

# Frequently Asked Questions: HEE Nursing Associate Webinar, 13 July 2016

The following questions were submitted before, during and after the one hour webinar run by HEE on Wednesday 13 July. They have been clustered and sometimes combined in order to avoid duplication.

- Applicants can also view the recording of the webinar on the HEE website: http://www.hee.nhs.uk/our-work/developing-our-workforce/nursing/new-support-role-nursing/nursing-associate-test-sites-call-applications
- Please see the Guidelines for Applicants for information about the application process: <a href="https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf">https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf</a>
- A map of the Sustainable Transformation Plan footprints is also available on the HEE website:
  - http://www.hee.nhs.uk/our-work/developing-our-workforce/nursing/new-support-role-nursing/nursing-associate-test-sites-call-applications

# **General questions**

1. How do we access the application form?

The application form is available via the government contract site: <a href="https://www.contractsfinder.service.gov.uk/Notice/f3d7efb2-3c47-4360-93fa-8f963cf2f12f">https://www.contractsfinder.service.gov.uk/Notice/f3d7efb2-3c47-4360-93fa-8f963cf2f12f</a> It is also available on the HEE website: <a href="https://healtheducationyh.onlinesurveys.ac.uk/nursing-associate-test-sites-application-form">https://healtheducationyh.onlinesurveys.ac.uk/nursing-associate-test-sites-application-form</a>

2. Who completes the application form? The lead employer? On behalf of other employers and the education provider?

This for each partnership to determine. Whoever submits the form must have the authority from all partners to submit the form on their behalf.

- 3. Will the content on the 25th July Webinar be different? No.
- 4. Will HEE be encouraging the use of electronic systems for managing care certificate or any other aspect of the NA role?

Appropriate use of technology is advised. HEE is exploring the possibility of developing an e-portfolio that can be used for this development.

5. Will there be sufficient time to share the outputs from the workshop with people before applications need to be submitted?

We will issue a summary of key points in the first week of August.

6. Will they be called a Nursing Associate during the whole time of the programme? The test sites will employ Trainee Nursing Associates for two years. On qualification, these trainees will become the first Nursing Associates.

7. What sort of resources do you envisage employers have in place to support this programme?

Please see Section 14 of the Guidelines for Applicants, which highlights the quality criteria being used to assess grant applications.

https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf

#### **Innovation**

8. Could you provide examples of innovative practices that you are willing to consider?

We are looking to the test sites to provide this. Section 14 of the 'Guidelines for applications' gives some indication of areas where innovation might be applicable.

## The partnership

9. Are you requiring test sites to be a provider of different specialities or is a specialist centre ok?

Test sites must provide a suitable variety of placement to enable the trainees to complete the national curriculum and gain the necessary experience and competencies. There will be some variance in range and type of placement according to each partnership.

- **10.** Are there a maximum number of partners within one bid (partnership consortia)? There is no maximum.
- 11. Is it possible for a Care Home provider with nursing to be considered a Test Placement site?

Yes.

12. Can the employer be a GP practice? Or a specialist health care provider (eg elective surgery)?

Yes

13. What exactly do you mean by education provider? We have got QCF centre where we provide QCF and vocational qualifications. Would that be considered as an education provider?

For this purpose, education providers must be Nursing and Midwifery Council accredited providers of pre-registration education; or able to demonstrate that they are working towards achieving NMC accreditation within the lifetime of the test site initiative; and/or that they are pursuing nursing apprenticeship approval.

14. How do HEIs demonstrate they are working towards NMC accreditation?

At a minimum, the HEI should have notified the NMC in writing of its intention in this regard, as set out on the NMC website: <a href="https://www.nmc.org.uk/education/what-we-expect-of-educational-institutions/applying-for-approval/">https://www.nmc.org.uk/education/what-we-expect-of-educational-institutions/applying-for-approval/</a>

15. How might we find out who locally is interested in the NA project as this may aid partnership working?

Contact your local HEE office: https://hee.nhs.uk/hee-your-area

- 16. Does the lead employer have to be an acute Trust or can it be a HEI?
  - The lead employer must be a healthcare employer, it cannot be an HEI.
- 17. Can you confirm that applications for roles in mental health will be accepted

  The partnership must include at least one health care employer. They may be specialist or
  general in focus. The partnership must provide diversity of placement experience for the trainees.

