

Education Annual Report 2018-19

Everyone's a teacher, everywhere's a classroom.

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EXECUTIVE SUMMARY

This is the second Education Annual Report and builds on our inaugural report last year using the three themes which form the structure of the Learning and Development strategic plan:

- Learning Placements
- Learning Workforce
- Learning Culture

The highlights within the report include the investment in the education team and the growth of our team of Consultant and other educators to deliver the increasing education and training requirements for staff members and students. This growth in the team has enabled us to further expand clinical placement capacity for medical students by 5% and non-medical students by 10% as part of building our future qualified workforce under the theme of Learning Placements. This has been further enhanced by our focus on developing multi-disciplinary team working through developing a range of opportunities for inter-professional learning both for undergraduate and registered professionals, such as Allied Health Professional student inductions and the Chesterfield Mentorship Model.

This year also saw us build on our 'grow our own' culture and the Learning Workforce section highlights the incremental growth in activity to develop support staff and the significant progress which has been made to further develop apprenticeship opportunities across a wider range of staff groups and from level 2 through to masters level qualifications. In particular, the growth of our leadership development opportunities from level 3 to level 7 apprenticeships is helping to reinforce Leading the Chesterfield Way. This section also highlights our increase in the use of simulation training across a range of programmes with the aim to improve patient safety, enhance staff confidence and improve their experience of learning.

The Human Factors and simulation training is the jewel in the crown of the Learning Culture section and has been well received to date and will form the foundation for much of what we take forward over the next year. We are also pleased to report on the increased services we provide directly to improve patient experience, in particular dementia and autism resources. Essential Training continues to be one of our priorities and significant developments in the implementation of a new Learner Management System, and more e-Learning options, have enabled an increase in compliance.

Multi-professional Learning and Development Strategic Plan 2018/21

‘To be a centre of excellence for high-quality workplace learning in the context of high-quality practice, and to be a local employer of choice where our people can prepare for, begin, and achieve their career potential’

The workstreams

What we will do

How we will do this

Learning placements

To be a centre for excellence for placement learning for all learners

“... re-invest education income to create capacity and quality in workplace supervision, mentorship and infrastructure such that all placement learning opportunities in the Trust are fully exploited and placement quality indicators are amongst the best nationally”

1. Maintain and build our relationships with key education commissioners and providers
2. Develop placement capacity which supports the workforce plan and future workforce needs
3. Encourage 3 levels of participation: universal engagement (culture), workplace champions (integration), and professional education leadership (faculty)

Learning workforce

The right people in the right place at the right time

“...we will ensure our people receive the support and development to empower them with the skills, knowledge and behaviours which will encourage them to stay and work for us and achieve their potential.”

1. Support recruitment through a reputation for learning excellence;
2. Support retention and staff development through high-quality career mentoring and clear pathways for development;
3. Support workforce transformation through high-quality learning programmes”
4. Ensure essential training, and Continuing Professional Development are aligned with our people’s developmental needs and their day-to-day working needs (70:20:10)

Learning Culture

A culture that promotes learning from successes and failures to continuously improve

“...develop a culture of reflection to promote continual improvement and help realise cultural transformation

1. Connect and support education and quality champions to make a difference
2. Build on ‘huddles’ and other opportunities to create spaces for true, high-quality, inter-professional reflection on practice in partnership with patients
3. Strengthen the connection between safety and quality information and learning so that learning cycles are authentic and complete

Inter-professional Learning

Simulation/Human factors

E-Learning/Social learning /Digital learning

Team learning + Reflection

Mentorship/Coaching

Patients as educators co-development

Multi-Professional Learning and Development Strategic Plan Objectives 2018- 2021

‘To be a centre of excellence for workplace learning and development and to be a local employer of choice where our people can begin, develop and achieve their career potential’

Why this is important to us:

How we will do this:

Learning Placements:

To be a centre of excellence for placement learning for all learners

1. Develop capacity linked to workforce plans
2. Work in partnership to facilitate growth in system wide quality placement capacity
3. Valuing our mentors, supervisors and educators
4. Build our educational infrastructure to support learners and educators
5. Investing in current and new partnerships with Higher Education Institutions and other education providers
6. Listen to our learners and educators
7. Actively build placement capacity and educational expertise

Learning Workforce:

To provide learning which supports the workforce objective – ‘the right people in the right place at the right time’. (People Plan 2015)

1. Develop a mentor infrastructure to support our people to achieve their potential
2. Apply digital technology to support a mentor community in practice
3. Recognise and reward the skills and knowledge of our educators and learners
4. Develop learning opportunities which link to career pathways
5. Encourage and allow our people to explore and learn from other organisations
6. Ensure our work-based learning educator structure is fit for purpose
7. Develop work-based learning opportunities using simulation and digital technology
8. Invest in apprenticeships at all levels to ‘grow our own’
9. Work with schools and colleges to attract our future workforce
10. Develop clear development pathways for our people to achieve their potential.
11. Ensure clarity in relation to essential and essential to role training

Learning Culture:

To develop a culture that learns from its success and failures to engender continuous quality improvement (Quality Strategy 2016)

1. Embed learning from feedback, complaints/incidents into in-house training
2. Develop digital resources which enable people access to knowledge in the workplace
3. Optimise the functionality of the Aspire Learner Management System
4. Embed opportunities for reflection and supervision in practice
5. Promote inter-professional learning opportunities
6. Create/support ‘interest groups’ to co-ordinate and drive educational developments
7. Identify emerging educational leaders and support their development
8. Strengthen partnerships with quality governance to connect learning and change
9. Develop patients as partners in a range of educational activities

Learning Placements:

To be a centre of excellence for placement learning for all learners

- Develop a core multi-professional faculty to provide leadership
- Actively building placement capacity and educational expertise
- Valuing our mentors, supervisors and educators
- Listening to our learners and educators
- Building our educational infrastructure to support students and educators
- Develop an internal commissioning model and quality accountability process
- Investing in current and new partnerships with Higher Education Institutions and other education providers

Introduction

The strategic plan is to “...re-invest education income to create capacity and quality in workplace supervision, mentorship and infrastructure such that all placement learning opportunities in the Trust are fully exploited and placement quality indicators are amongst the best nationally”.

This section provides an update on how we have built on the success of the first year of our learning and development strategic objectives and includes details of new developments for learning placements, expansion in capacity, ongoing quality improvements and mentor/supervisor support and achievements.

DEVELOP A CORE MULTI-PROFESSIONAL FACULTY TO PROVIDE LEADERSHIP

The multi-professional faculty is led through a shared leadership model which consists of Dr. James Crossley, Dr. Iain Dods and Dr. Maxine Simmons. The education leadership meet on a monthly basis to review progress against the multi-professional learning and development strategy and discuss priorities and investment.

New roles to the team this year have included:

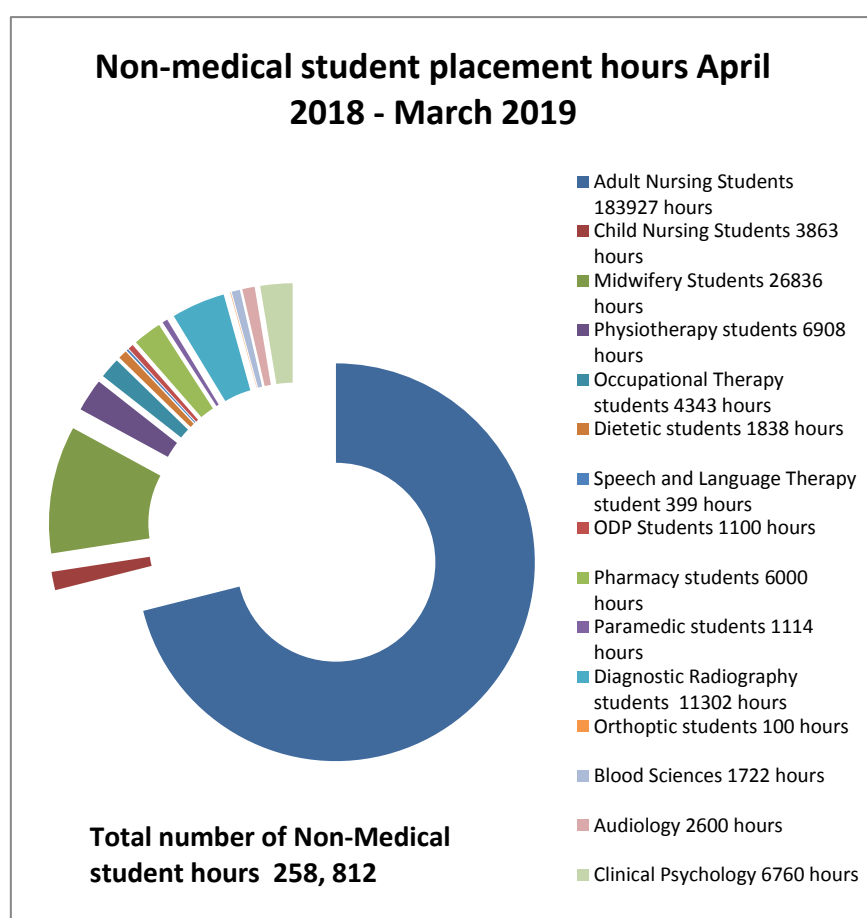
- Tina Thompson - Practice Learning Facilitator for Allied Health Professionals.
- Dr. Mike Scanlan – Consultant Clinical Educator with a lead on Learning Workforce, including essential training and the strategic development of the Advanced Clinical Practitioner role, SAS doctors, Physician Associates and Workforce Strategy
- Mr Krish Kumar – Consultant Clinical Educator Lead on Surgery
- Dr Helen Moore – Consultant Clinical Educator Lead on Learning Culture
- Dr David Brookes – Consultant Clinical Educator Lead on Palliative Care

ACTIVELY BUILDING PLACEMENT CAPACITY AND EDUCATIONAL EXPERTISE

Non-medical Students

The Centre for Practice Learning (CPL) Team have supported undergraduate non-medical students from 15 different healthcare professions on placements, ranging from one to sixteen weeks, from nine different Higher Education Institutions (HEIs) across Derbyshire, Nottinghamshire, South Yorkshire, Leicestershire and Lincolnshire.

