

Effective Practitioner Initiative: Supporting Implementation and Evaluation: Key Messages

NHS Education for Scotland

Blake Stevenson Ltd

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1 Introduction

NHS Education for Scotland (NES) launched the Effective Practitioner initiative in June 2011. There is a web resource which provides a range of work-based learning activities and resources for Level 5 and 6 nurses, midwives and allied health professionals. During 2011-12 a range of awareness – raising activity took place across health boards to introduce the site to as many practitioners as possible.

During 2012/13 NES funded five health board areas to undertake more focused work, which linked with Scottish Government Quality ambitions of safe, effective and person-centred care, using Effective Practitioner resources within clinical teams. At the same time NES offered support to other health boards to develop their use of Effective Practitioner to improve practice.

NES commissioned Blake Stevenson Ltd, an organisation which provides research and organisational support, to provide the funded NHS Board projects and other health boards with support as requested. Blake Stevenson developed and implemented an evaluation process for the impact that Effective Practitioner was having in both the funded areas and more generally as requested by NHS Education for Scotland.

The focus for the funded work is shown in Table 1.1. Within each funded area there was more than one project, with the specific project agreed between NES, the health board and Blake Stevenson for inclusion as a case study for evaluation purposes is shown in bold.

Table 1.1: Funded projects

Health Board	Focus of Funded Projects
1	<p>Clinical decision making in an acute stroke unit</p> <p>Supporting dementia education and learning within an Accident and Emergency unit (Hospital a)</p> <p>Supporting dementia education and learning within an Accident and Emergency unit (Hospital b)</p>
2	<p>Supporting staff bank members</p> <p>Developing practitioners in Integrated Care Assessment and Support (ICAS) teams</p> <p>Clinical decision making</p>
3	<p>Improving care quality in maternity services</p> <p>Improving person-centred care in an orthopaedic ward</p> <p>Supporting carer involvement in end of life care</p>
4	<p>Telehealth</p> <p>Implementing caseload supervision in the Impact Team</p> <p>Reflective practice in action in oncology</p>
5	<p>Muscular skeletal pathway</p>

We agreed an evaluation framework which aimed to evidence the following outcomes:

- practitioners at level 5 & 6 have greater awareness of EP;
- practitioners at level 5 & 6 have improved skills and/or learning through use of EP;
- practitioners at level 5 & 6 have changed their practice as a result of using EP;
- Senior Charge Nurses and Senior AHPs are able to use EP to support development of individual staff and teams;
- teams have changed practice as a result of using Effective Practitioner;
- key stakeholders' expectations of Effective Practitioner are met/exceeded.

The agreed evaluation methods included:

- an online survey with practitioners who have been introduced to Effective Practitioner in either year (n=82);
- the development of in-depth case studies with four of the funded projects;
- follow-up interviews with some of the key stakeholders who had been interviewed in 2011/12 (n=10).

In addition Blake Stevenson reviewed the final reports from all the funded projects.

This short report provides a summary of key messages emerging from this work.

2 Key messages

Blake Stevenson provided a summary of the key messages from the evidence gathered across the online survey, the in-depth case studies, the support with NHS Board non-funded projects and from the NHS Board funded project reports.

Summary of the ways in which Effective Practitioner is being used (based on the evidence from the online survey which received 82 responses)

- **The use of Effective Practitioner is not restricted to the resource's target audience of level 5/6 nurses/midwives/AHPs.**

The majority of those who responded are from Agenda for Change Pay bands (59%) but 30% are at Band 7, 9% at Band 4 and 2% at Band 8. This suggests that EP has been used in teams and that more senior staff are seeing the benefits of using EP for team meetings/supervision sessions. *(Note – the Effective Practitioner is targeted at NMAHP's at Level 5 and 6 of the Career Framework for Health- this developmental framework which differs from the Agenda for Change Pay Banding).*

- **What are practitioners finding most useful in EP?**

The most useful elements are reported as:

- signposting to other resources (46%)
- the learning activities (41%)
- self-assessment tools (41%)

- **What has EP helped with?**

- support with KSF (81%)
- learning, teaching and supervision (57%)
- improved evidence-based practice (46%)
- leadership and management (31%)
- clinical practice (29%)

Learning from the case studies and other supported areas

- **Barriers and practical issues**

There are a number of practical issues that highlight some of the barriers to making use of EP. These include issues around access to computers and in some instances people's level of confidence in using computers. But the overwhelming barrier that has been highlighted across the evaluation is the lack of time and the constraints there are in teams spending time working together on improvement issues. The need to create ways to allow time for learning and reflection comes across strongly.

- **What seems to work?**

The case studies and work in other supported areas have highlighted a number of processes that seem to support the practical use of EP. These include:

- identifying an issue/area for improvement that a team want to address sets the focus on practical outcomes rather than just looking through EP without a clear focus
- the other focus that appears helpful is using EP to help with KSF/PDP work;
- support to a team/individual from SCNs/Senior AHPs or from Practice Educators/Practice Education Leads makes a huge difference and this is a role that could be further developed in the coming year;
- part of this support is around helping the team/individual to navigate the site and to find suitable resources for the issue they wish to address. One of the issues commonly raised was that the site can be a bit

overwhelming so support to identify resources to address a practical issue saves precious time and is welcomed;

- finding the time to reflect and learn brings dividends both for the individual, the team and also potentially for patients and effective management of the health setting.....but no-one underestimates how difficult it is to find the required time;
- having explicit local support from senior management colleagues is important both in supporting the improvements that teams want to address but also in helping find the time for teams to reflect together;
- practitioners and those tasked with education development are keen to share ideas about how they/others have used EP; there is an opportunity to explore how sharing of the use of EP resources can be facilitated.

During the course of the work this year many people have made suggestions for ways in which the EP resource could be improved and these have been passed to NES for consideration.

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