18. Are you just looking at NHS sites at this time or would you consider independent applications?

There must be at least one healthcare employer. They must be an established organisation (third, public or private sector).

19. Could there be more than 1 Trust and 1 HEI in a consortia? Yes.

- 20. Could organisations share their places so one education provider is used by say 2-3 trusts who each have a smaller number of learners

  Yes.
- 21. If there are multiple employers in an STP working with a single education provider, who would be the 'lead employer?

This is for the partnership members to agree.

- **22.** Clarification around partners do all partners have to provide NHS funded care?

  No. They must be an established organisation (third, public or private sector). They have to be aligned with and linked to an STP footprint.
- 23. Is it ok for one HEI to be the education partner in more than one bid, and will it disadvantage them if they are part of more than one proposal?

  Partners can be in more than one bid. This will not disadvantage them.
- 24. What is the maximum size test site you would consider both in terms of numbers of organisations in a consortium and the number of places to be allocated across that site? There is no maximum number of partners. The initial goal is to ensure that 1,000 Trainee Nursing Associates are recruited before the end of 2016. This is the largest number of trainees that a single partnership could recruit.

#### Location

25. Are you looking for at least one test site in each HEE area or does it depend on the number and quality of applications as to the spread of test sites?

Test sites will be scored by the same criteria and selected on individual merit. The aspiration is to achieve a variety of test sites, across urban and rural settings.

26. If an employer has sites across England could they take placements in each of the sites even if that area is not on the listed footprints if you are linked to a local area in one part of the country

The partnership must be aligned with at least one STP footprint. If you take on trainees in other areas where no such link exists, we would advise that you establish those relationships.

- 27. Is it possible to work across several STPs? Yes.
- 28. How do you find out about STP footprints, and link with them? Contact your local HEE office: https://hee.nhs.uk/hee-your-area.
- 29. If you had two strong applications which were situated next to each other would this be a barrier to both being accepted?

  No.

#### Numbers of trainees and test sites

- 30. Can the minimum number of 20 trainees be shared across employers?
  Yes
- 31. When you mentioned employers will receive funding for 20 trainees, what about individual practices that will only want and be able to support and train 1 staff member?

  Any partnership must, between its members, be employing at least 20 trainees. An individual practice wanting to recruit fewer than 20 trainees would need to be part of a wider partnership.
- **32.** How many test sites are you planning to have? There is no fixed number.
- 33. Can you confirm if its 20 NA per employer for test sites please?

The partnership must overall employ at least 20 Nursing Associate trainees. An individual employer may have one or more trainees, provided that overall the partnership has at least 20.

34. Can you say any more about what you want to see in this signed partnership agreement? Is it a statement of agreement from each partner and the signature of the lead for that organisation?

It is a written and signed document that explicitly details the relationship between the partners and their individual obligations and contributions to the partnership.

#### **Placements**

35. What is the placement commitment?

This will be confirmed once the curriculum is published, September 2016.

36. Would you expect there to be placements in acute sector, hospices, care homes and community?

The combination of placements will vary according to the partnership, but there must be sufficient variety for the trainees to meet the requirements of the national curriculum

37. Is there a minimum number of placement hours and placement types?

The number of hours placement will be determined in the light of the curriculum. There should be sufficient variety of placements to meet the requirements of the national curriculum and to enable the trainees to get the required competencies and experience.

38. What do you understand by the phrase 'all aspects of health and care' in relation to placements. Is this achievable?

The range of placements will be sufficiently diverse to enable the trainees to get the required competencies and experience to enable them to qualify and achieve the agreed scope of practice.

39. Will the notion of NA trainees undertaking placements be possible if they are employed in a specific location – will we expect these employees to travel large distances to undertake placements when they have chosen (usually) to be employed in a location which is convenient to their home // responsibilities.

Trainees should not have to travel long distances: it is hoped that partnerships can provide sufficient breadth of experience within their area.

