

Advancing together

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NHS Improvement

collaboration

trust

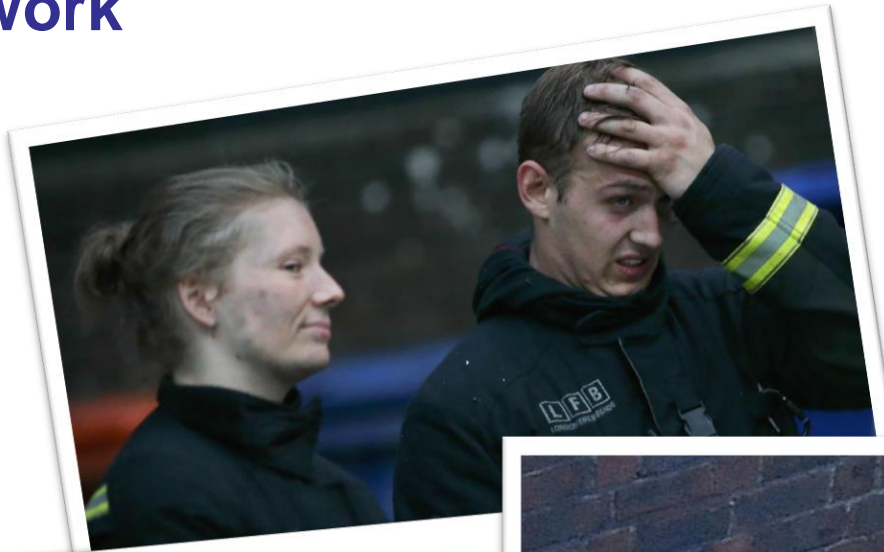
respect

innovation

courage

compassion

Teamwork



Drivers and change in MDT models

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Drivers for MDT models of working

Drivers (Buchan & Del Poz , 2002 WHO Bulletin

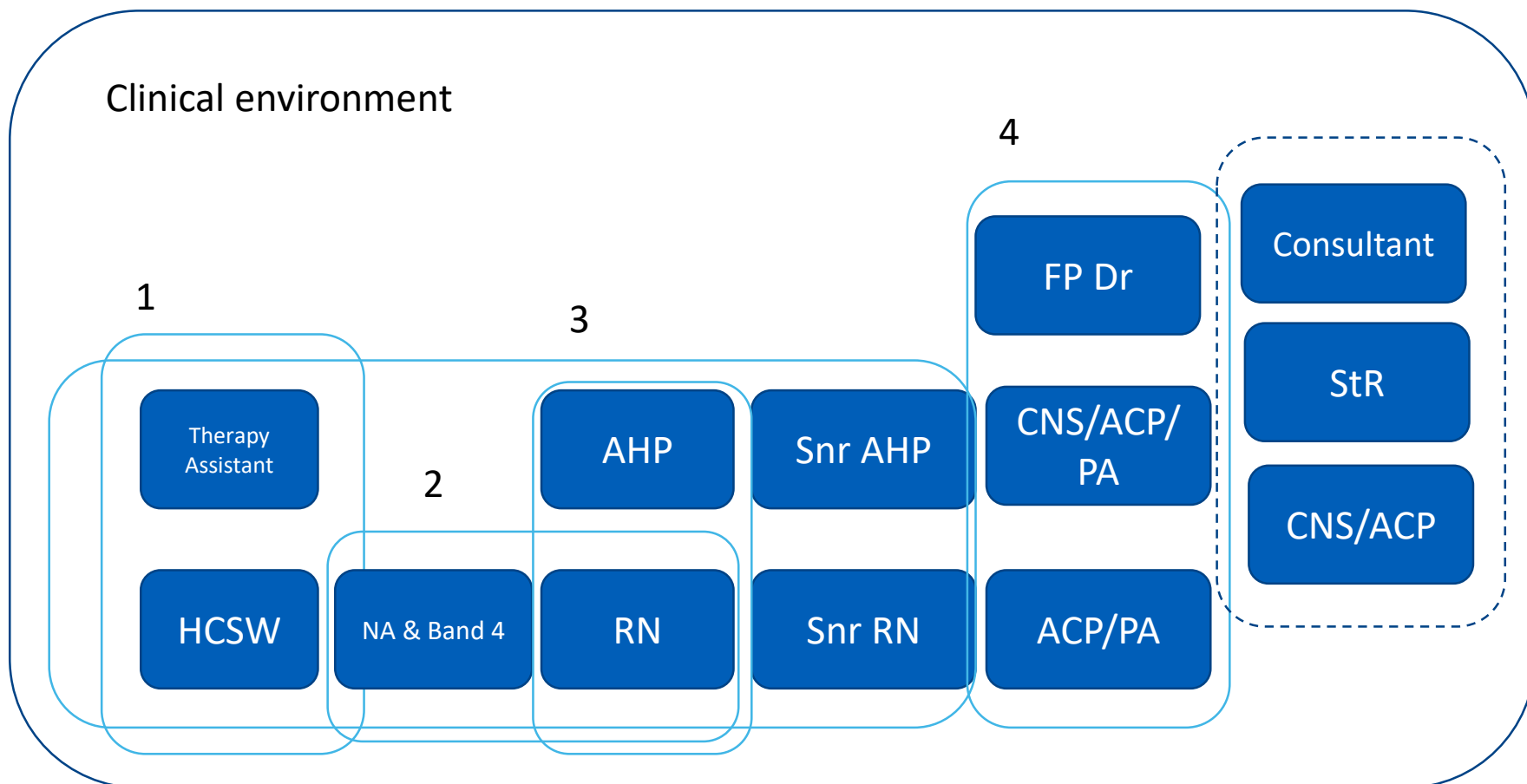
Table 1. Skill mix: determinants, requirements and possible interventions^a

