

***Delivering effective nursing care to  
children and young people outside of a  
hospital setting***

**EXECUTIVE SUMMARY**

A scoping project commissioned by Health Education North Central and East London Local Education and Training Board [HE NCEL LETB] and undertaken by the University of Hertfordshire

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# Executive Summary

## Background

Over the course of the last fifty years, there has been a reduction of approximately 75 per cent in the total number of children's hospital beds in the United Kingdom [UK]; at the same time, there has been an increase in the amount and range of care now being provided in other environments that are located within outside of hospital settings. This shift in terms of the location and provision of care has meant that there has been an impact on the preparation and training that healthcare staff require. The Health Outcomes Forum specifically recommended: "*That HEE [Health Education England] address the workforce education, training and development requirements (including capacity and capability) to refocus service provision at home or closer to home*" (Department of Health, 2012: 52)<sup>1</sup>.

This scoping project was financed and commissioned by Health Education North Central and East London Local Education and Training Board [HE NCEL LETB] in January 2014 and was undertaken by the University of Hertfordshire between February 2014 - August 2014. The project was funded to facilitate the consideration of the educational needs of the nursing workforce in relation to out of hospital care for children and young people, thus enabling the future potential development of out of hospital services to meet the health needs of the children and young people living in the HE NCEL geographical area.

## Project Focus

The project title and key question, as provided by HE NCEL LETB was:

**Project Title:** *Delivering effective nursing care to children and young people outside<sup>2</sup> of a hospital setting.*

**Key Question:** *"What education, preparation and development is required to ensure a workforce of nurses who have the requisite knowledge, skills and professional attributes to meet the healthcare service needs of the CYP [Children and Young People] population in the LETB geography?"*

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<sup>1</sup> Department of Health (2012) *Report of the children and young people's health outcomes forum*. Department of Health: London

<sup>2</sup> The terms 'out of hospital' and 'outside of hospital' are used interchangeably, when appropriate, and to reflect the phraseology in other literature that has been consulted

In addition, the project team developed the following objectives in order to refine the focus of the project:

**Objectives:** *To utilise qualitative and quantitative data collection approaches to enhance insight and understanding of the educational needs of nurses who are providing care for children and young people in outside of hospital healthcare settings.*

*To seek the views of service-users in relation to outside of hospital care as well as the attributes they feel are important for health professionals to hold.*

*To ascertain the views of clinical nurses (working within the HE NCEL geographical area) in relation to the provision of outside of hospital care for children and young people as well as the provision of clinical experiences for student nurses.*

*To identify the perceptions of academic staff and student nurses from the four Higher Education Institutions that are contracted to by HE NCEL to gain further insight into the out of hospital clinical experiences that student nurses undertake.*

The team were specifically asked not to include School Nursing or Health Visiting in the scoping project.

## **Methods**

The project adopted a mixed methods approach and information in this report is derived from data collected from:

- Consultation with service-users via established Youth Advisory Panels (National Youth Agency Advisory [NYA] Panel and the Royal College of Paediatrics and Child Health [RCPCH] Advisory Panel). Electronic copies of the questionnaires were sent to the coordinators of the Youth Advisory Panels; a total of fourteen completed questionnaires were returned.
- Consultation with nursing staff representatives working in outside of hospital settings located in HE NCEL's geographical area; data was collected via questionnaires sent to the CCN teams located in the HE NCEL geographical area and via individual interviews with clinical nurses. Eleven questionnaires were sent to the team leader (or their alternate) of each of the Community Children's Nursing teams located in the HE NCEL geographical area. Seven completed questionnaires were subsequently received (64%). In addition, six semi-structured interviews were undertaken with clinical nurses.

- Consultation with the Higher Education Institute [HEI] providers who are contracted to by HE NCEL LETB; data was collected via semi-structured interviews with academic staff and via focus groups with pre-registration Children's Nursing students. Interviews were conducted with a total of eight academic staff; focus groups were undertaken within three of the HEIs and with a total of fourteen students.

## **Key Findings**

### **Consultation with service-users via established Youth Advisory Panels (NYA and RCPCH)**

- The most important aspects of healthcare, for the young people, related to being involved in decisions, being cared for by professionals with the requisite knowledge and skills, being listened to, having confidentiality maintained and having treatment explained in an understandable manner.
- The importance of the nurse's communication skills and clinical abilities was highlighted.
- There was not equal confidence in healthcare provided in a hospital and out of hospital [OOH] setting; there appeared to be more confidence in healthcare provided in a hospital setting.
- The young people's experiences of healthcare had not always been positive.
- Accessibility to healthcare was considered to be important, but other aspects, such as waiting times, were less crucial.