This year we have delivered an increase of 24,763 student placement hours since 2017/18. 23,000 of the hours within adult nursing and midwifery.



Allied Health Professional (AHP) Student Capacity

The AHP Practice Learning Facilitator (PLF) is encouraging different ways of learning, providing extra support for staff and students, whilst building capacity in partnership with the Higher Educational Institutions to understand their placement needs and processes.

Working closely with Occupational Therapy and Physiotherapy educators student capacity has been increased by identifying gaps throughout the academic year and allocating student numbers equally across the different specialities. We have high-lighted teams who do not currently take students and provided extra support and training to help them to facilitate placements for the next academic year.

The Imaging department has undergone renovation resulting in the loss of an imaging room and reducing placement capacity for students. To prevent a reduction in student numbers, the Multi-Professional Practice Learning Lead has worked in partnership with university lecturers, the Head of Imaging and radiotherapy student links. This has resulted in a number of developments to maintain student capacity, including: students to work the full range of shifts available between 07:30 - 00:00, 7 days a week and off-site bases to be used for placements and the use of Theatres, Emergency Department and Orthopaedic wards at peak times.

Medical Student Capacity

The Trust supported bids by both Sheffield and Nottingham medical schools for a share in the national increase in medical student places, and both were successful.

Following discussions with the Hospital Leadership Team we have offered both medical schools additional placement capacity and our bid was strengthened by our excellent quality indicators. We are set for a confirmed 5% increase in placement activity to 2,166 student weeks p.a. by 2021 and are waiting to hear whether we are successful in a further 120% increase to 4,624 student weeks p.a. by 2022.

Physician Associate (PA) Capacity

In the face of increasing service demands, the NHS workforce continues to grow and diversify. Physician Associates are a new professional group that has a future role in the delivery of healthcare, developed purposefully to meet these demands. Qualified Physician Associates are medically trained, generalist healthcare professionals who work alongside doctors and provide medical care as an integral part of the multidisciplinary team. Physician Associates are not independent practitioners but work with a dedicated medical supervisor. In contrast to the junior doctors who rotate through different Trusts and different specialities, the Physician Associate offers continuity and stability both for patients and for the team in which they work.

The Medical School at the University of Sheffield, delivers a Two-Year Post-Graduate Diploma in Physician Associate Studies, which consists of specific clinical placements for a varying length of time as per the national curriculum. In 2018/19 we developed our placement capacity to offer 8-week placements for students undertaking the Post-Graduate Diploma in Physician Associate Studies. The clinical placements are in 'General Hospital Medicine and Surgery' and 'Front Door Medicine'. The first cohort of students underwent their clinical placement at the Trust in Mid July 2018. The initial feedback from the students undertaking these clinical placements at Chesterfield Royal Hospital has been excellent.

Return to Practice (RTP)

Our relationship with Higher Educational Institutions and the return to practice programme has grown over the last year.

Return to Practice (RTP) students are healthcare professionals who have let their professional registration lapse. To become registered, these students must undertake a programme of learning as

set out by their professional body (NMC, HCPC), including written assignments, portfolio and practice hours to achieve competency to gain registration onto the professional bodies register.

We have worked in partnership with Higher Educational Institutions from Yorkshire, Derbyshire, Nottinghamshire, Northamptonshire and the West Midlands to offer placements for their Return to Practice Adult Nursing, Child Nursing and Midwifery students.

We have successfully supported three Adult Nursing RTP students and one midwifery RTP student over the last year. These RTP students are placed in areas reflecting their previous experience and interest, and also highlighted by the Nursing Workforce Co-ordinator as an area with a potential job opportunities. The three Adult Nursing RTP students successful in gaining jobs in their placement areas and the Midwifery RTP student joined the midwifery bank.

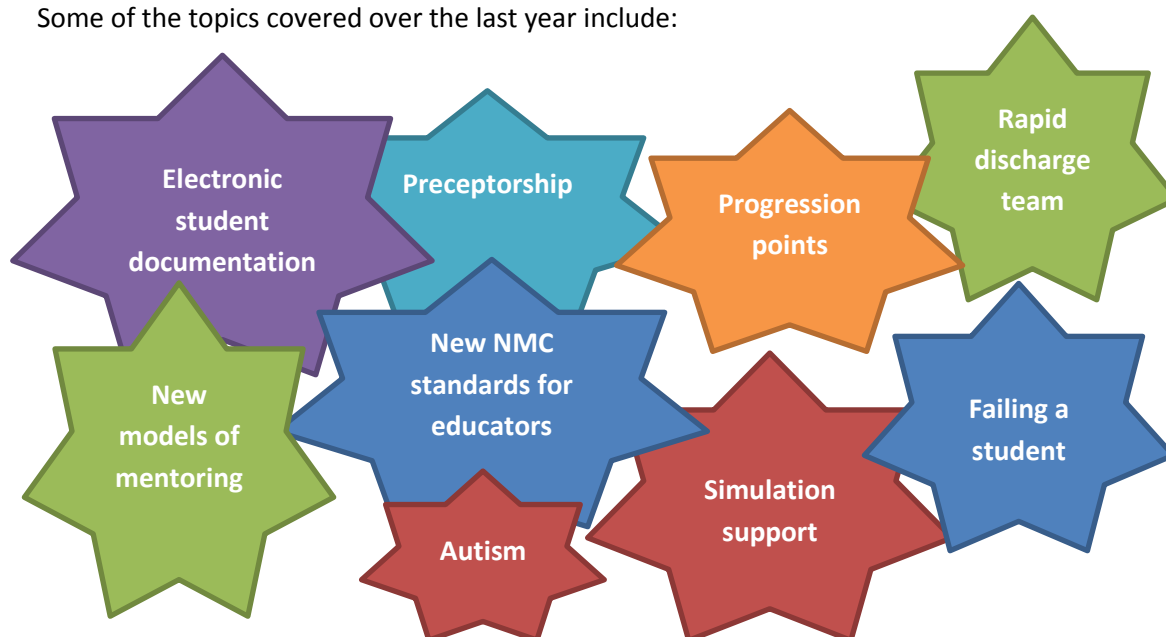
VALUING OUR MENTORS, SUPERVISORS AND EDUCATORS

Learning Environment Manager Workshop (LEM)

Learning Environment Managers are experienced mentors who have an additional responsibility for co-ordinating student placements on their ward/department.

Held monthly, the LEM workshops keep the LEMs up-to-date with the latest developments for student placements and enable reflection on their experiences with colleagues for support and learning.

Some of the topics covered over the last year include:

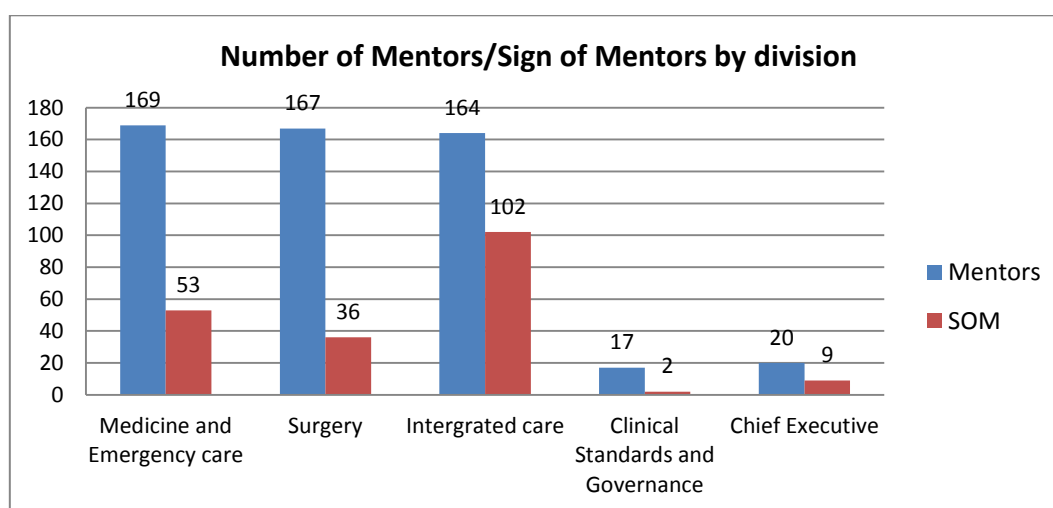


University lecturers regularly attend these workshops. They are an excellent opportunity for the LEMs to ask about student issues, mentoring students, student documentation, policies, struggling students, share good practice and it allows the lecturers the opportunity to provide up-to-date information about the nursing curriculum, simulation sessions and support mechanisms.