Determinant	Requirement	Possible interventions
Skill shortages	Response to shortages of staff in particular occupations or professions	Undertake skill substitution; improve use of available skills
Cost containment	Improved management of organizational costs, specifically labour costs	Reduce unit labour costs or improve productivity by altering staff mix or level
Quality improvement	Improved quality of care	Improve use and deployment of staff skills to achieve best mix
Technological innovation; new medical interventions	Cost-effective use of new medical technology and interventions	Re-train staff in new skills; introduce different mix or new types of worker
New health sector programmes or initiatives (e.g. Roll Back Malaria)	Maximum health benefits of programme implementation, by having appropriately skilled workers in place	Determine the cost-effective mix of staff required; enhance skills of current staff; introduce new types of worker
Health sector reform	Cost containment, improvements in quality of care and performance, and responsiveness of health sector organizations	Adjust staff roles; introduce new roles and new types of worker
Changes in the legislative/regulatory environment (note: this is also a possible intervention)	Scope for changes in (or constraints on) role for different occupations, professions	Adjust staff roles; introduce new skills and new types of worker

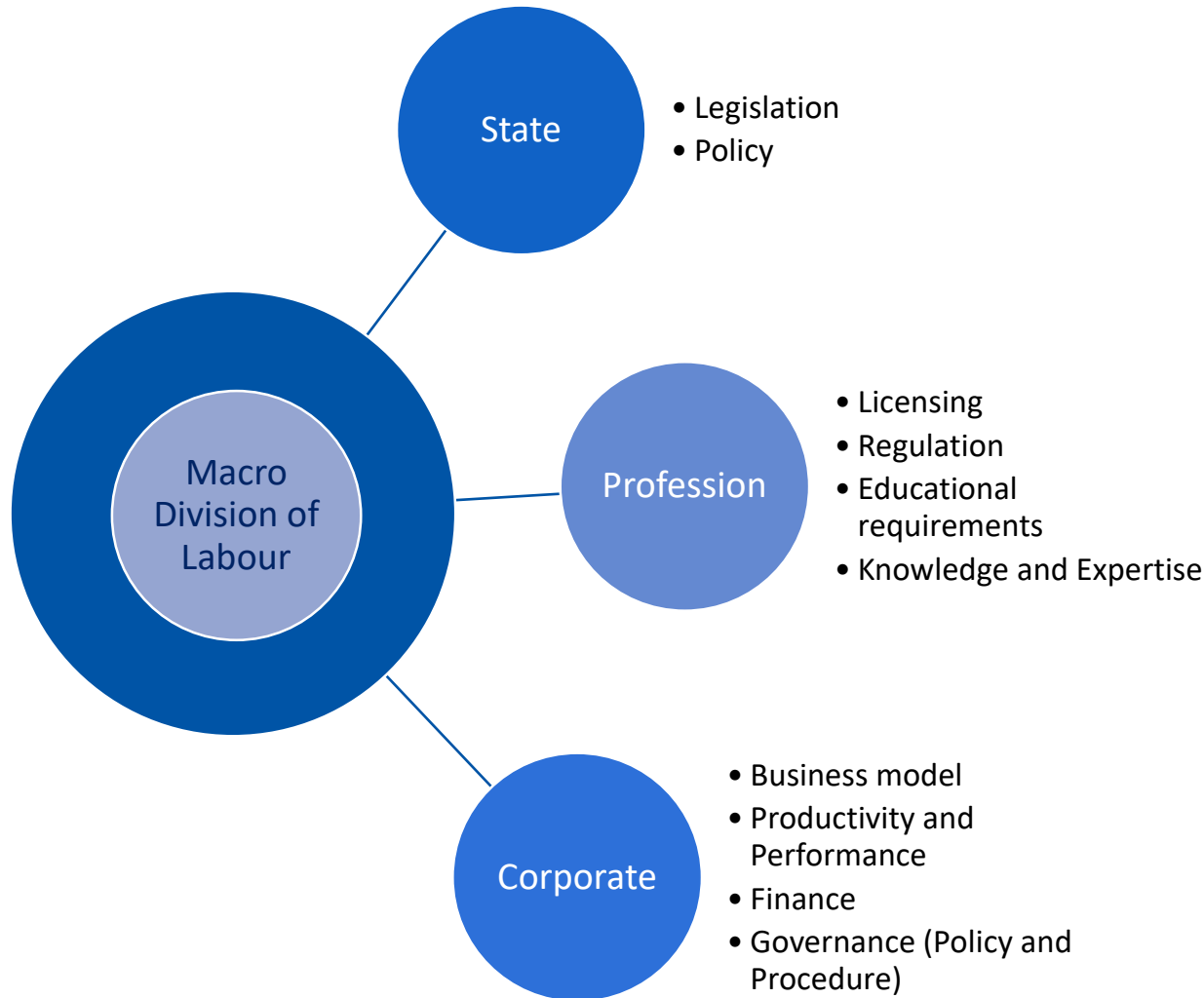
^a For further discussion of these issues see Buchan et al. (3).