### **Consultation with nursing staff representatives working in outside of hospital settings located in HE NCEL's geographical area: Consultation with Community Children's Nurses**

- The CCN teams located in the HE NCEL geographical area are providing very broad and diverse services for children and young people who have both acute and short-term conditions as well as those with more complex and long-term health needs.
- The provision and maintenance of the services undoubtedly necessitates considerable skill and expertise from the nursing staff.

- The majority of the teams have indicated that there are intentions to expand their current services.
- The development of a future CCN workforce may be limited for two key reasons:
  - Firstly, pre-registration Children's Nursing students have very restricted clinical experience within a CCN context – this may mean that they do not view it as a potential career option, especially if their experience has been at an early or mid-stage of their programme. Only one team reported that they had had a pre-registration Children's Nursing student for a final twelve week 'sign-off' placement.
  - Secondly, the number of post-registration students undertaking the CCN Specialist Practitioner qualification is not only small, but there is an indication that it is declining.
- Many of the staff working within the CCN teams are employed within Bands 6 and 7 of the National Health Service [NHS] Agenda for Change pay scales with only two teams indicating that they had employed a Band 5 nurse at the point of registration.

**Consultation with nursing staff representatives working in outside of hospital settings located in HE NCEL's geographical area: Interviews with clinical nurses**

- None of the participants interviewed had completed a CCN Specialist Practitioner qualification.
- The participants offered a wide range of views on what they considered to be out-of-hospital care, including the identification of a variety of clinical settings and a diversity of health professionals who work in these environments.
- There was general agreement amongst the participants that an approximately equal balance of community and hospital experiences would be appropriate and that the provision of such a balance would increase the likelihood that students would want to work in the community when they qualify. (The term 'community' was used rather than OOH).
- Participants thought that pre-registration Children's Nursing students should undertake more clinical experiences in a community setting in the latter part of their programme (academic Years 2 and 3).
- Participants were proactive in terms of supporting student learning within the clinical learning environment.

- A clear view emerged from the participants that they felt that there were substantive challenges associated with the appointment of newly qualified Children's Nurses to community posts (once again 'community' was referred to rather than OOH).
- The need for newly qualified Staff Nurses to have mentorship and support was emphasised.

### **Consultation with the HEI providers who are contracted to by HE NCEL LETB: Interviews with academic staff**

- Whilst the academic staff interviewed identified a diverse range of OOH clinical experiences for pre-registration Children's Nursing students, the participants focused their discussions on those firmly based within a community setting – primarily Community Children's Nursing.
- The HEIs all commented on the limited availability and capacity of OOH clinical experiences for pre-registration Children's Nursing students; however the value and importance of these was firmly recognised - it is clear that HEIs are attempting to facilitate relevant OOH placements and to prepare students for their experiences.
- There are marked differences between HEIs in terms of the OOH clinical experiences that pre-registration Children's Nursing students are undertaking. In addition HEIs indicated that students within each of their cohorts are undertaking different OOH clinical experiences.
- It is not the norm for pre-registration Children's Nursing students to undertake a twelve week 'sign-off' placement in an OOH clinical area.
- Some of the academic staff interviewed had a perception that pre-registration Children's Nursing students did not always appreciate the value of OOH clinical experiences.
- Some of the academic staff interviewed had a view that mentors did not always appreciate the involvement that pre-registration Children's Nursing students could have in relation to participating in nursing care – there was an indication that students may not be able to undertake activities in an OOH area that they would otherwise be able to do in a hospital environment. Participants mentioned the need to provide support to the students' mentors to facilitate further understanding of the students' learning needs.

