



**NORTHERN IRELAND PRACTICE AND EDUCATION COUNCIL
FOR NURSING AND MIDWIFERY**

**PROJECT STEERING GROUP
DEVELOPMENT OF A CAREER PATHWAY
FOR THE GENERAL PRACTICE NURSING WORKFORCE**

Meeting, Monday, 17th September 2018

Present

Maura Devlin, Director of Nursing, Down GP Federation (Chair)	MD
Nicky Brown, ANP Trainee, Down GP Federation	NB
Louise Hales, Queens University Belfast	LH
Caroline Lee, Clinical Education Centre	CL
Cathy McCusker, NIPEC (Project Lead)	CMcC
Linzi McIlroy, Royal College of Nursing	LMcI
Mark Ryan, Southern HSC Trust	MR

Teleconference

Margaret Diamond, Northern HSC Trust	MD
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Apologies

Dr Claire Loughrey, NIMDTA
Rose McHugh, PHA
Dr David Ross, NIGPC
Deirdre O'Donnell, Ulster University

ACTION NOTES

Agenda Item	Notes	Action by
1.0	Welcome & introductions Maura Devlin welcomed everyone to the meeting and advised that Dr David Ross had to offer his apologies at the last minute but want it noted his ongoing commitment to this very important work stream.	
2.0	Apologies Apologies as noted above.	

<p>3.0</p>	<p>Action notes; meeting held on 20 June 2018</p> <p>Action notes agreed and any matters arising were picked up on the agenda.</p> <p>Maura provided an update for the Group and advised that in order to ensure nurses in General Practice are eligible to apply for the ANP programme, a one year transition programme has been developed to enable Nurses to undertake the V300 non-medical prescribing programme and then they can move onto the ANP programme the following year. In addition, Maura has secured non-recurrent funding for Band 5 posts which the group agreed should be appointed for 2 years – first year complete a Treatment Room Nurse programme and second year complete a GPN programme; escalator would allow step off at end of year 1 as Treatment Room Nurse.</p>	
<p>5.0</p>	<p>Update from sub-groups</p> <ul style="list-style-type: none"> • Education, Chair Deirdre O’Donnell <p>Cathy sought views from the Group, on behalf of Deirdre, regarding the GPN document developed to date which includes core competencies and education requirements. The following were discussed:</p> <ul style="list-style-type: none"> • Presentational format <ul style="list-style-type: none"> ○ Graphic to be sought from graphic designer • General views <ul style="list-style-type: none"> ○ Include Band AfC equivalence under each of the role titles. Include a footnote that Treatment Room Nurse may also be paid at Band 6 if in a managerial capacity ○ P5. Complete the descriptions for the GPN, Senior GPN and ANP roles ○ Reference that Nurse Practitioners align with the Senior General Practice Nurse role. • Level of the educational training for Treatment Room Nurses <ul style="list-style-type: none"> ○ It was agreed by the group that the educational programme for Treatment Room Nurse doesn’t need to be an academic Level 6 or 7 qualification. The individuals should be able to access various skills training certificates and can be appointed to a Treatment room post will they are undertaking the programme. ○ The GPN programme should be delivered at Level 6 and/or Level 7. Nicky to share a GPN programme accredited by RCGP with the Education sub-group. ○ The mandatory training does not need to be included in the document but the core induction should be included in an appendix. • Nursing Assistants, Linzi McIlroy <p>Linzi shared the drafted Nursing Assistant competencies and</p>	<p>CMcC</p> <p>NB</p>

	<p>proposed educational requirements and the following were discussed:</p> <ul style="list-style-type: none"> ○ The competence statements build on the regional DoH HSC Trust standards for Nursing Assistants and are specific to General Practice. ○ P8. NA competencies “be able to administer influenza and pneumococcal vaccine under Patient Specific Direction only” revised to also include “according to National Minimum Standards”. Margaret Diamond was concerned that this was not a “safe” competency for a Nursing Assistant to undertake. Linzi to share the National Minimum standards where it is identified that this appropriate for Nursing Assistants to undertake. The group agreed that the DoH Delegation Framework (pending publication) will be important to refer to <u>if</u> this competence is retained. ○ The competencies are mapped to the DoH Nursing Assistant standards. P31. Maura asked for more information about the RQF Level 3 certificate that is stated as a requirement for the Senior Nursing Assistant, for HSC endorsed by DoH. There was a concern that this may not be financially possible for general practice. Caroline to forward the induction pathway CEC delivers for Senior Nursing Assistants. 	LMcI
6.0	<p>Key messages for graphics</p> <p>Linzi McIlroy and Claire Loughrey submitted ideas for the key messages for the graphics and it was agreed that these were representative of what we were trying to convey. Cathy agreed to contact a Graphic Designer that NIPEC are allowed to use to work up a suitable graphic.</p>	CMcC
7.0	<p>Next steps</p> <ul style="list-style-type: none"> • It was agreed that Cathy would seek the help of Caroline Graham to compile a JD for Band 5 Treatment Room Nurse, in the first instance, to be ready for mid-October. • Education sub-group to meet and tidy up the elements detailed above. 	<p>CMcC</p> <p>CMcC</p>
10.0	<p>Date & time of next Steering Group meeting</p> <p>Next meeting Wednesday 17 October 2018 @ 2pm, Room 2.3, Clady Villa, Knockbracken Healthcare Park</p>	CMcC