Interprofessional working models

Typology and practice sphere ; Vertical , Horizontal and team



Division of labour in healthcare

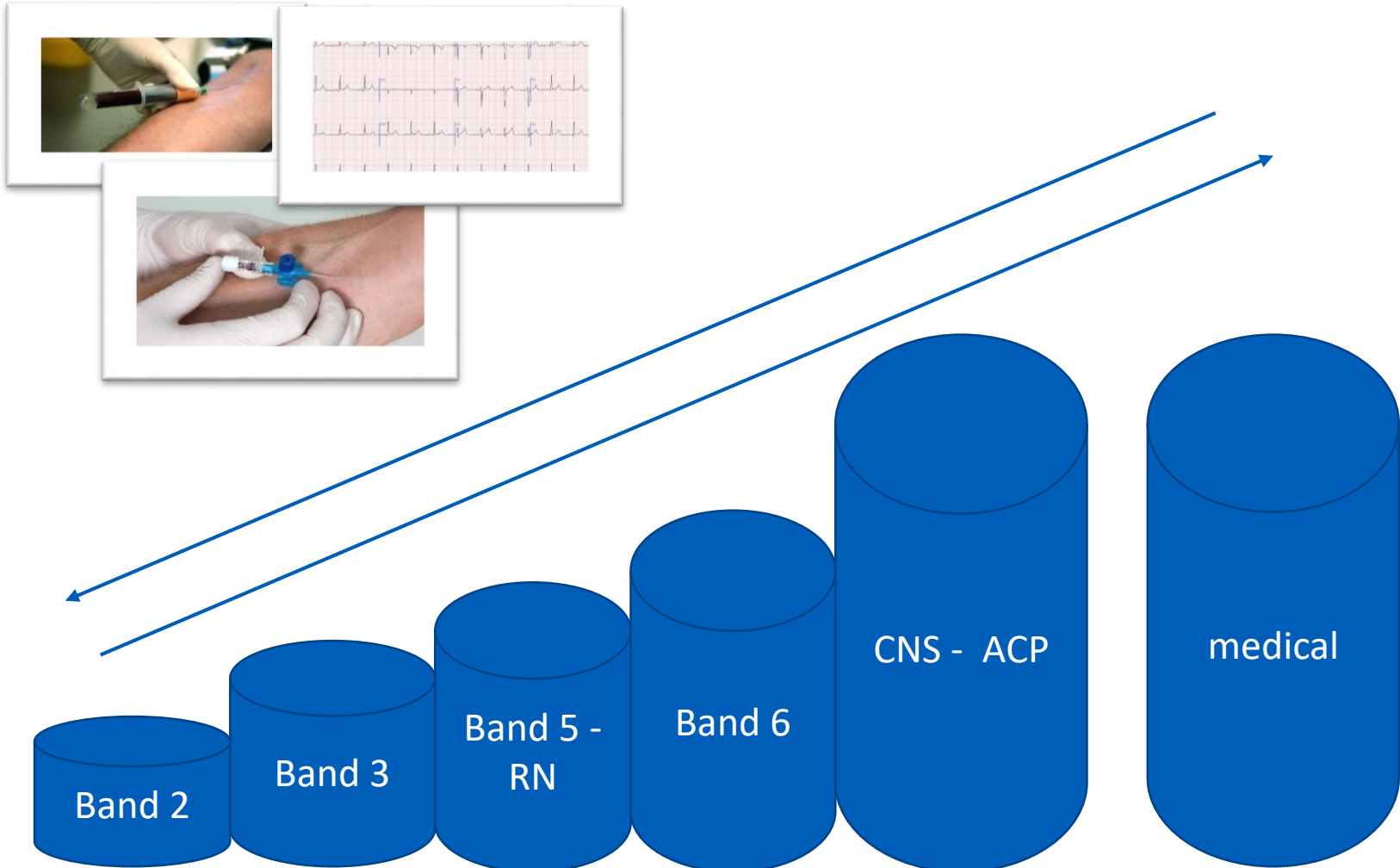


The division of labour and skill mix redesign is driven by three key stakeholders ; State , Professions and Organisations.

Traditionally the State has been less involved in skill mix and division of labour changes, but have increasingly written policy to support the expansion of para-medical roles. (i.e. NHS plan, FYFV)

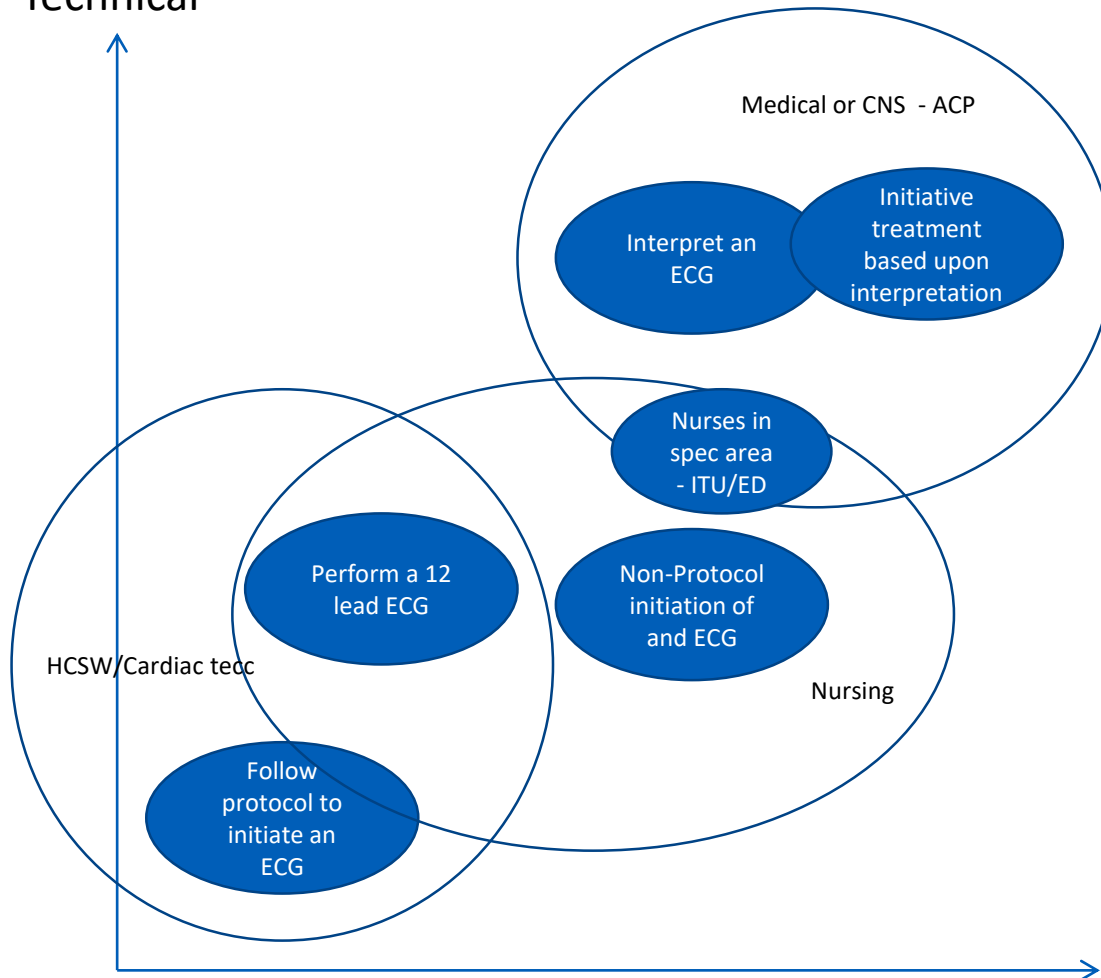
Recently , State and Corporate models have been the most significant driver and linked to the overall economic position of the NHS. (Nursing Associates, Nurse First, ACP and PA roles)