Increasing Nursing and Midwifery Mentor Capacity

The Nursing and Midwifery Council (NMC) standards for learning in practice require all student nurses and midwives to be supported by a registered nurse or midwife who has completed the required mentor training. The Mentor must ensure they keep up to date through an annual mentor update. Between April 2018 and March 2019 the Centre for Practice Learning (CPL), in partnership with university lecturers, have trained 73 new mentors (nursing and midwifery), delivered 96 mentors update sessions for mentors, and facilitated three sign-off mentor workshops.

These updates included information about student documentation, sickness and incident reporting, the different types of mentor update, triennial reviews and problems.



Chesterfield Mentorship Model

In response to the increasing numbers of nursing students the Centre for Practice Learning has developed a new model of mentoring, piloted initially on two wards and implemented trust-wide in October 2018. In the Chesterfield Model of mentoring, nursing students are allocated a mentor and are also supported by other members of the team who act in a coaching capacity. These coaches can be a healthcare assistant, another registered nurse, nursing associate or Allied Health Professionals.

To support this model a 'Learning Log' was designed and which outlines the learning objectives for the student. The Learning Logs reviewed at the end of the shift by the student and coach. The coach confirms if these learning objectives have been achieved and can comment on the student's professional behaviour. The 'Learning Log' can be used by the student as evidence of their learning when the mentor is assessing their competencies. The feedback about the mentor model and 'Learning Log' has been very positive.

Education for the Chesterfield Model of Mentoring began with the Learning Environment Managers who cascaded to the ward/department staff. The CPL team spoke to all students who are on placements at the Trust about the Chesterfield Model of Mentoring and how it would involve them.

In March 2019 the LEMs completed an evaluation about the Chesterfield Model of Mentoring in their area. The findings were positive with 100% of the LEMs understanding the Chesterfield Model of Mentoring and 85% of the LEMs using the Chesterfield Model of Mentoring in their area. The LEMs were asked to compare the standard model of mentoring (one student to one mentor) to the Chesterfield Model of Mentoring: 80% of LEMs thought that the patient experience had been improved by using the Chesterfield Model of Mentoring, 78% thought that the student experience had been improved and 68% thought that the mentors experience had been improved. Fifty-seven per-cent of the LEMs felt that the learning opportunities remained the same and 43% felt that the learning opportunities had been increased with the Chesterfield Model of Mentor.

Sheffield Medical Undergraduate Lead 1:1 meetings

The Medical Undergraduate leads are comprised of 13 Consultants and one Sister with leadership roles supporting medical student education within their own clinical teams. From 2018, we began a programme of regular 1:1 meetings with eight of these staff to support them in developing these learning placements into the future. This is how we have achieved the placement reforms necessary for the expansion plan.

Commissioning Surgical Tutors

With the support of Surgical Undergraduate Lead, Mr. Robin Gupta, we have commissioned protected teaching and supervision time from seven consultant surgeons with a general training to support and supervise medical students in a sustainable way. This enables us to deliver on our expansion plans.

Peer Observation

Doctor Simon Gay, Clinical Associate Professor in Medical Education, and Dr. Lucy Ambrose, Director of Bachelor of Medicine/Bachelor of Surgery, Clinical Medicine Course from Nottingham School of Medicine, visited the trust in September 2018 to deliver a workshop on peer observed teaching to clinical tutors for the Nottingham students. The plan is to introduce peer observation into the trust for medical student tutors, and roll it out over the next 24 months.

Preparation for Standards for Student Supervision & Assessment (SSSA)

The Centre for Practice Learning team has taken responsibility for undertaking the necessary preparations in line with the new Nursing and Midwifery Council (NMC) Standards of Proficiency, including the Standards for Students Supervision and Assessment (SSSA) (NMC, 2018). In order to facilitate a smooth transition, ensuring the conversion of our Nursing and Midwifery Mentors and Sign off Mentors into the new roles of 'Supervisor' and 'Assessor' has been a priority. This is facilitated through face-to-face teaching sessions and skills workshops. These sessions have been developed in collaboration with the PAN Midlands Group in order to standardise the level of staff awareness throughout the region. These sessions have been adapted by the CPL team to inform staff

of any additional information specific to the Chesterfield Royal Hospital. The CPL team, with support from Higher Educational Institutions, delivered these sessions.

In order to ensure trust-wide staff awareness of the NMC changes, the CPL team has also been delivering an overview of the changes in student assessment and new roles within the Essential Training sessions, (Mentor Awareness Sessions).

The Heads of Therapy have received regular updates from the CPL team in order to suitably prepare the Allied Health Professionals within the trust, who will also be moving into the newly defined role of 'Supervisor'. Allied Health Professional staff will be attending bespoke sessions, ensuring the educators are prepared to supervise nursing students under the new standards in supporting inter-professional learning.

Further to this, the CPL team has mapped clinical placement areas against the new proficiencies that will be required of future nursing students. Upon its completion, this mapping will now enable an equality of exposure to nursing procedures for all nursing students working on placement within the trust. The format of this information will also be standardised and made accessible to all through the clinical area web-pages.

LISTENING TO OUR LEARNERS AND EDUCATORS

Medical Student Feedback

The Nottingham CP 1 students gave their feedback at the end of their placement in June 2018. In general they were very positive about the placement and felt it was well organised. Of the few sessions that were cancelled, alternative sessions were arranged.

Areas feedback for improvement were:	What we have done in response:
<ul style="list-style-type: none">• They felt that they would benefit from more rotation of ward bases in order to get exposure to a wider range of clinical presentations.	<ul style="list-style-type: none">• This year the students will all rotate halfway through their placement from a medical ward to a surgical ward and vice-versa.
<ul style="list-style-type: none">• They felt that on-call experience and EMU were difficult to access.	<ul style="list-style-type: none">• All students will get 2 consecutive weeks on EMU.
<ul style="list-style-type: none">• They wanted timetables in advance to be put on Moodle.	<ul style="list-style-type: none">• Tutors have given timetables of the subjects they will be teaching. This will be put on Moodle with their slides.
<ul style="list-style-type: none">• They sometimes felt that they didn't have a role on the ward and were not learning anything useful.	<ul style="list-style-type: none">• Inter-Professional Clinical Educators have been appointed to help all student learners and will give guidance and direction to the students on their ward days.
<ul style="list-style-type: none">• They said that sometimes some consultants were surprised to see them, not always expecting them in clinic.	<ul style="list-style-type: none">• Work has been done with specialties and outpatient clinics to ensure that they are aware that students will be turning up to sit

	in as observers.
<ul style="list-style-type: none"> The students highlighted that Eduroam was not available. 	<ul style="list-style-type: none"> Eduroam has been procured and is widely available throughout the trust

Non-Medical Student Feedback

Students on non-medical undergraduate course evaluate placements as part of their course

During 2018/19 we received 351 student evaluations from University of Derby, 30 from Sheffield Hallam University, 5 from University of Sheffield, 50 from University of Nottingham, and 5 from the Open University. These evaluations cover adult and child nursing, midwifery and paramedic placements.

Each university's evaluation template is different but covers the same themes. These include: welcome and orientation to the clinical placement; if interviews were completed on time; and the availability of learning opportunities. The evaluations are reviewed and collated by the Centre for Practice Learning team quarterly and shared with the Learning Environment Managers to complete any actions, make changes, and feed back to the trust and universities.

The themes of the evaluations reflect pressures within the Trust, for example, evaluations from Jan – March 2018 comment on high acuity, winter pressures and the high number of students, while June – August 2017 evaluations tend to be thanking staff for the support provided and great learning opportunities as this is around sign-off point for the year. Students often take the opportunity to thank staff members in these evaluations, which is then fed back to the staff for use as part of their revalidation evidence.

BUILDING OUR EDUCATIONAL INFRASTRUCTURE TO SUPPORT STUDENTS AND EDUCATORS

Nursing, Midwifery and Radiotherapy Student Inductions

Each non-medical student attending the trust on placement must attend an induction to the trust. This is to ensure that the students are aware of the trust's policies and procedures complete mandatory training that students and placement areas have aligned expectations and, most importantly, the students feel welcomed and orientated to the trust.

The induction is over two-days and incorporates the mandatory training and includes a location hunt combining orientating themselves to the trust through a QR code 'location hunt' and a 2-hr session with the Learning Environment Managers looking at common placement scenarios. This allows the students to ask questions and find out about their future mentors and placements. This part of the induction scores the highest on the evaluation with students feeding back how it helps them alleviate anxieties and feel welcome to the trust.

During 2018/2019, the Centre for Practice Learning has facilitated 10 inductions to the trust for 178, 1st year students from 4 Universities.

Allied Health Professional (AHP) Student Induction

To bring AHP student inductions in-line with the Nursing, Midwifery and Radiography inductions and to ensure Higher Educational Institutions and trust requirements are met, the AHP Practice Learning Facilitator has been working alongside both Occupational Therapy and Physiotherapy educators piloting a 'Trust Awareness Induction'. The aim has been to standardise and streamline the induction process and also to ensure the students feel welcome to the trust and have aligned expectations.

Feedback from the pilot was as follows:

- 83% of students found the Trust Awareness Induction useful.
- 50% of students have been on a trust awareness induction elsewhere on placement.
- 100% of students feel they have been given enough information on the Trust Awareness Induction.

