

Cynulliad Cenedlaethol Cymru
Y Pwyllgor Iechyd, Gofal Cymdeithasol
a Chwaraeon
Ymchwiliad I wasanaethau Nyrzio
Cymunedol a Nyrzio Adal
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Ymateb gan Gyngor Deoniaid Iechyd
Cymru

National Assembly for Wales
Health, Social Care and Sport
Committee
Inquiry into Community and District
Nursing services

Evidence from Council of Deans of
Health Wales

Cyngor Dioniad Iechyd Cymru/The Council of Deans of Health Wales welcomes the opportunity to contribute to this consultation. The Council of Deans of Health represents the 84 UK university faculties engaged in education and research for nursing, midwifery and the allied health professions. Our seven member institutions in Wales work together with policy makers to help shape the education and research of the future healthcare workforce in Wales.

1. Whether we have a clear picture of the district nursing and community nursing workforce in Wales, and the level of need for community nursing services (including future need). Do we have the evidence base to support effective workforce planning?

The Interim District Nurse Guiding Staffing Principles help to inform district nurse workforce numbers. Health boards across Wales are working towards realigning staff numbers and skills mix to meet these principles. Prospective staffing plans are completed annually by health board matrons, reporting to senior management, thereby providing direction on future workforce planning. This is fed into education commissioning, which means higher education institutions (HEIs) can respond effectively to ensure they work to develop the district nurse workforce and align with current Welsh Government directives, such as 'A Healthier Wales'.

Across some regions, district nursing managers are reiterating to our members the challenge of balancing complex care needs in the community with opportunities for staff development. This is particularly difficult due to current staffing vacancies and because some experienced level 6 and 7 district nurses are opting for early retirement. Educationalists are further affected by variation in the level of service from community nursing teams. In some areas there is a 24-hour community nursing service and in others the service concludes at 22.00. Educationalists must plan accordingly in their schedules, and this can limit placement capacity in these primary care services. We would recommend nursing students timetables are taken into consideration, so they do not have to cover night shifts in their placements.

The All Wales District Nursing Forum is currently carrying out work to develop levels of care for district nursing in Wales as outlined in the Nurse Staffing Levels (Wales) Act. A range of models are being trialed across different health boards. For

example, one health board has developed an escalation tool, which scrutinises a variety of factors (such as acuity, complexity, and workload) to rate the status of certain cases.

Regarding the education of the community and district nurse workforce, there has been a move towards all community nurses with a band 6 position needing the District Nursing Specialist Practice Qualification (SPQ) in order to undertake a caseload. Early indications using the interim principles have highlighted a need to realign the skills mix to better meet the needs of service users in the community and for more investment in leadership within the SPQ. As a result of engagement with health boards, at least one member has developed and validated a level 7 module specifically for newly qualified district nursing SPQ practitioners in combination with allied health professional roles working in the community.

2. Whether there is clear strategy, at national and local levels, about the future direction for district nurse-led community nursing services. How well aligned is this with the development of the primary care cluster model for example, and with the vision for health and care services set out in A Healthier Wales.

3. How effectively community nursing teams are able to work with a range of professionals and agencies (including primary and secondary care services, social care services and the voluntary sector) to deliver seamless, person-centred care.

The Nurse Staffing Levels (Wales) Act, the Welsh Levels of Care and patient and service user demand all inform strategy on the future direction of district nursing services. Some health boards have been involved with piloting the neighbourhood nurse module (Buurtzorg model) that was initiated by the Welsh Government in 2018. In this model, discrete teams of SPQ qualified district nurses lead and deliver all care provision within a specific geographical location. The ongoing work of the Welsh Community Care Information System (WCCIS) is another area where district nurses are leading work. This is an innovative digital system to help health and social care professionals work more collaboratively. Several health boards have been involved in this work, with early implementation sites looking to roll out a totally paperless system soon.

A central focus of current strategy is the development of cluster hubs to meet the needs of the population in certain localities. District nursing is well represented in cluster meetings and the development of this new way of working within primary care. Most district nursing teams are working towards the implementation of the single point of contact service. This will allow all contacts to the district nursing service (including patients, carers, GP practice staff and others) to be directed through a single contact point where each call is triaged by a district nurse and administrative staff to filter and pass on calls to the required professional.

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