There is a significant correlation between State and corporate drivers and professional resistance. Some recent attempts have been met with overt and covert resistance methods.



The technical / knowledge boundaries of task allocations

Technical



ECG (Electrocardiogram)

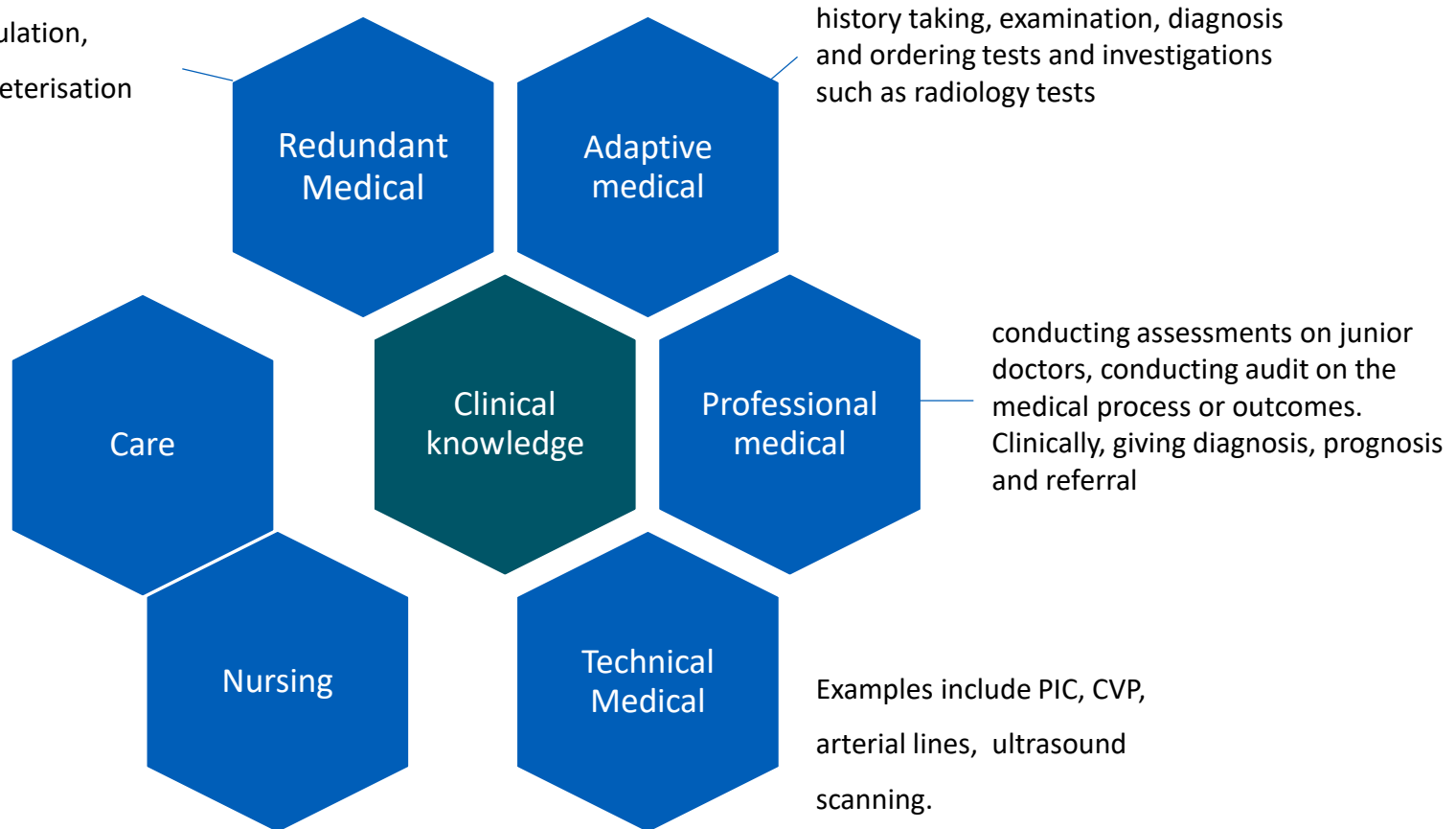
The ECG is a routine test for elective and emergency patients.

The task can be broken down into several component features that are then routinely allocated to members of the Healthcare team depending upon training.

Traditionally many aspects of ECG work were the domain of Medical staff .