The induction scored 100% for content, facilitation skills and teaching methods.

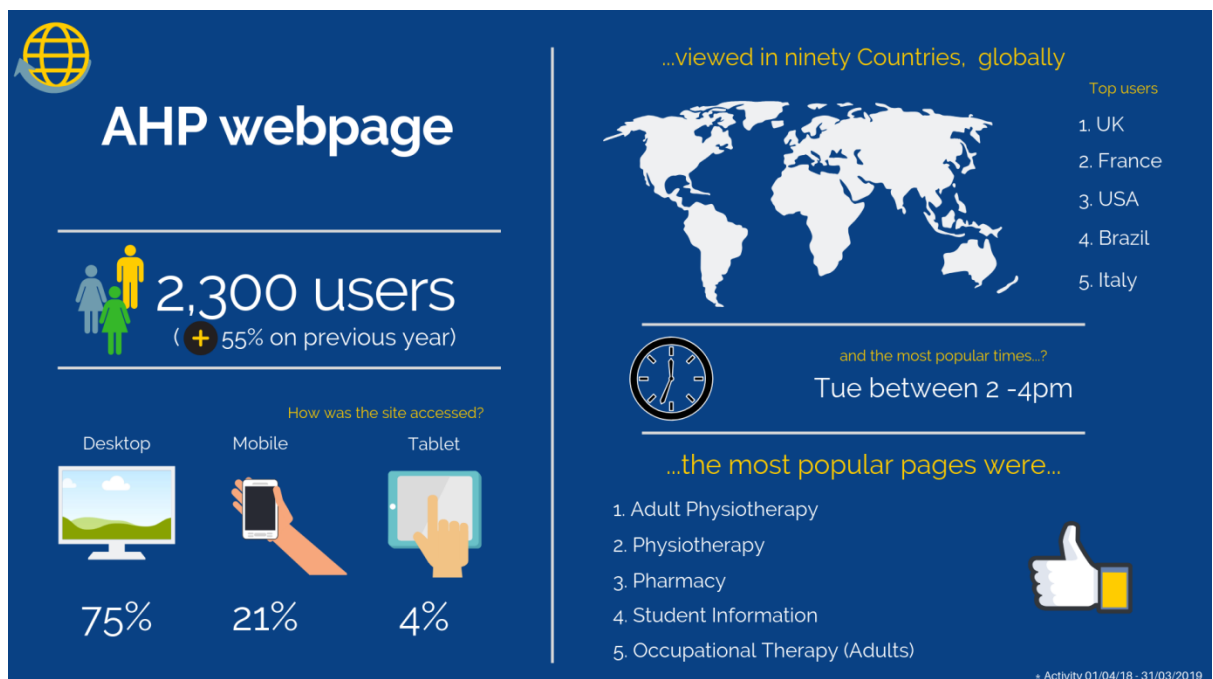
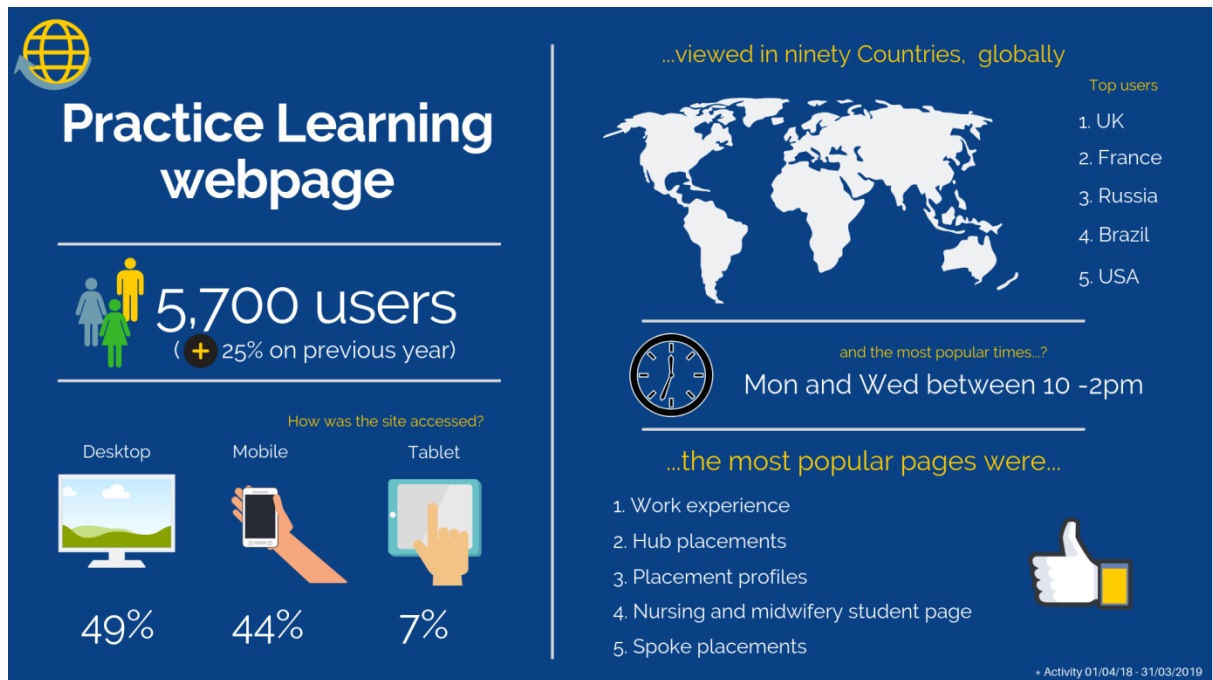
Students found the following aspects of the induction useful:

- *Getting to meet the other students on placement.*
- *Being given information who to contact with any problem.*
- *Sorting badges and parking.*
- *Asking questions and sorting any worries before starting placements.*
- *Being formally welcomed to the trust.*
- *Location Hunt.*

Practice Learning Portal

The <http://www.practicelearning-crh.com> website provides a resource for students, mentors and educators: this includes the student documentation, online updates and links to useful sites. The student placement profiles have information about each placement area and can be accessed anytime and used as a resource to align expectations of placements.

This has proved highly successful as confirmed below.



DEVELOP AN INTERNAL COMMISSIONING MODEL AND QUALITY ACCOUNTABILITY PROCESS

We now have an accounting system that ensures the income we receive from learning placement tariff and other sources is used to commission teaching and learning activities from within Divisions that are clearly aligned to the Learning and Development Strategy.

In 2018-19 we commissioned the following activity from each division:

Division	Amount commissioned	Illustrative examples
Medicine and Emergency Care	£177,000	Physician Tutors and Palliative Care Educator
Surgical Services	£253,000	Surgical Tutors and learning clinics in urology, ENT and orthopaedics
Integrated Care	£190,941	Undergraduate Leads and ambulatory unit-based teaching
Integrated Care	£71,000	Pharmacy educator time and radiology referral workshops

INVESTING IN CURRENT AND NEW PARTNERSHIPS WITH HEIs AND OTHER EDUCATION PROVIDERS

We have grown our relationship with Health Education East Midlands and the Nottingham Medical School – convinced that medical students who have enjoyed good learning placements at the Royal will want to return here as junior doctors

University of Sheffield (UoS)

Consultant Urologist, Ms Kate Linton, is already a member of UoS Medical School staff, and is now the Prescribing Lead for the whole undergraduate curriculum.

The Consultant Clinical Educator (CCE) team lead, Prof. Jim Crossley, is a member UoS Medical School staff and currently has a range of roles:

- Curriculum Committee
- Faculty of Gateway programme (teach the teachers)
- Curriculum Assessment Group
- Faculty of Postgraduate Certificate in Medical Education programme

The Trust Patient Safety Team, advise the UoS Lead for Professionalism and Patient Safety and provided her with a one-day shadowing experience to see NHS Patient Safety in action.

CCE Physician Associate (PA) Lead, Mr. Krish Kumar, worked with the UoS PA programme and with colleagues in Medicine, Surgery and ED to develop PA placements at the Royal for the first time.

University of Nottingham (UoN)

CCE Nottingham programme lead, DR

r. Naomi Thompson, has the role of Associate Clinical Sub-Dean There.

She and deputy lead, Dr. Pauline Fraser, jointly have the following roles:

- 'Service Increment for Trusts' (SIFT) Committee
- Clinical Placement 1 Committee
- Curriculum Committee
- Patient Safety Committee

Learning Workforce

To provide learning which supports the workforce objective – ‘the right people, in the right place, at the right time’ (*People Plan 2015*)

- Work with schools and colleges to promote work-experience opportunities
- Invest in apprenticeships at all levels to ‘grow our own’.
- Develop clear development pathways for our people to ensure they achieve their potential
- Develop learning opportunities which link to career pathways
- Develop work-based learning opportunities using simulation and digital technology
- Recognise and reward the skills and knowledge of our educators and learners
- Invest in work-based learning educator structure
- Encourage and allow our people to explore and learn from other organisations
- Apply digital technology to support a mentor community in practice
- Develop a mentor infrastructure to support our people to achieve their potential

Introduction:

The strategic plan is to: “...support recruitment through a reputation for learning excellence; support retention and staff development through high-quality career mentoring and clear pathways for development; and support workforce transformation through high-quality placement learning programmes”.

