



GOOD PRACTICES IN LEARNING DISABILITY NURSING WORKSHOP
6th JUNE 2007

ISSUES & SUGGESTIONS

Balancing various aspects / roles of LD Nursing			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • Time • Resources • Shifting & Competing Priorities • Operational demands & pressures • Strategic demands & pressures 	<p>Recognition of what is realistically achievable within agreed job roles / KSF outlines</p>	<ul style="list-style-type: none"> • Training & supervision to enable the issue to be addressed • Protected time to develop skills, knowledge & expertise • Flexible working practices eg link nurse • Creative & redesigning historic roles of LD nursing • Understanding & awareness of key stakeholders & having their support • Publicity & awareness raising with service users / public 	<ul style="list-style-type: none"> • Clinician • Manager • Service Structures • Trust - policy

Role of LD Nurse			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • Historically LD nurses involved in service users life for lengthy periods of time • CLDTs need repackaging – developments of new models of working • Issues with core competencies • Role expansion – extended role of the nurse 	<p>More focus on specialist interventions / early interventions / crisis resolution & home treatment / public health approach</p> <p>Frameworks to be developed for CTLDs, residential, secure units, inpatient units.</p> <p>More emphasis on post registration education</p> <p>Nurse led services need to be developed with budget control</p>	<ul style="list-style-type: none"> • Development of integrated care pathways with ultimate goal of self management • More emphasis on quality • How do we benchmark? 	<ul style="list-style-type: none"> • Education • Service Providers • Commissioners • Professional bodies

Maintain Health Care Status			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • Integrated services • Leads for Social Services have differing priorities • Who looks after the health needs • Pooled budgets – how do we prioritise social care v health care? • Open access – FACS Differing meaning to Health and Social workers • Case Manager – don't want it if it dilutes the role the nurse can play 	<p>Acknowledgement of the valued role the nurse has within LD</p> <p>Promote the role for specialist practitioners within the LD service</p> <p>Health Behavioural – to support the LD population to access primary / secondary health care</p> <p>Train care providers to maintain community placement</p>	<ul style="list-style-type: none"> • DoH to recognise the role the LD practitioner has in maintaining the health care needs of the LD population • Nurse training must not lose LD branch training but the training needs to be looked at 	<ul style="list-style-type: none"> • Health Authority • PCT • Local Authority • NMC

Case Manager Role in Nursing			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • LD nurses in CLDT being case managers & spend majority of time on social care at expense of health care • Social care have the lead role in the Partnership • Reduction in health referrals due to social criteria (critical / substantial) 	<p>Health agenda should be first priority</p> <p>Recognition of skills & knowledge</p> <p>Acknowledgement of Role of Nurse & Health Agenda</p> <p>Referrals for health not being sidelined & rejected</p>	<p>Effective Leadership</p> <ul style="list-style-type: none"> • Training • Sharing Ideas • Sharing agendas <p>Budget planning & business planning</p>	<ul style="list-style-type: none"> • UP • Partnership Board • Service Managers • Team Managers • PCT / Council • Health Commission • CSCI

Effective Leadership			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • How empowered you are dependant upon the organisation you are working in • Lack of uniformity in the North West with learning Disability Nursing 	<p>Strengthening professional leadership within nursing</p>	<ul style="list-style-type: none"> • Raising the profile of learning disability nurses roles & good practice • Training • Networking – pooling of resources • Recognising individuals strengths and skills and celebrating those successes 	

TUPE to Private Sector of Health Staff			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • LD nurses moving to the private sector • Concern that nursing / Health Care will go off the agenda and priority will be Social Care 	<p>Identity of nurses back on the agenda</p> <p>Empowerment in order to achieve the Health Care agenda</p> <p>Strengthen professional leadership within LD</p> <p>Achieve a balance delivering health and social care. Train people to deliver best outcomes for people in all areas</p>	<ul style="list-style-type: none"> • Raise profile of LD nurses. • Network with others (LD) • Use legislation policy guidelines that exist • Raising the profile of LD nurses • Developing evidence based research 	<ul style="list-style-type: none"> • DoH • Valuing People Team • NWTDT & other network forums • Training providers • CSCI