Skills/knowledge adaption

Examples include cannulation, venepuncture and catheterisation



Professional Image

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trust

respect

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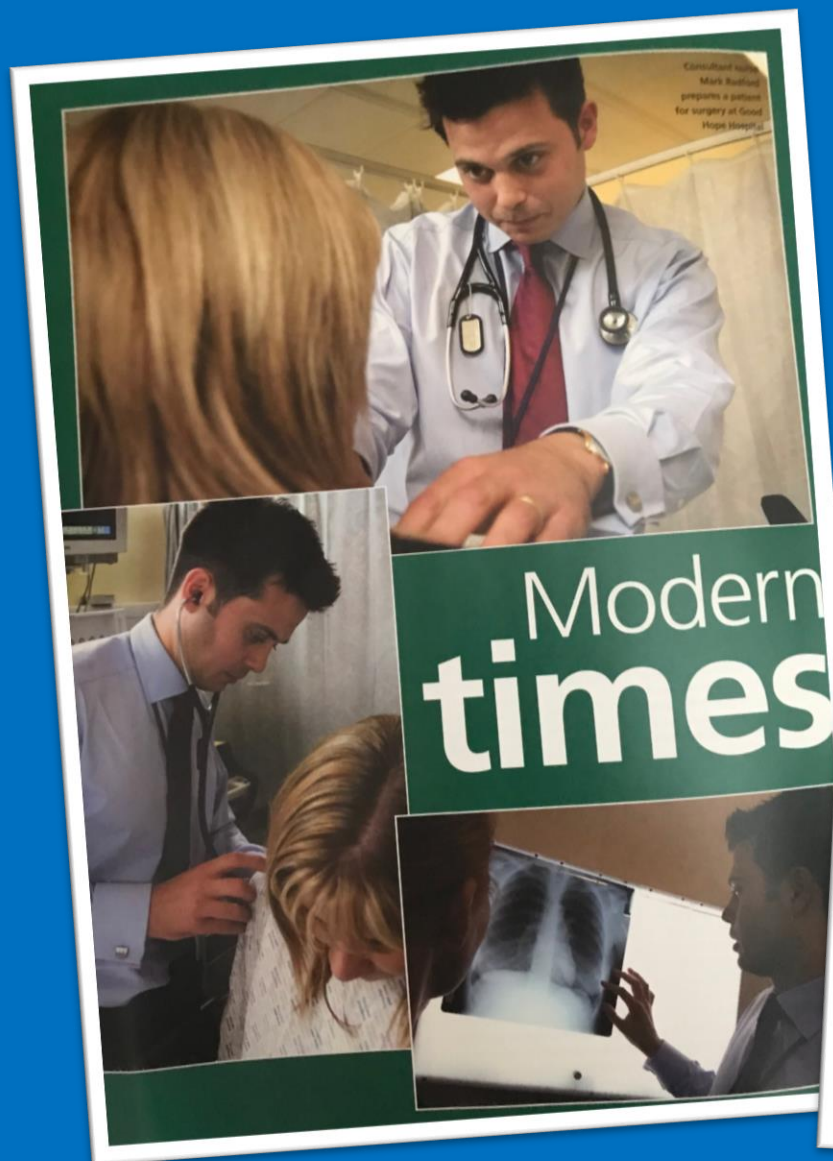
‘The Ideal Nurse’

‘No matter how gifted she may be, she will never become a reliable nurse until she can obey without question. The first and most helpful criticism I ever received from a doctor was when he told me I was supposed to be simply an intelligent machine for the purpose of carrying out his orders’

– SD (1917)







