 2014). Patients attending the ED increasingly have more complex needs, present with a range of medical co-morbidities resulting in a higher dependence on nursing staff.
- 2.2 In addition, advances in medical technology, increasing public demands for high quality services, alongside a reduction of Junior Doctors hours and the impact of the European Working Time Directives have seen a significant change in how emergency care is delivered within EDs. Emergency nurses have been instrumental to ensuring these changes have been implemented, taking on extended roles in the care and treatment of patients and assuming greater autonomy, particularly in the assessment, diagnosis and management of minor illnesses and traumas. This has enabled the

¹Emergency Departments includes minor injuries Level 1 2 & 3

development of services and the proliferation of nursing roles within the Emergency Care settings such as; Advanced Nurse Practitioners (ANPs), Emergency Nurse Practitioners (ENPs), and the development of urgent care centres and minor injuries units.

- 2.3 These are exciting times for Nurses working in Emergency Departments who are increasingly recognised for the contribution they can make to care delivery. Numerous studies have demonstrated that, nurses working at ENP and ANP levels can provide high quality care for patients presenting to EDs, and that this care is associated with high levels of patient satisfaction (Cooper et al 2002, Bache 2001, College of Emergency Medicine 2005).
- 2.4 Recent RQIA reports and media attention have highlighted the need to ensure that Emergency nurses are working within their competency levels. In light of this fact, there is therefore a need to review the roles of all nursing staff delivering care in Emergency care settings.
- 2.5 In May 2013, the Royal College of Nursing in Northern Ireland hosted a meeting of the Emergency Nursing Network at which numerous areas of concerns were identified in relation to Emergency Department Nursing including; the lack of a clear career pathway for Emergency Department nurses, lack of a regionally-agreed training and development plan, significant issues for Emergency Department nurse in accessing relevant training and development due to the increased workload and inadequate staffing levels to name but a few.
- 2.6 In December 2103 the Emergency Nurses Network (ENN) and members of the Emergency Care Network met with Chief Nursing Officer to present a paper identifying these concerns. At an Emergency Care Summit hosted by RCN Feb 2014 CNO gave a commitment to take forward work to address these concerns and asked NIPEC to work with the ENN to progress this work stream.

2.7 It is not anticipated that this work stream will not undertake a staffing level review as this is being addressed in Phase 2 of the Delivering Care Project. There are also a number of ongoing NIPEC work streams in addition to the Delivering Care Project, which will have an impact on this project including:

- Career Pathway for Nursing and Midwifery Framework
- Advanced Nursing Practice Framework
- Development of Health Care Support Worker Roles
- Delivering Care: A Northern Ireland Framework for Nursing and Midwifery Normative Staffing Ranges to support Person Centred Care

It is anticipated the outputs from these Projects will compliment and support this work stream

3.0 Aim and Objectives

This initiative aims to develop a model to support the organisation of the nursing workforce to enable the delivery of safe, effective person centred nursing care within Emergency Departments in the five HSC Trusts across Northern Ireland.

The objectives are as follows:

Examine the current model of the organisation of the nursing workforce within Emergency Departments. This will include the identification and review of the:

- current nursing workforce structures including nursing governance arrangements
- current career pathways for nursing including CPD innovations and learning opportunities
- inter-professional infrastructure supports and processes which facilitate the development of the profession
- infrastructure supports and processes which contribute to the delivery of safe, effective and person centred nursing care

Agree a model to support the organisation of the nursing workforce which will propose a workforce structure, career pathway, professional infrastructure and processes, administrative/clerical, and other supports to ensure the optimal use of the nursing contribution within Emergency Departments.

Prepare a final report including recommendations for implementation and submit to the Chief Nursing Officer DHSSPS.

4.0 Methodology Overview

An overview of the methodology to be employed is presented below:

- NIPEC will establish a steering group chaired by the Chair of the Emergency Care Nurse Network and comprise representation from the following organisations: Emergency Care Nursing Network, HSC Trusts, Public Health Agency, Patient and Client Council, DHSSPS, Royal College of Nursing, Queen's University Belfast, University of Ulster and Clinical Education Centre.
- NIPEC will establish any necessary sub groups which will report to the Steering Group
- NIPEC will ensure that a review of relevant literature is undertaken to support the project
- Any necessary tools to gather relevant data will be developed and agreed by the Steering Group
- Arrangements will be put in place to ensure close effective liaison with other relevant current NIPEC work-streams
- The organisational model will be published by NIPEC

- Evaluation of project management processes will be completed by NIPEC at the end of the initiative.

5.0 Scope of the Project

This Project will be completed over a twelve month period. The overall Project will be led by one of NIPEC's Senior Professional Officers (SPO) with specific associated work streams and relevant working groups being led by other SPOs as appropriate.

6.0 Resources

- 6.1 NIPEC will provide project management and administrative support to ensure the delivery of the Project.
- 6.2 Any additional support required will be discussed and agreed by NIPEC's business team.

7.0 Dissemination and Implementation

- 7.1 Communication and consultation processes will be ongoing throughout the project using various mechanisms including the NIPEC website and news bulletin, along with utilisation of key stakeholders' communication mechanisms. This will reflect the progress of the project and encourage individuals' to contribute to and participate in the project at various stages.
- 7.2 On completion, the project will be summarised in a Final Report which will be submitted along with a proposed implementation plan to the Chief Nursing Officer DHSSPS. These documents will be available on NIPEC's website.