40. Is the model likely to be day release to Uni, part time practice as a student and part time working as a support worker?

It will be a blend of appropriate employment, study and placement.

41. Many employers/placement providers have already agreed to support specific commissioned numbers for our 16/17 requirements including the placements for 2<sup>nd</sup> and 3<sup>rd</sup> year leaners. How will the selection panel ensure there is the placement capacity to support everyone when deciding on test sites?

Partnerships should only apply to be test sites if they are confident they can provide the appropriate range and number of placements.

42. What is the proposed number and approximate length of placements required for the Associate Nurse 2 year programme and also do they need to cover both primary and secondary settings or for example could a lead organisation plan a placement programme in order to "grow their own" staff in providing them with a range of placements within their own placement circuit. This would then not impact on trying to seek placements in another organisation

An existing placement programme might be used in whole or in part, depending on the range of experience it offers. There must be sufficient variety and breadth within the placements on offer.

- **43.** If that is the case would the placement funding remain with the lead organisation? It is for the partnership to determine how the placement funding is apportioned.
- 44. In terms of funding that would go to the HEI provider: do they receive a set amount or if as an organisation we can readily identify internal staff who would meet the requirements for the nursing associate development opportunity (and hence recruitment activity by the HEI would not be necessary) would this mean their funding would be reduced accordingly as outlay less.

The total sum available to each education provider is a maximum of £5,000 per year per student. For employer and placement costs there is a per capita sum of up to £1,750 per student. It is for partnerships to agree the disbursement of this through the lead partner.

# Cost, funding and salary support

- 45. What is the resource implication for the employer and training provider i.e. what will they be expected to pay for outside the grant? (E.g. what is the salary expectation?)

  See Section 13, page 12 of the Guidelines for Applicants.

  https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf
- **46. What salary or band will the trainees get whilst completing the programme?** This is for the employer to determine.
- **47. Are the trainees expected to be employed on a full time basis?**The trainees may be full-time or part-time provided the curriculum, placement and experience requirements for qualification are met.
- 48. Will there be advice and guidance published on salary/training allowance for the training role?

  No
- 49. We anticipate that costs to develop and support students on this programme will be higher than £10k per student. Is this a maximum figure, or can trusts contribute additional funds to meet these higher costs?

It is a maximum figure with regard to the HEE grant funding. However, partnerships that can demonstrate value added and value for money will be scored favourably.

50. Are we able to use other sources of DoH funding (e.g. STP funds) to contribute towards salaries/backfill costs?

HEE grant funding will not cover salaries and back fill costs. As above, partnerships that can demonstrate value added and value for money will be scored favourably.

51. For ongoing funding will the training be linked to an apprenticeship standard to enable access to the levy?

We anticipate this for future cohorts of trainees.

52. If a Nursing Associate is employed by an independent contractor, such as a care home or GP practice, will that employer be obliged to adopt Agenda for Change Terms and Conditions?

This for the employer to decide.

- 53. Will the fees described in the guidance be adjusted for Market Forces Factor?
- 54. What placement costs do you envision the monies being used for?

This is for the partnership to determine: we are looking for innovation, quality, value added and value for money.

## **Curriculum and education provision**

55. Given the timescales do we have definitive date when information about the curriculum content will be released?

The curriculum will be published in September 2016.

56. What guidance can HEE offer now about the likely curriculum?

At this stage we are unable to answer this.

57. Can you clarify what you mean by an agreed curriculum? Will it be outcomes students need to achieve that we can map against?

We are working towards an agreed curriculum, and will have this available in September.

58. According to the published timescales, the national curriculum will be confirmed after bids have been submitted. This is a concern because HEIs are expected to commit to a partnership without a clear picture of what we are expected to deliver. Can HEE provide some comfort around this perceived risk?

We expect year one to be broadly similar to a current Associate Practitioner foundation degree.

59. Is curriculum likely to be similar to existing associate practitioner foundation degree programme?

This is likely to be the case for year 1 (see question above).