Developing Advanced Practice in the MDT

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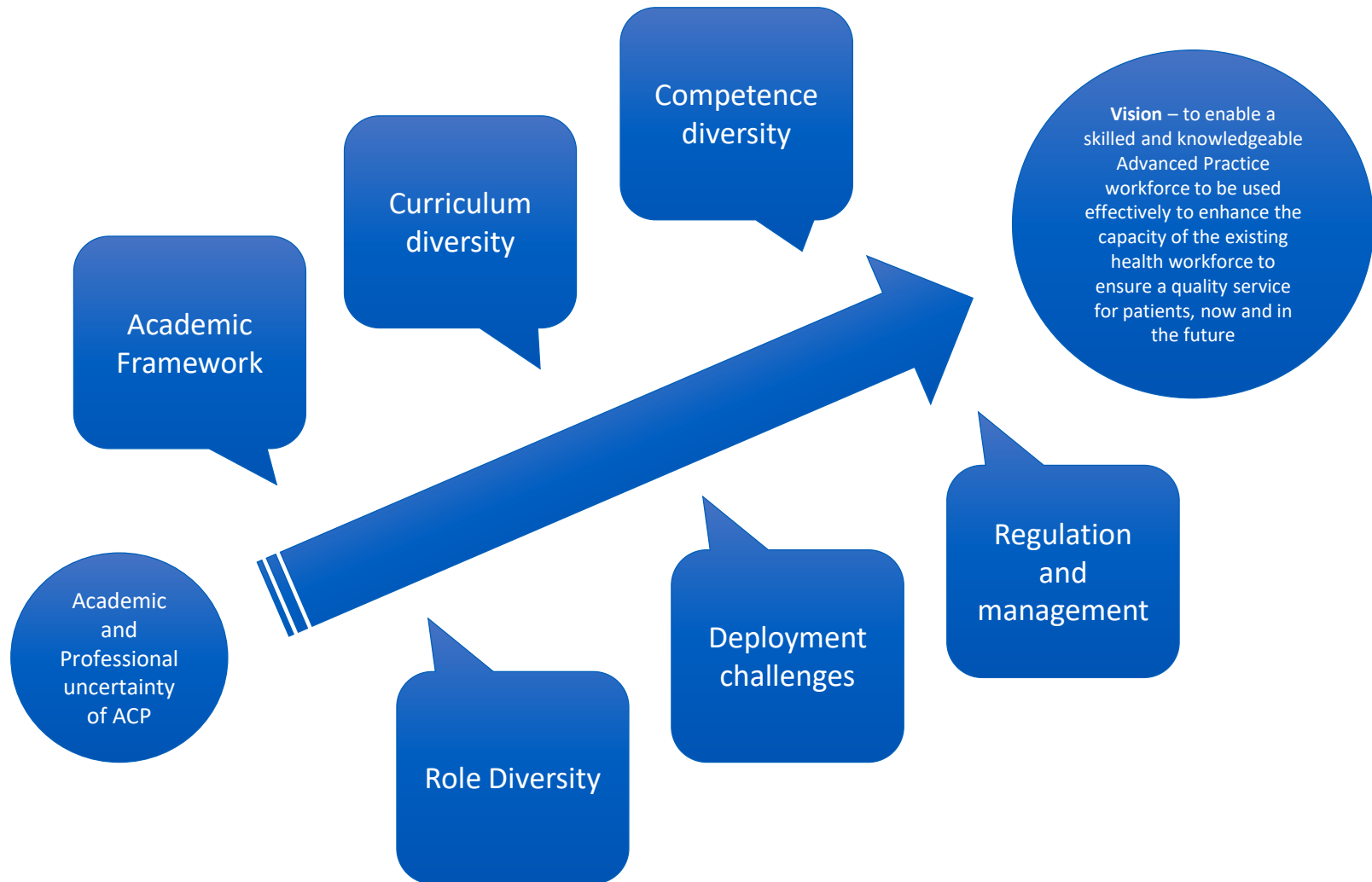
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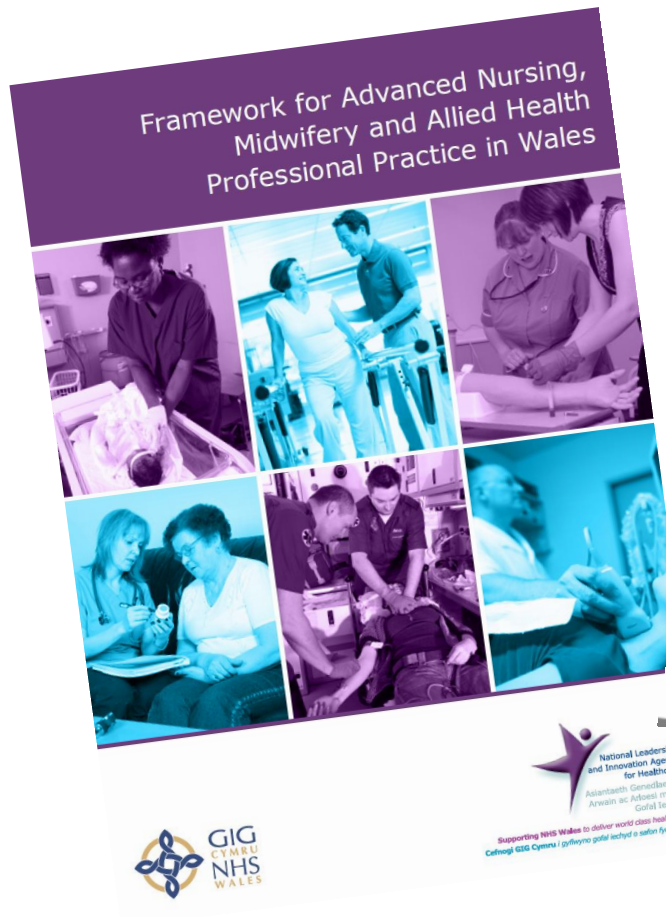
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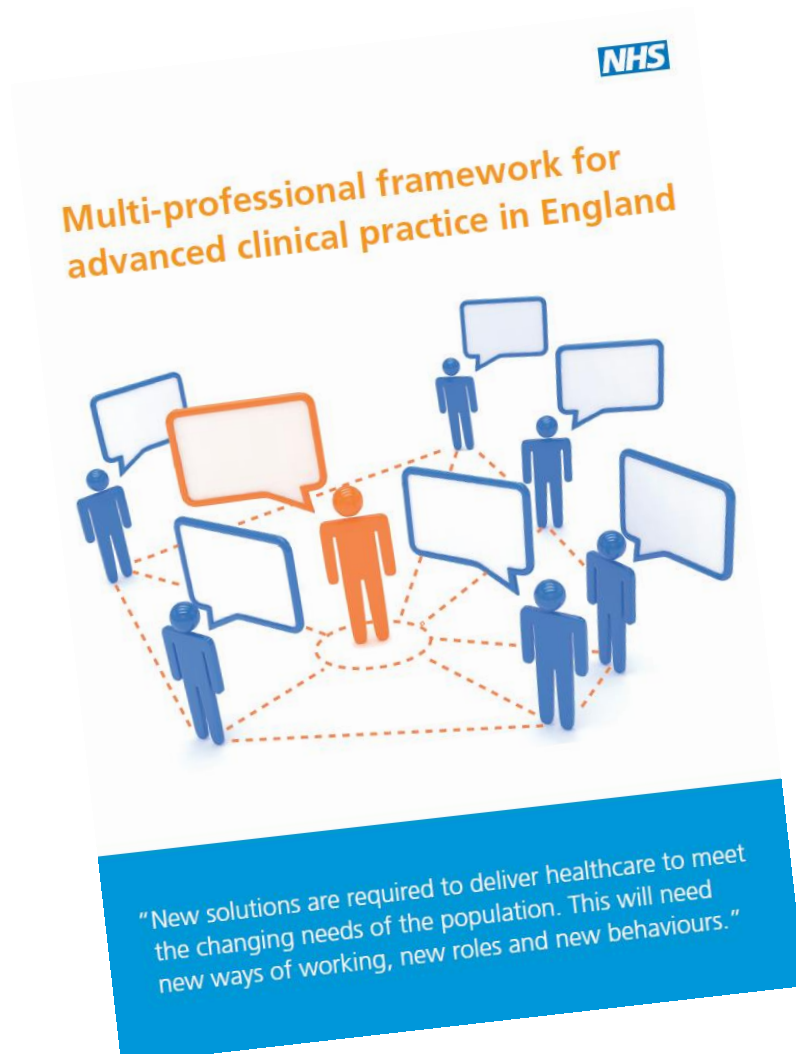
compassion



The UK context



National ACP framework



- A new comprehensive national framework
- Alignment with devolved nations
- Co-produced with system, academics, patients, services users and policy leads
- Multiprofessional focus and support
- For the NHS
- Impact on wider system of practice

Definition & pillars

Advanced clinical practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education and research, with demonstration of core capabilities and area specific clinical competence.