8.0 Project Screening Assessment

- 8.1 To ensure NIPEC and its stakeholders are meeting its legal obligations in relation to Equality, Personal and Public Involvement and Governance,

the project plan, its aims, objectives and proposed outcomes have been screened for any issues relating to the following areas:

- Risk Management
- Equality and Human Rights
- Privacy Impact Assessment
- Personal Public Involvement

8.2 A summary of these considerations and any action required is documented in Appendix Two.

9.0 Evaluation

9.1 Ongoing evaluation of the management of the project will be conducted through NIPEC and will ultimately feed into the progress and outcomes of the project. This evaluation will address the achievements of the objectives outlined in the project plan and the project management process.

9.2 The final project report will include a record of the project management and evaluation processes.

10.0 Equality and Governance Screening

To ensure NIPEC and its stakeholders are meeting its legal obligations and responsibilities under various Equality and Governance areas, the project plan, its aims and objectives and outcomes have been examined and screened for any issues relating to the following areas:

- Risk Management
- Equality and Human Rights
- Privacy Impact Assessment (PIA)
- Personal Public Involvement (PPI)

11.0 References

Bache, J (2001) *Establishing an emergency nurse practitioner service*. *Emergency Medicine Journal*; 18: 186-189

Cooper, M. A., Lindsay, G. M., Kinn, S. Swann, I.J. (2002) *Evaluating Emergency Nurse Practitioner services; a randomized controlled trial*. *Journal of Advanced Nursing*, 40: 721-730.

DHSSPS (2011) *Transforming Your Care: A Review of Health and Social Care in Northern Ireland*. Belfast: DHSSPS

DHSSPS (2014) http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats.htm;

Way Ahead (2005) *The College of Emergency Medicine*, London

12.0 Appendices

Appendix A

Outcome of Equality and Governance Screening

Area	Comments
Risk Management questions	
<ul style="list-style-type: none">• Have any risks been identified?• What is the potential impact of these?• How can these be mitigated or have alternatives options been identified which would have a lower risk outcome?• Where negative impacts are unavoidable, has clarity been given to the business need that justifies them?	
Equality and Human Rights questions	
<ul style="list-style-type: none">• What is the likely impact on equality of opportunity for those affected by this policy for each of the Section 75 equality categories (minor/major/none)?• Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?• To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group (minor/major/none)?• Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group? <p>NB – please refer to NIPEC’s Equality Screening Policy and Screening Templates to assist in considering equality and human rights</p>	

Privacy Impact Assessment (PIA) questions	
<ul style="list-style-type: none"> • Will the project use personal information and/or pose genuine risks to the privacy of the individual? • Will the project result in a change of law, the use of new and intrusive technology or the use of private or sensitive information, originally collected for a limited purpose, to be reused in a new and unexpected way? 	
Personal and Public Involvement (PPI) questions	
<ul style="list-style-type: none"> • Has a requirement for PPI been identified, and if so, what level of PPI will be required for the project? <p>NB – please refer to and use NIPEC’s PPI Decision Tree/Algorithm to assist in considering PPI</p>	



**Emergency Department Nursing Workforce Structures
Steering Group Membership**

Organisation	Name
Royal College of Nursing	Linsey Sheerin CHAIR
NIPEC	Frances Cannon (Project Lead)
Belfast H&SC Trust	Diane Gillespie
	Geraldine Byers
	Mandy Hawthorne
Northern H&SC Trust	Helen McNeilly
South Eastern H&SCT Trust	Jill Fleck
	Roisin Devlin
Southern H&SC Trust	Mary Burke
Western H&SC Trust	Martina Browne
	Kerry Glackin
Trusts -EDON	Olive MacLeod NT
-ADON	Moira Mannion BT and Sharon McRoberts SET
-HR	Joan Peden
Clinical Education Centre/Project Officers	Anne Marie Philips
DHSSPS	Caroline Lee
Patient Client Council	Unable to nominate
Public Health Agency	Siobhan Donald
Royal College of Nursing	Garrett Martin
Queen's University Belfast	Joanne McMullan
University of Ulster	Dr Vidar Melby

**Emergency Nursing Care Project
Steering Group meeting
Terms of Reference**

1. To agree the purpose of the project and provide a regional and professional perspective
2. To agree a project plan, timescales and methodology for the project
3. Provide expertise; oversee the implementation of the project and review of the outcomes
4. Ensure communication and dissemination of information relevant to the project within each of the participating organisations/professional groups.
5. Contribute to progress reports to all Executive Directors of Nursing (PHA and HSCTs) via the Chief Nursing Officer's Business meetings
6. Contribute to a final project report
7. Contribute to on-going implementation, monitoring and evaluation of the project outcomes.

Note:

- Membership of the Steering Group is non-transferrable except in exceptional circumstances and with prior agreement of the Chair.
- It is proposed that the Steering Group will meet quarterly over a 12 month period. Additional meetings will be agreed by the members, if and when required.



For further information, please contact:

NIPEC

Centre House
79 Chichester Street
BELFAST, BT1 4JE
Tel: (028) 9023 8152
Fax: (028) 9033 3298

This document can be downloaded from
the NIPEC website www.nipec.hscni.net

Insert date (month and year) of report