WORK WITH SCHOOLS AND COLLEGES TO PROMOTE WORK EXPERIENCE OPPORTUNITIES

Careers

The Trust is an active partner within ‘Joined up Careers’, a Derbyshire-wide group aimed at raising awareness of careers in health and social care, and including the Private, Voluntary and Independent (PVI) sector.

In the past year members of the Education Team have attended careers events in nine schools to talk about career opportunities in the NHS. These events have meant that over 7,000 students, their parents and teachers have had the opportunity to find out about the wide variety of roles available.

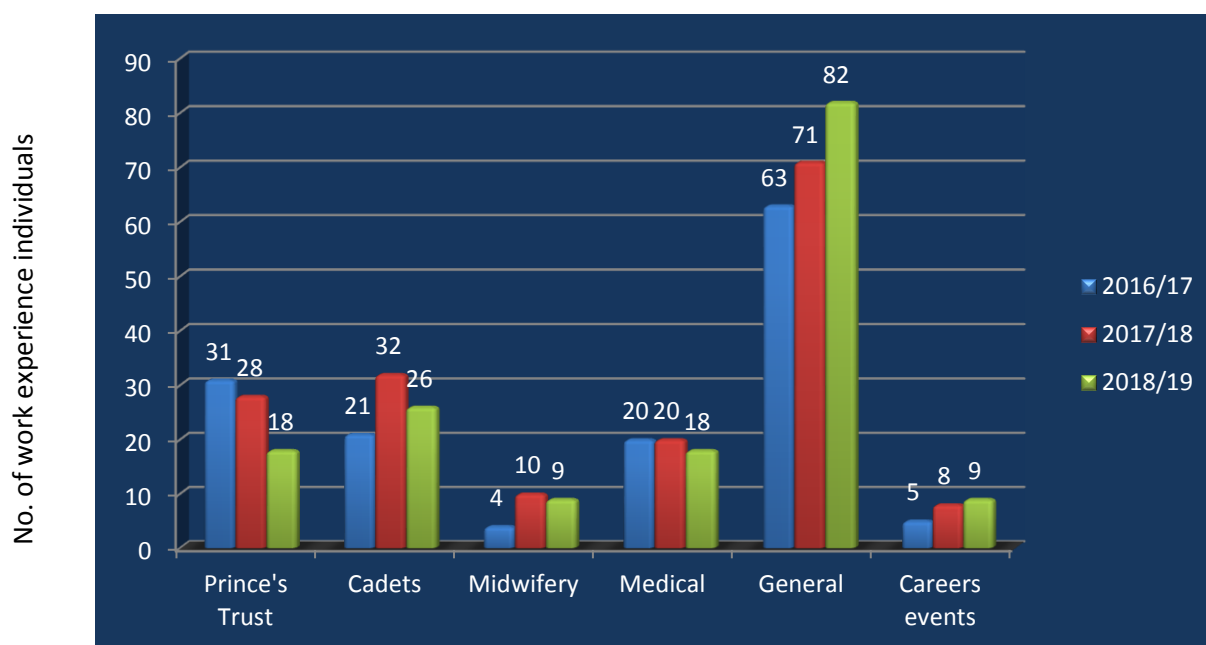
In addition to careers we have provided information about how students can participate in volunteering and work-experience opportunities and we have participated in an event at the Proact Stadium which was open to students from all schools within North Derbyshire. We also organised our own careers event at the Trust, which was very well-attended.

In 2018, a small group of students from Eckington School, identified as ‘lacking direction’ in their career aims, attended sessions facilitated by members of staff to help raise awareness of different roles within the NHS. The aim of this session was to provide the students with ‘food for thought’ about their career options and the wide variety of opportunities available within the NHS.

Work Experience

The number of enquiries received for work experience increases year on year. During 2018-19 work experience was the top viewed page on the Centre for Practice Learning website with over 700 enquiries.

Work experience/careers opportunities provided



Prince's Trust – 'Get Into Care'

We delivered two Prince's Trust 'Get into Care' programmes, with a total of 18 young people having the opportunity to gain valuable work experience alongside Health Care Assistants (HCA). NB. This is a reduction from the previous year due to Prince's Trust restructuring. We will be delivering three programmes again in 2019/2020, and expect figures to return to previous levels. We have negotiated with NHSP to enable the young people on the programme who are successful, who have achieved their Care Certificate and have the support of the ward matron, to be recruited as 'known' candidates. We continue to inform the Prince's Trust when we are recruiting and guarantee interviews for applicants to relevant posts.

Cadetships

We continue to work alongside local colleges and school 6th-forms to deliver two Cadetship programmes for adult nursing areas, with a total of 26 young people being given the opportunity to gain valuable experience in healthcare. This experience supports their application to university when applying for pre-registration nursing degree places.

Midwifery Work Experience

We offered 9 midwifery work experience placements of 3 days per student in Trinity Ward, Community and Ante-natal Clinic. All of the students reviewed their experience very positively.

All of the students who attended are expected to apply for a suitable Midwifery course at university and feedback suggests that this programme improves the student's chances of success at interviews for university places.

All members of staff were helpful and very welcoming. They all helped me understand what they were doing and involved me as much as they could within their tasks.

I have enjoyed the placement, it has given me an insight into what the midwife job entails. It has allowed me to gain more experience and gain more confidence.

Learned confidence, social skills, co-operating with other midwives and key information about the job.

Medical Work Experience

In July 2018 we hosted the Medical Work Experience programme for 18 students who aim to take up a career in Medicine. All aspects of this evaluated very well with good support from a range of inter-professional teams, including 2 days of shadowing Consultants and their teams in either a ward or clinic environment, inter-active activities in the education centre and behind the scenes departmental visits.



General Work Experience

Placements for work experience have been supported in both clinical and non-clinical environments for 82 students, which is a further increase on the previous two years. These placements have been for varying amounts of time, but some of the areas which supported students include Clinical Engineering, Education Centre Library, Hospital-Based Children's Services, Child and Adolescent Mental Health Service, Learning Disabilities, Finance, Histology/Pathology/Microbiology, Estates, Human Resources, Research Department, Cardio Rehabilitation and Maxillofacial.

INVEST IN APPRENTICESHIPS AT ALL LEVELS TO 'GROW OUR OWN'

Apprenticeships

The Trust commenced 138 staff members on apprenticeships between April 2018 and March 2019, with the majority being Healthcare apprenticeships, specifically the Level 2 and 3 support worker awards. In addition, we have employed 25 individuals in apprentice posts in the Trust, with Business Administration being our most popular apprentice role. We have significantly increased our numbers of apprenticeships relating to our existing staff undertaking an apprenticeship qualification as part of their job role. The new apprenticeship awards in 2018/19 were: CDMA Facilities Manager and Pharmacy Level 2 and 3.

Apprenticeship	Level	Provider
Business Administration	2	Sheffield College
Business Administration	3	Sheffield College
Professional Business Administration	4	Sheffield College
Healthcare Support Worker	2	Sheffield College
Senior Healthcare Support Worker	3	Sheffield College
Assistant Practitioner	5	University of Derby
Nursing Associate	5	University of Derby
Management	3	Chesterfield College,
Leadership and Management/Operational Manager	5	Sheffield College
CMDA (Chartered Manager Degree Apprenticeship) Leadership in Practice	6	Sheffield Hallam University
MA Leadership in Practice	7	Sheffield Hallam University
Accounting	2	Sheffield College
Assistant Accountant AAT	3	Sheffield College
(CDMA)Facilities Management	6	Sheffield Hallam University
Healthcare Science Assistant	2	Sheffield College
IT Professional: Web and Telecoms	2	Chesterfield College
IT Professional: Web and Telecoms	3	Chesterfield College
Cleaning and Support Services	2	Sheffield College
Cleaning and Support Services Supervisor	3	Sheffield College
Engineering Maintenance	5	JTL Training
Carpentry and Joinery	2	Chesterfield College
Human Resources Support	3	Sheffield College
Human Resources Consultant/Partner	5	Sheffield College
Pharmacy Services Assistant	2	Sheffield College
Health Pharmacy Services	3	Sheffield College

'Apprentice Town'

Chesterfield has become the first town in the UK to declare itself an 'Apprentice Town', demonstrating its commitment to growing the future and careers of young people alongside business and the economy. Being a part of this gives us access to wider communications and support

from the council in advertising the NHS as well as our current vacancies. Apprentice Town has recently started planning a steering group that we will be a part of, which will discuss the local economy and national apprenticeship news.

Apprenticeship Levy Developments:

The past year has seen significant developments in how we manage and monitor our levy and we are now able to provide more detailed and accurate forecasts for our spend. The online account (AS) is the portal for our apprenticeship information which then provides various reports. We are now able to report on three functions: monthly divisional apprenticeship breakdown, long-term forecasting and monthly spend reports. These reports are presented to the Apprenticeship Levy Board and various other Trust meetings to provide assurance on our levy spend.

We can now see when funds are due to expire meaning that we can better plan our spend over the year.

Finance

£944,010
Current funds

£29,594
of your funds could expire in February 2020

[View transactions](#)

View payments made into and out of your apprenticeship service account.

[Download transactions](#)

Download your financial transactions within a specific date range.