Advanced clinical practice embodies the ability to manage clinical care in partnership with individuals, families and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcomes.

- Clinical practice
- Leadership and management
- Education
- Research

Changed relationship

“Do you think the outreach nurses are primarily a replacement for the house officers then?” He smiles and turns to me and says, “Primarily, yes”. To which Nurse B responds, “Bloody House Officer, I think I am more like a registrar.” –

Observation Conversation –
consultant Anaesthetist & Outreach
Nurse

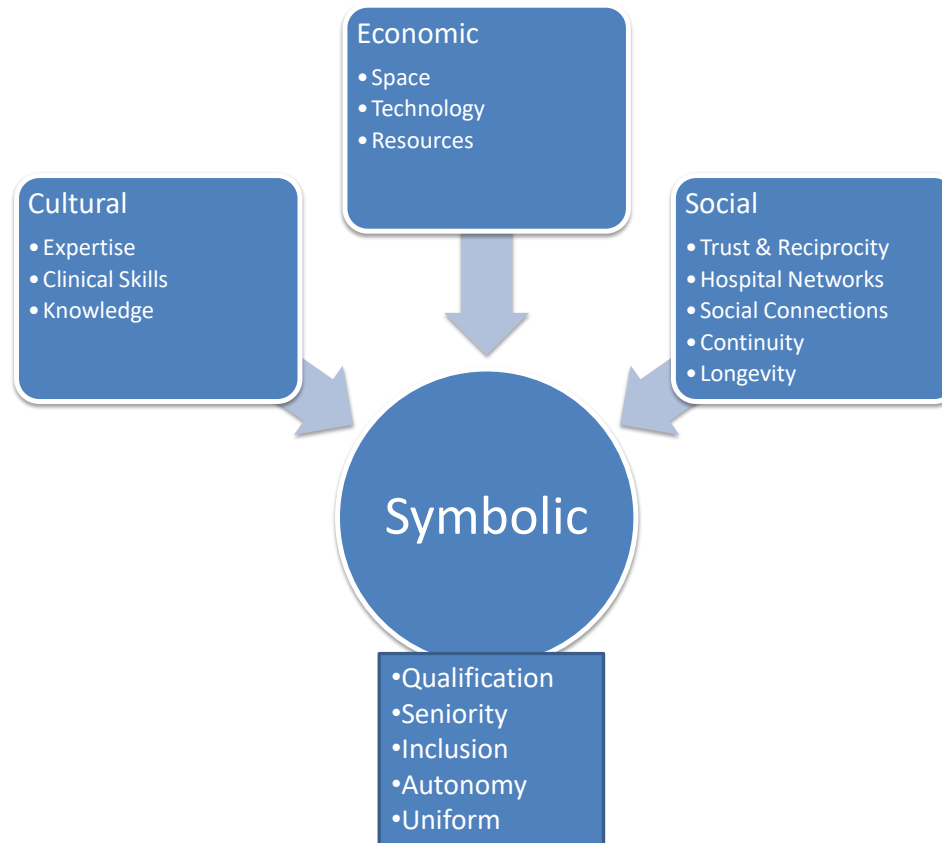
This is where nurse specialists, I think, have really come to the fore in the last ten years, is because you're looking for some way of providing that continuity of care to the patient. To get back a team structure, to provide continuity of care and who you can invest in, in terms of developing expertise and so on, and it isn't the junior doctors anymore. You can't because they're not there. ‘