## **Consultation with the HEI providers who are contracted to by HE NCEL LETB: Focus groups with students**

- The students identified a diverse range of OOH services; however, students did not use the phrase 'out of hospital' or 'inside of hospital' to describe their clinical experiences. 'Community' was consistently used to refer to School Nursing, Health Visiting and Community Children's Nursing and 'clinical' to refer to hospital based services.
- In the main, students do perceive that they have the skills to work in an OOH setting at the point of registration, but their examples primarily related to Community Children's Nursing posts or the undertaking of further study to become a Health Visitor or School Nurse. Whilst the students identified a range of OOH services at the beginning of their focus group, their potential career choice was vocalised as being between 'community' (Health Visiting, School Nursing or Community Children's Nursing) or 'clinical' (in-patient hospital services). There was one reference to working within a hospice environment on qualification and one to a Child and Adolescent Mental Health Service [CAMHS] setting.
- Students' expectations of nursing, prior to starting their programme of study, varied with some not fully appreciating that they would be gaining clinical experiences in OOH areas.
- Students perceived that HEIs provided some preparation for clinical practice, but this could be limited in relation to OOH experiences; students demonstrated a self-motivated approach to preparation and vocalised the importance of their peers' knowledge in terms of preparing them for a particular placement area. Students acknowledged their responsibilities in terms of identifying and developing learning opportunities/outcomes.
- At the beginning of their programme, students do not appear to know what placements they are likely to undertake and in what order; the clinical experiences undertaken varies across HEIs and across student cohorts.
- Students have very limited insight into the knowledge and skills required by nurses working in an OOH setting.
- Students felt that children should be cared for in their own home environment whenever possible.
- The clinical experiences that students undertake could be influential in terms of how prepared they may feel for an OOH post at the point of registration.

- There is not agreement, amongst students, about whether their programme of study adequately prepares them for an OOH staff nurse position at the point of qualification.

## **Recommendations**

The young people, who completed questionnaires for this project, highlighted that they wanted to be involved in decisions, be cared for by professionals with the requisite knowledge and skills, be listened to, have confidentiality maintained and have treatment explained in an understandable manner. In addition, the importance of the nurse's communication skills and clinical abilities was identified. In order to facilitate this, nursing staff need to be adequately prepared for their roles and responsibilities.

The findings from this project have potential implications for the development of the future nursing workforce who will be caring for children and young people within the HE NCEL geographical area, the following recommendations are offered:

- A more consistent use, and definition, of terminology is strongly recommended; many key documents now use the term 'out of hospital' but this is not a phrase that was used by participants in the interviews/focus groups. It is recommended that 'Hospital' and 'out of hospital' are used from the point of student selection and recruitment and throughout the planning, preparation and evaluation of student clinical experiences, rather than words such as 'acute', 'community', 'clinical' which do not always accurately or fully reflect the service provision. In addition, although participants from across all of the data collection groups, were able to identify a range of OOH clinical experiences, discussions about staff nurse posts at the point of qualification, focussed on a need for the nurse to be an independent and autonomous practitioner; however, many OOH settings do not rely on lone working – a clear definition of 'out of hospital' may enable clarification and consistent usage, this can only be beneficial for both patients and health care professionals.
- It would be timely to identify the number of pre-registration Children's Nursing students gaining clinical experience in each of the CCN teams within the HE NCEL geographical area to ascertain whether there is scope for development. A review of the CCN clinical experience undertaken by pre-registration Children's Nursing students (particularly in relation to the duration and stage in their programme of study) may enable the development of more Band 5 CCN positions for those applying for a Staff Nurse post at the point of qualification. In addition, there needs to be further consideration of whether it is acceptable, and appropriate, for students to gain staff nurse posts, at the point of qualification, in

OOH services – there are currently differing opinions. Appropriate support/preceptorship should be offered.

- Increased student exposure to a greater range of OOH clinical areas so that students develop deeper insight into the services would be valuable; more students may then consider career pathways within OOH settings.
- It would be opportune to consider the availability of OOH clinical areas within the HE NCEL geographical area that could potentially provide experiences for pre-registration Children's Nursing students; this would enable an assessment of current provision as well as the potential development of other clinical learning environments.
- Nurses working in OOH settings need up-to-date information about the clinical activities and skills that pre-registration Children's Nursing students can be involved in. It is recommended that the most appropriate way of doing this is considered.
- It would not be feasible for all students to undertake similar clinical experiences at the same point in their pre-registration programmes, but consideration of the nature of their clinical experiences and the order in which they occur, would be advantageous so that there is more consistency between students in terms of the number of OOH and hospital clinical experiences. The development of opportunities for pre-registration Children's Nursing students to undertake their final twelve week 'sign-off' clinical experience within an OOH setting is recommended as, once again, this could encourage students to consider career opportunities within OOH settings.
- The number of post-registration students undertaking the CCN Specialist Practitioner qualification appears to be declining within the HE NCEL geographical area. It is recommended that further consideration is given to the post-registration educational needs of staff to enable them to gain the requisite skills and knowledge to provide care within an OOH setting, but also to facilitate their own professional development.