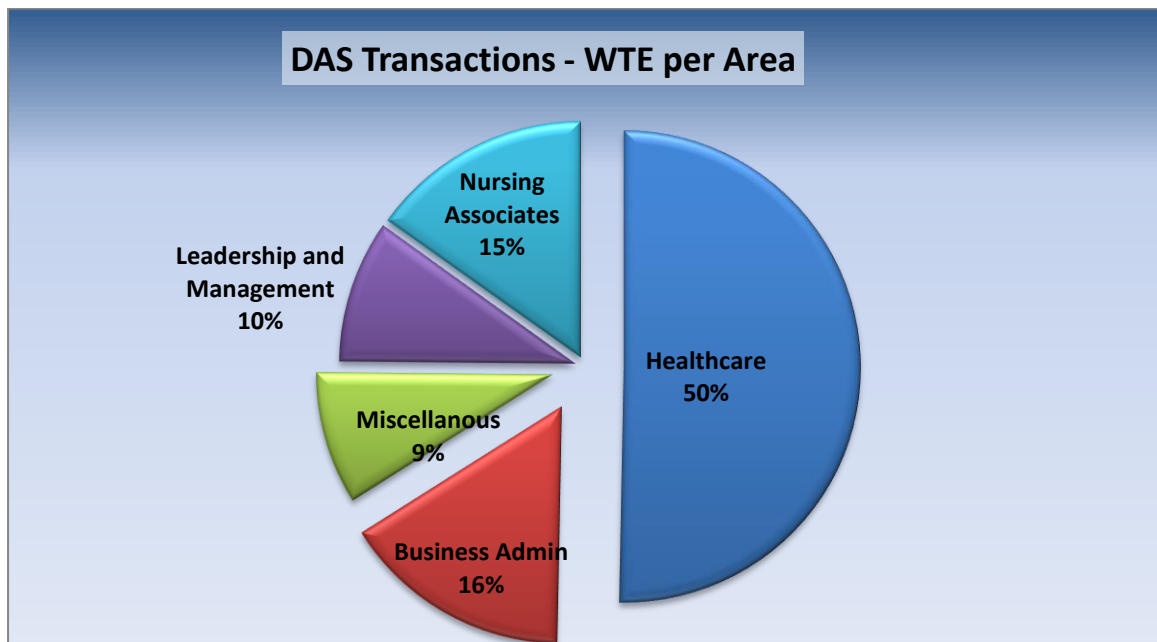
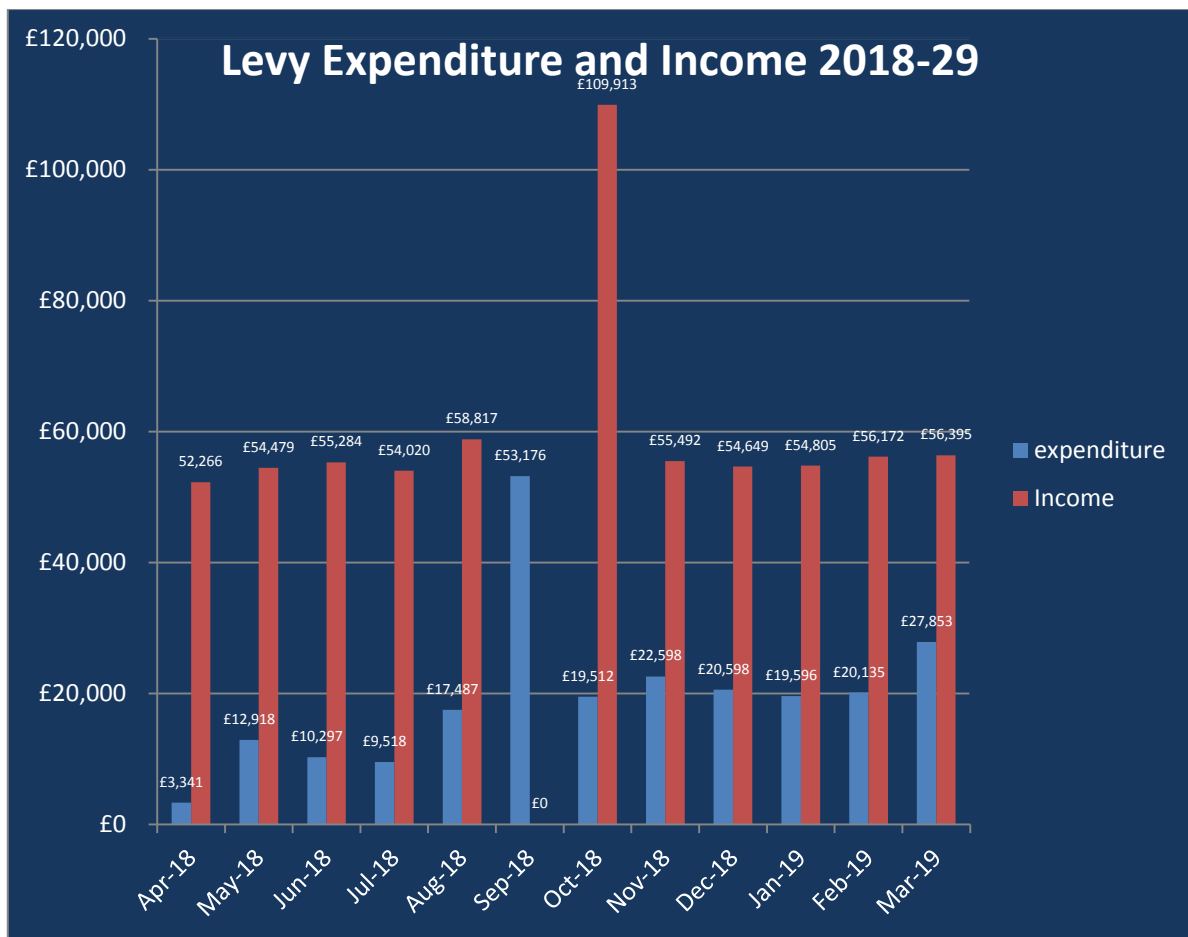
[Funding projection](#)

View funding projection to plan your future spending.

[Transfers](#)

Connect with other employers and send or receive transfer funds.

Our Apprenticeship Levy usage has increased significantly, and our monthly outgoings have been steadily increasing. We have introduced a number of higher-level apprenticeships which have provided a significant increase to the spend.



Over the next year, we plan to 'gift' 10% our levy to support local care homes to develop care assistants and Nursing Associates.

Health and Social Care Apprentice Pilot

We have worked in partnership with the Talent Academy (Joined up Careers) to implement a Health and Social Care apprenticeship pilot programme across Derbyshire. Together we recruited three apprentices in the North Derbyshire region, who undertook placements in a range of health and social care settings, including the trust. The aim of this programme was to develop a new workforce role to work in PLACE with both health and social care skills. We are now evaluating the programme with the Joined up Careers team with the hope that there will be a further cohort.

DEVELOP CLEAR PATHWAYS FOR OUR PEOPLE TO ENSURE THEY ACHIEVE THEIR POTENTIAL

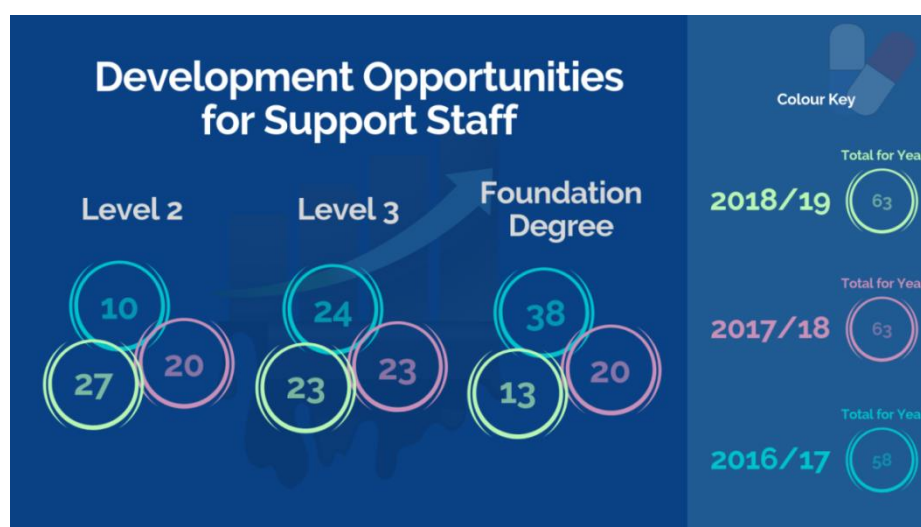
Welcome to the Trust

Building on the work commenced in 2017/18, which saw the introduction of a welcome booklet and orientation checklist, the 'Welcome to the Royal' has been a Listening into Action (LiA) Project to further refine this and give consistency across the organisation. As a result of the LiA a new checklist has been devised, which better reflects the trust's values and 'rolled-out' to all areas by April 2019.

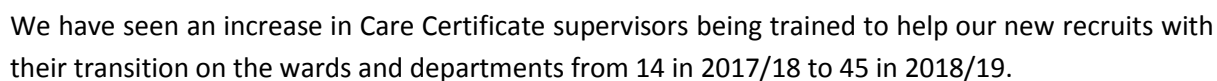
Healthcare Support Worker Pathways

There has been an increase in staff members starting the level 2 Healthcare Support worker apprenticeship. We have also had 22 staff undertake the Level 3 Senior Healthcare Support Worker apprenticeship, which provides a pathway to entry for the Foundation Degree.