60. Has a firm decision been made regarding medications yet or will this be part of the workshops?

The medications component of the scope of practice, competencies and curriculum will be in line with government guidance:

https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/518298/M edicines in care homes A.pdf

- **61.** Do you expect the curriculum to include pharmacology / medication administration? The curriculum is to be defined. With regard to medication, see question above.
- 62. Will the scopes of practice/outcomes be aligned to the 'new' NMC standards that are due in 12 months?

We will work with the NMC to maximise alignment.

63. What is likely pattern of study at HEI and time spent in workplace?

This will be available when the curriculum is published.

64. HEIs will need to validate the programme before December and this may need to include the portfolio as part of the assessment process, However the document indicates that this will not be published until December?

The portfolio will be aligned with the curriculum and learning outcomes.

65. Will there be an expectation that the programme will have a 50; 50 theory practice split to ensure alignment with current NMC standards if the Nursing Associate wants to go on to complete a programme leading to registration?

Please see section 3.11 of the Guidelines for Applicants.

https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf

66. How do you view this aligning with the apprenticeship agenda?

HEE is working to ensure alignment.

67. If this test site phase can be an apprenticeship, would it be acceptable to use the Assistant Practitioner framework or standard?

The test site phase is not an apprenticeship.

68. When will the Nursing Associate standard be approved?

This is to be determined.

- 69. Will the curriculum be generic or will there be an opportunity to branch off and specialise? It will be both generic and with elements of specialisation.
- **70.** As a pilot site will there be opportunity to input in to curriculum development? We will welcome feedback from the test sites.

#### Role

71. How does the role link to assistant practitioner role?

This role is only focussed on nursing, in comparison with the broader focus of the assistant practitioner role.

- 72. Is there expected to a national job description and banding for the role? Yes.
- 73. Does the HEE have a guidance framework for all the nursing roles to compare different career progression for employees? There are so many now and it is confusing with all the developing roles?

This is in development as part of the Shape of Caring programme.

74. Does HEE envisage the phasing out of the Assistant Practitioner role, and if so will there be a mechanism for APs to 'convert' to a Nursing Associate?

No, the AP role is not being phased out.

## Trainee employment and recruitment

75. Will the trainees already be employed by organisation or will they be recruited to undertake the qualification?

Either.

76. How will trainees be selected and by whom? What level of training will they require to be selected?

Please see the Guidelines for Applicants, 3.12 and 11.12. https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf

- 77. Will the assessor in practice be expected to be a qualified mentor and attend mentor Quality in assessment, supervision and mentoring is key, but their qualifications are not specified.
- 78. Literacy and numeracy are identified as essential elements of the admissions is there any intention to stipulate a single method of assessment for these and/or a reliance on GCSE?

Not at present. There may be changes in the light of the test site experience and other developments.

79. What qualifications etc. will a Healthcare assistant require to apply for the Nursing Associate role?

This is to be determined.

80. Can Assistant Practitioners be part of the pilot and get any credit towards a reduced programme?

No.

- 81. Will we be able to offer accreditation of prior learning to existing assistant practitioners onto the two year programme and enable them to study a shortened programme?

  This is not appropriate for the test site initiative. We will be looking into this issue in the longer-term.
- **82.** Does permanent employment at the end of the Pilot have to be guaranteed by the Trust? This is for the employer decide. However, the purpose of the test site programme is that qualifying Nursing Associates will be employed as such, and that partners involved in the test sites will have a long term commitment to the sustainability and development of the role.

# Supervision and mentoring

83. Will the students need "sign off mentors"? Yes.

84. What is the expectation in terms of mentorship – will the students be mentored by Registered Nurses?

HEE is looking for quality and innovation. See Section 14 of the Guidelines for Applicants. <a href="https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf">https://hee.nhs.uk/sites/default/files/documents/Guidelines%20for%20Applicants.pdf</a>

85. Does the current mentorship qualification allow staff to mentor the new trainees? Yes.

# Regulation

- **86.** Will the role be registered with or regulated by the NMC or any other body? This is to be determined.
- 87. In terms of the scope of practice who is going to mitigate against the risk of an unregulated profession?

Once the scope of practice has been identified, there will be consideration of the need for regulation.