Workforce Development			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • Newly Qualified LD nurses not being competent – gap between educational outcomes and basic standards • Post qualifying – LD nurses collect qualifications but not utilizing them • Accessing mainstream modules that are not relevant • Courses don't keep up with practice on the ground • Lecturers not keeping up to date • LD nurses recognising that have a responsibility to direct / influence future services • Needs to be standardised accountability for training / placements – employers commitment • No clear definition of what we need to achieve / how many needed to do it – no clear outcomes due to lack of evidence based 	<p>Qualified nurses with appropriate competencies</p> <p>Review of nurse education – update the curriculum more often</p> <p>Understanding of how education functions by LD nurses</p> <p>Structured planning to identify what is needed</p>	<ul style="list-style-type: none"> • National core standards for LD nurses (not generic only) • Scrutiny circuit needs to be robust – monitored by adequately trained people • Connections with Skills for Health and Care needs to focus on professionals not just support workers – need connection between skills for health, skills for care and academia 	<ul style="list-style-type: none"> • NMC & DoH • Skills for Health • Skills for Care • HEI

commissioning			
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Workforce Development			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Promoting understanding of why Health Inequalities exist Developing Social Care policy around routine health facilitation 	<p>Raised awareness of what the issues are locally and for these issues to have shared ownership</p> <p>For social care staff to meet basic health needs</p>	<ul style="list-style-type: none"> GP registers of people with Learning Disabilities to be devised and maintained Development of training policy to bridge gaps between provision of social & health care 	<ul style="list-style-type: none"> Public Health Primary Care Secondary Care Service Provider Agencies – Social Care Staff PCT Strategists Local Authority Workforce

Training – Facilitating & Receiving			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<p>Facilitating</p> <ul style="list-style-type: none"> Time Resources Audience Contracts Evidence base from evaluation Knowledge, skills & commitment Formalising what may have been historically provided informally – new demands <p>Receiving</p> <ul style="list-style-type: none"> Commissioning – ring fenced money to develop availability for training Time out of clinical practice Meeting KSF requirements for Agenda for Change 	<p>Right person doing the right thing at the right time for the right reason (RCN 1996)</p> <p>Income generation</p> <p>Raise the profile / professionalism of LD nursing</p> <p>Safe practices – meaningful, valued, evidence / competency based to further develop services and for those services to take responsibility for implementation of the training and to develop their staff as a result.</p>	<ul style="list-style-type: none"> Skills nurses to be effective trainers Post registration training opportunities Publish evaluations / evidence base Commissioning of money Acknowledgement from key stakeholders that training is a priority & support this Structures / processes to support learning & development groups Having short / medium long term workforce planning Clinical Governance structure to meet the needs of the geographical demographics for the target population 	<ul style="list-style-type: none"> DoH NMC Management level Trust People who are commissioning the training

Access to a Learning Disability Nurse			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Lack of knowledge of existence of LD nurses Lack of knowledge of how to access the 	<p>Broader knowledge to the general community</p>	<ul style="list-style-type: none"> Infiltrate schools, repackage and relaunch with very positive image of LD 	<ul style="list-style-type: none"> LD nurses Families People with LD Educational

service • Stigma / fear		nurses	Professionals
Evidence Based Practice			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Practice isn't evidence based eg. Some services have epilepsy nurse – developed on LD interest not evidence of need Getting research approved by LREC LD nurses don't understand where key research centres are Influencing researchers Awareness of EBP that is not published LD nurses need to evidence best practice 	<p>People with LD need to be included in health equity audits</p> <p>Education for LREC regarding patient focussed research</p> <p>Education of LD nurses in research process</p> <p>LD nurses to be aware</p> <p>Share information</p>	<ul style="list-style-type: none"> Local health equity audits – service developments linked to priorities Guidance required Better sharing of practices both regionally and nationally of what is happening Develop databases of best practice 	<ul style="list-style-type: none"> Public Health LD Nurses Commissioners

Resources			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Loss of posts due to vacancy freeze and then money used to fund CRES 	<p>Being able to deliver what we originally did / do</p> <p>Provision of quality service</p> <p>Proactive rather than reactive</p>	<ul style="list-style-type: none"> Funding to be available – ring fenced PCT being contractually bound Feeding back re ECG – unmet needs / waiting times 	<ul style="list-style-type: none"> Commissioners