We have had seven Health Care Assistants commence the trainee Nursing Associate Foundation Degree in December 2018: although this is a reduction from the previous year where we had 20 start it was expected as part of our workforce plans. This has given them an opportunity to develop in their roles and further their careers whilst remaining in our employment. Four Trainee Assistant Practitioners have commenced the Foundation Degree apprenticeship in Imaging and Bowel Screening.



We continue to deliver the Care Certificate programme to all newly recruited clinical support staff in line with national guidelines. This year 112 new members of support staff received training including Health Care Assistants, Princes Trust, Midwifery Support Workers and Imaging Support Workers. HCA's were by far the greatest number of these particularly in the medical division as in previous years. The numbers remain around the same as last year.



Development of New Support Roles

As part of our 'team around the patient' model we have developed a number of new support roles.

Our first cohort of Nursing Associates who started training in January 2017, completed their training and joined the NMC register in March 2019 and are currently undertaking their preceptorship year. Our now qualified Assistant Practitioners are now almost at the end of their preceptorship and have benefitted from the multi-professional preceptee supervision sets alongside all newly-qualified staff.

We have also worked alongside the pharmacy department to pilot new roles, one being the Medicines Administration Technician, where trained pharmacy technicians have been working on two pilot wards taking on some healthcare roles, but mainly administering medication to reduce the workload of drug administration for registered nurses.

Assistant Practitioners in ward areas have now also completed training to administer medication to bring them in line with the NMC requirements for nursing associates. This required significant support and development including completion of a university medicines module and a 2-day in-house course designed to ensure that appropriate knowledge and skills are taught, including the opportunity to practice these skills under simulation in a safe environment. A competency pack has also been devised to allow supervised practice in service areas and assessment in practice.

Advanced Practice Roles



The trust's first trained Advanced Clinical Practitioner (ACP), Lee Herring, has been appointed as Lead ACP and, in addition to augmenting the medical rota in the Emergency Department, also has a responsibility to support the development of our trainee ACPs across the Trust in partnership with Mr. Ali (Consultant Clinical Educator). The trainee ACPs are already contributing to the Hospital@Night (H@N) service in preparation for their graduation from January 2020.

‘Grow our Own’ Group

As part of the education governance structure to implement the learning and development strategy we have a ‘Grow our Own’ group, which is responsible for leading on the development of apprenticeships, careers and work experience. The terms of reference for this group and membership underwent a significant review in early 2019 to refocus on the priorities set out within the People Strategy. This group is chaired by the Head of Practice and Professional Development and now has membership from all divisional and corporate areas, as well as education leads, and is multi-professional and multi-disciplinary promoting greater diversity.

Career Development for Registered Nurses

The Inter-Professional Education Team is responsible for several key areas to support recruitment and retention of nursing staff:

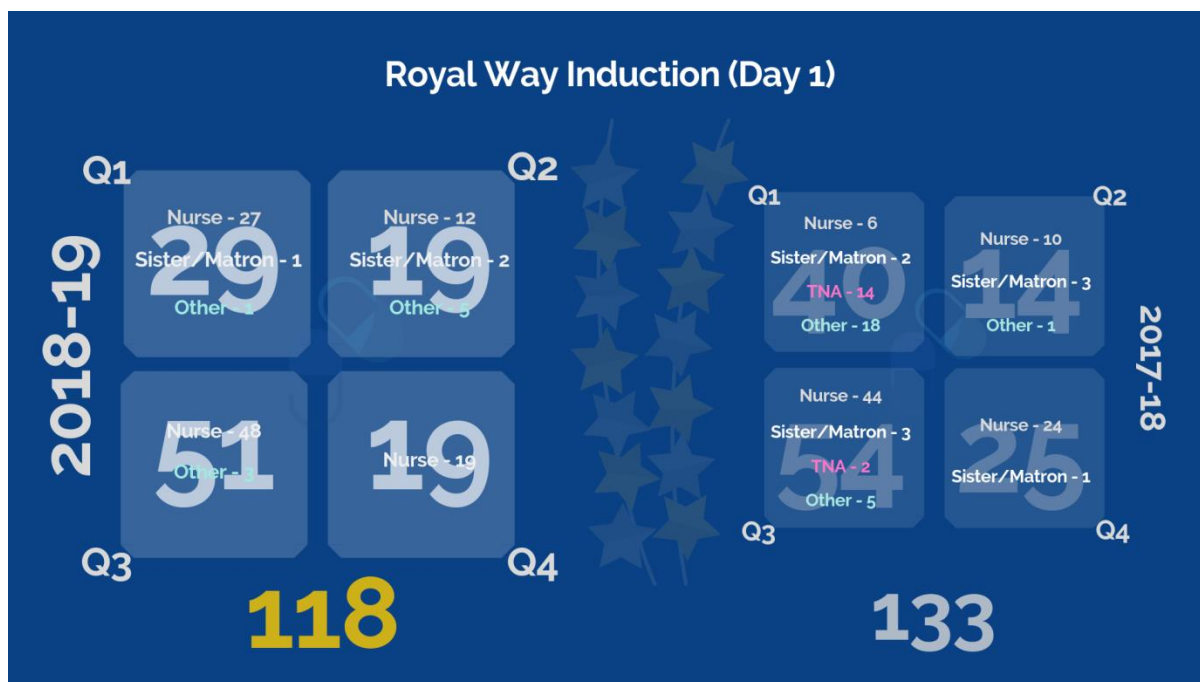
- The Royal Way
- Preceptorship
- Revalidation
- Training Needs and Skills Analysis,
- Links with universities in support of recruitment and retention and career development
- Development and implementing of a career development framework for staff nurses and clinical nurse specialists
- Career development advice sessions

The Royal Way

The Royal Way was originally designed in 2016 as a bespoke nursing induction but has evolved over the years to become inter-professional. It is delivered by the Inter Professional Clinical Educators and is delivered at the beginning of each month over one week following corporate induction.

The Royal Way is unique to the Trust; it includes subjects and training that relate to everyday practice including patient pathways, documentation and the deteriorating patient. Half a day is dedicated to human factors in healthcare which empowers staff members to have an understanding and awareness to change practice and develop the resilience they need to achieve this. The induction offers support to all newly appointed healthcare professionals, regardless of their banding, to increase their understanding and confidence before commencing their new roles.

The Royal Way includes varied topics along with guest speakers who are subject matter experts. This helps to broaden the education we deliver to ensure delegates receive the information required to feel supported in their new role. The Royal Way evaluates well and is a rich experience for all our new starters.



The Royal Way evaluates positively as shown by some of the quotes below, and based on this feedback and changes in practice or the emergence of new evidence, the team review and amend the programme on a regular basis.



The Royal Way also includes specific training on a range of clinical skills required for new starters to fulfil their role and the team has been involved in the delivery of training 400 staff at the point-of-care to support the roll-out of the new glucometers.

DEVELOP LEARNING OPPORTUNITIES WHICH LINK TO CAREER PATHWAYS

Preceptorship

The NMC recommends all newly qualified nurses undertake a period of preceptorship to help support them to make a successful transition from being a student to a confident autonomous practitioner. Health Education England and the Healthcare Professions Council also support this approach for other Health Care Professionals

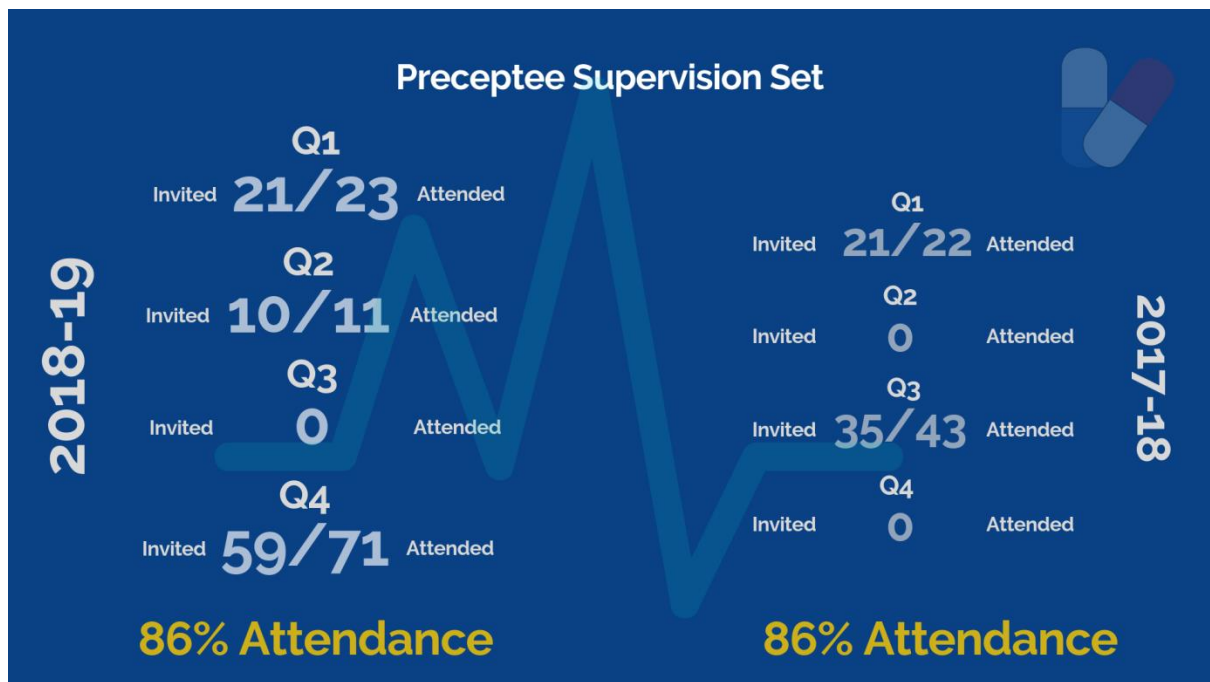
In 2017 /18, the Inter-professional Development Lead developed the Preceptorship policy to ensure this is multi-professional and maximises opportunity for Inter-professional learning. This change in policy has expanded preceptorship to be accessed from 2018 for those registrants returning to practice, Nursing Associates, Assistant Practitioners and, if required, those new to role from another area as well as newly qualified healthcare professionals.