– Interview consultant

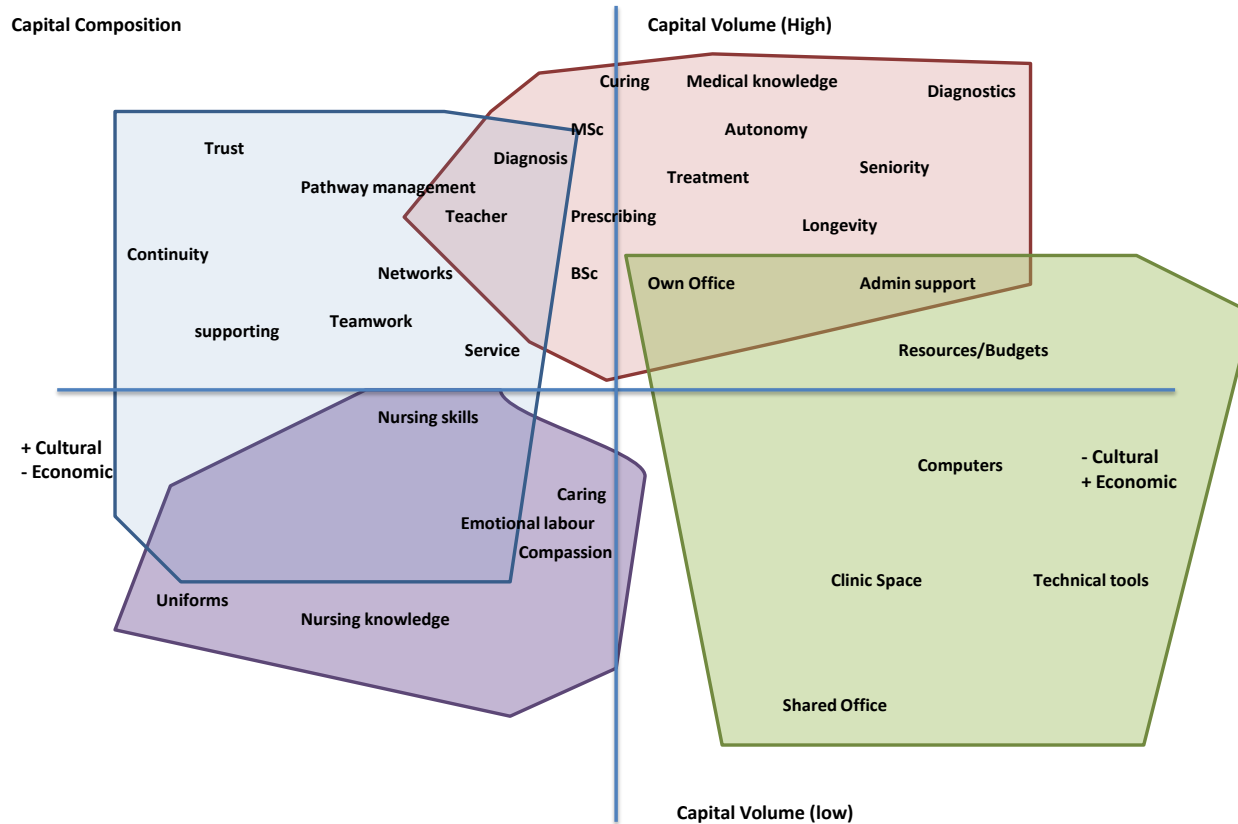
- *‘you think to yourself, hang on a minute, he’s right, why the hell do I have to prove myself to them, when actually I’ve got more knowledge than they have! [Laughs] But I still do it, but I think it possibly is because I’ve no badge that says doctor.’*
- **- Interview Emergency Care Nurse Practitioner**
- *‘I’ve felt scared sometimes by the fact that they are accepting what I’m saying. this consultant with the ‘I am God’ attitude and here’s me telling this consultant of many years’ training and experience what to do..... . And sometimes I think ‘What way have I got to be telling this man this’,- and then I think - ‘But that’s why I’m here.’*

– Interview Vascular CNS

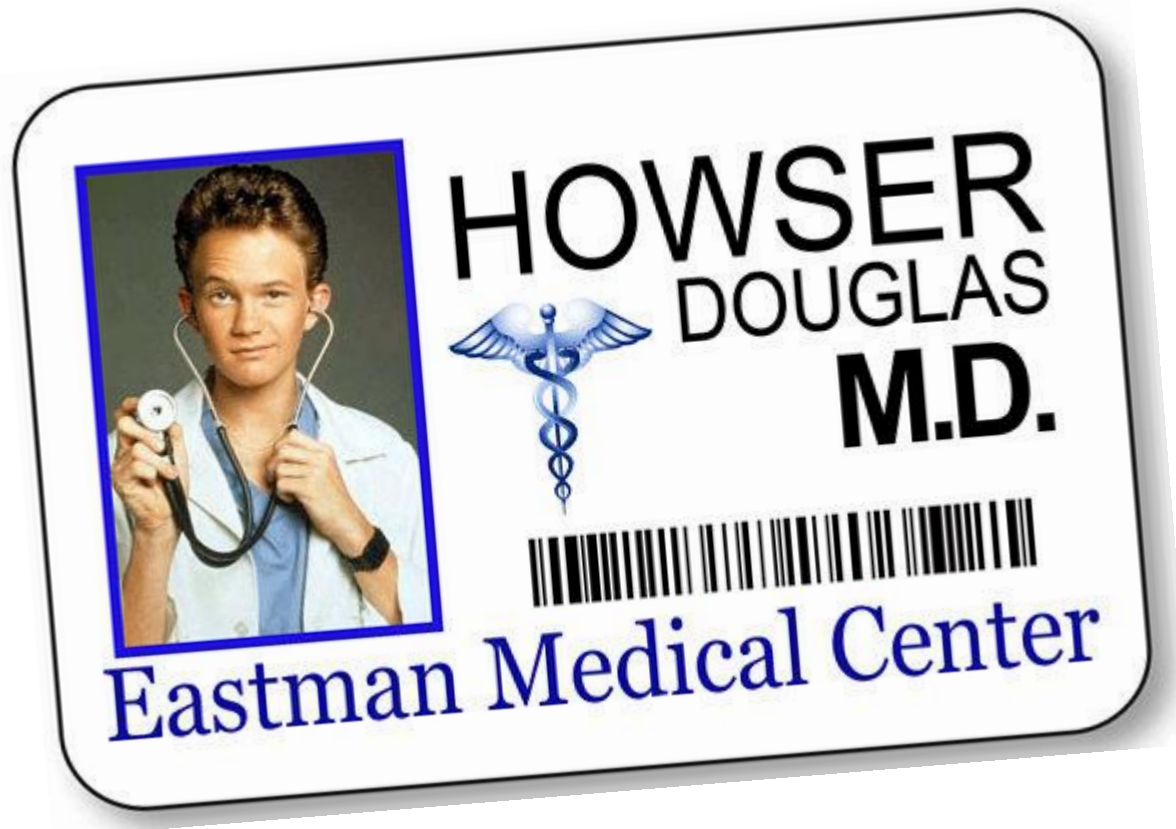
Power and the professions



Power and the professions



Be careful what you wish for ...



The Ideal 'contemporary' Nurse

'The ideal 'contemporary' nurse'

The ideal nurse is a clinician who is part of a healthcare team, who has been educated and trained to be an expert clinician, a leader, an innovator and advocate. To use those skills and his or her critical thinking to deliver the highest quality evidenced base treatment and care'

I am a nurse : I am never 'just a nurse' , I am proud of who I am and the impact I make'

#nursingnhsi

NHS
Improvement