Transition			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Operationalisation of agreed strategies but not a commitment to realities Resources don't allow Different resources provided in Children / Adult service Different criteria – treatments – 	<p>Smooth transition from childrens services to adults</p> <p>Children / Adult centre needs met</p> <ul style="list-style-type: none"> Health Emotionally Sociable Occupation Private <p>From one service to</p>	<ul style="list-style-type: none"> Develop Transition Team from 14 -25 Includes nurse / social worker / connexion, education, leisure. specialist 	<ul style="list-style-type: none"> Everybody Key rep from all agencies

medication uses or licenced drug Melitorim (?)	the other		
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Transition – Co-ordination of complex care packages by LD nurses

Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> There are two forms of transition – we forget older people There is a paediatrician in Childs life – this goes as no general medic would take them on Reliance on childrens services fostered by paternalistic system 	<p>Focus on both transition for young and older people</p> <p>LD Nurse – link person to co-ordinate services – take over role of specialist in childrens service.</p> <p>Promote self reliance and self management wherever possible</p>	<p>Education, education, education. Training needs to be addressing this need – others need to recognise skills</p> <p>Care pathway development</p>	<ul style="list-style-type: none">

IT frameworks

Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Different ones used 	<p>All using same network IT</p> <p>CAF shared also into adult services</p>	<ul style="list-style-type: none"> One system Nationally for health – social – education – private Child → Adult 	<ul style="list-style-type: none"> Government

Support for Primary Care & Hospital Clinicians & services to deliver healthcare for PLD

Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> Lack of understanding of what a Learning Disability is and the healthcare needs of this population 	<p>Receive an inclusive high standard of healthcare</p>	<ul style="list-style-type: none"> Raise profile of LD by getting LD needs on all local initiatives 	<ul style="list-style-type: none"> Public Health Heads of hospital Departments Chief Executive Boards Nurse Managers Service Provider agencies

Training for Carers

Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> LDAF / NVQ does not provide the appropriate level of training for social / independent care staff, therefore health inequalities exist Behavioural challenges as above Individualised budgets / Direct payments – implications on the health of the individuals as who 	<p>Adequate training</p> <p>Monitoring of contracts</p> <p>Maintenance and Investment in LD nursing teams</p>	<ul style="list-style-type: none"> Protected LD nursing status Adequate training for unqualified for those working in the private sector Monitoring of 	<ul style="list-style-type: none"> Health Authority PCT Local Authority

is policing the recruitment of these people and what qualifications do they have?		placements	
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Commissioning			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • What will be commissioned from LD services • Will we maintain nursing status • Who will fulfil the role for maintaining healthcare for People with LD if LD nursing is not recognised • Who will provide expert advice / training for challenging behaviour, autism, health. 	Recognised role for LD nurses within Primary Care and Acute settings	<ul style="list-style-type: none"> • Maintain LD nursing within Health Authority / PCT 	<ul style="list-style-type: none"> •

Commissioning			
Specific Problems / Challenges	What do you want to achieve	What needs to happen to achieve this	Key stakeholders
<ul style="list-style-type: none"> • Commissioners don't understand what they need to commission – lack of skills, knowledge and competence • Therefore are not clear about role and contribution of LD nurses – only pick up on what isn't done • Lack of evidence utilised to commission services (evidence is available but not used to commission appropriate services eg health) • LD nurses need to understand / develop knowledge re commissioning systems • LA integrated commissioners don't understand the commissioning of health stream services 	<p>Evidence based commissioning that monitors clear outcomes of LD nurses contributions</p> <p>SHA to be clarified and to be more robust</p>	<ul style="list-style-type: none"> • Robust guidance to commissioners • LD nurses need to advise what the outcomes and evidence base should be • National data base of LD commissioners so influence is available at both local and national levels • Commissioners need to understand different outcomes for different key areas • Commissioners having a commitment to workforce development & monitoring for LD nurses 	<ul style="list-style-type: none"> • DoH • PCT • SHA • Integrated Commissioners • LA commissioners

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 Originals will be kept until end of June 2007.