In 2018/19 four Chief Nurse Fellows were appointed for a one-year secondment by the Derbyshire Nursing Cabinet to undertake recruitment and retention projects across Derbyshire. One of the Fellows, Shamiso Augustin, was hosted at Chesterfield with the remit to develop a Derbyshire preceptorship programme. Working closely with the Education Team she reviewed the current provision, identified areas of existing good practice across the country and developed a new Preceptorship handbook which was shared with partners across Derbyshire.

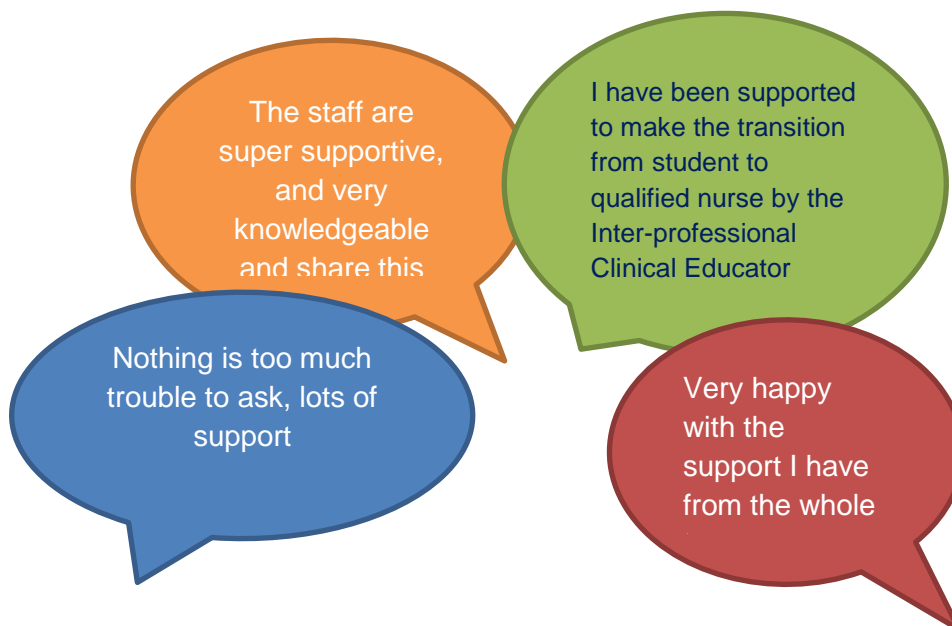
Evaluation and review of the preceptorship programme is still being undertaken by the Inter-Professional Educator Team and the outcome of this review will help to shape the delivery of the multi-professional preceptorship programme in 2019/2020

As part of the preceptorship programme, all newly-qualified nurses are allocated to a preceptee supervision set which are facilitated by the Inter-Professional Clinical Educator Team and other members of the education team. This is being further rolled out in 2019 to include other newly qualified clinically facing staff.

The graph below shows the number of preceptees who commenced a preceptee supervision set in 18/19.



The preceptee supervision has evaluated positively as the quotes below show.



Career development frameworks have been developed for staff nurses and Clinical Nurse Specialists (CNS). The frameworks help to support and inform ongoing professional development to help staff progress in terms of breadth and depth of experience, from being newly qualified to a senior staff nurse. The CNS framework is the first of a proposed suite of frameworks to support development from being a new band 6 through to a band 8a.

STAFF NURSE CAREER DEVELOPMENT FRAMEWORK

Name: _____

Ward/Department: _____

Level	Date commenced	Date completed	Matron signature
Level 2			
Level 3			
Level 4			
Level 5			


CLINICAL NURSE SPECIALIST CAREER DEVELOPMENT FRAMEWORK

Name: _____

Department: _____

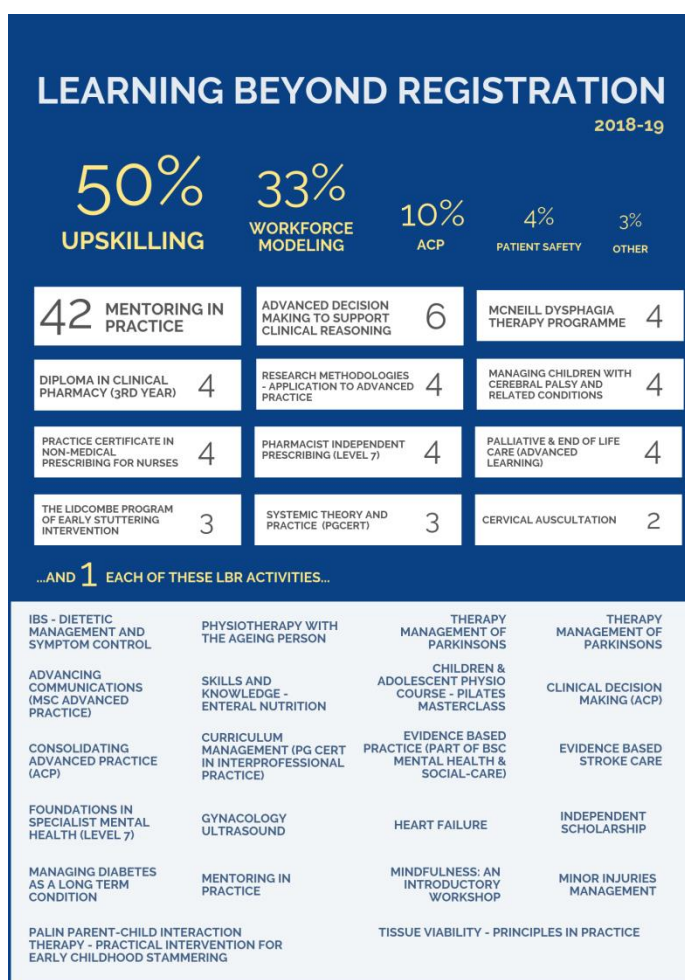


Everyone's a teacher,
everywhere's a classroom.



Everyone's a teacher,
everywhere's a classroom.

Registered healthcare professionals are able to access CPD via the Health Education England Learning Beyond Registration (LBR) contract with local Higher Educational Institutions. The key areas our healthcare professional staff accessed this year are Mentor Support, Advanced Practice Modules and other specialist clinical modules.



Medical Education

The post-graduate medical education team support GP Specialist and Foundation training commissioned by Health Education England team, and also provides support for regional dental education and Continuing Medical Education for salaried doctors.

Health Education England has provided financial support for initiatives aimed at developing Specialty and Associate Specialist doctors (SAS) and Locally Employed Doctors (LEDs). The Medical Education Team has commissioned a programme of training opportunities including: practice reflection, safety and quality improvement, and maximising opportunities for development including certificate of eligibility for specialist registration (CESR).

The team has already commenced work on the '8 High-Impact Actions to Improve the Working Environment of Junior Doctors' which was published by NHSI. An action-plan for this has been developed locally and this will inform the collation of good practice initiatives which is being undertaken by HEE

Non-Consultant Career-Grade Doctors

The non-consultant career grade doctors are growing in number and provide a significant contribution to the workforce both for daytime and out-of-hours services. There can be a perception that they are here in the organisation to be the 'grafters' and for service requirements to be put above these doctors' developmental needs and a healthy work life balance. They may be considered a lower priority than doctors in formal training rotations.

They are a heterogeneous group from many backgrounds with differing developmental needs and career intentions. As such, there is the potential for rapid staff turnover if this is not recognised, or if they are recruited inappropriately and are not prepared for our needs and clinical environments.

There is however, an opportunity to grow this group of doctors as part of the sustainable backbone of the medical workforce if supported well and provided with appropriate development opportunities.

Doctor Mike Scanlan, Consultant Clinical Educator (CCE), is working in collaboration with the Director of Medical Education and is leading an extensive engagement process with our current non-consultant career grade doctors. The aim is to identify the needs of the differing groups so that in the future this may be explicitly acknowledged, documented, and planned for when they join the trust. We hope that we will also find that there are areas in the trust that are already adapting to these needs and will plan to share the good practice across divisions.

Over the next year we plan to identify work with the divisions to encourage a consistent approach that recognises the contribution these doctors are making to the trust and look outside the trust and to the speciality colleges for examples of successful initiatives and attempt to integrate these ideas into our own working practices. Ultimately, our aim to ensure this group of doctors feel valued and are assisted to progress in their career whether that be continuing in the trust or moving on.

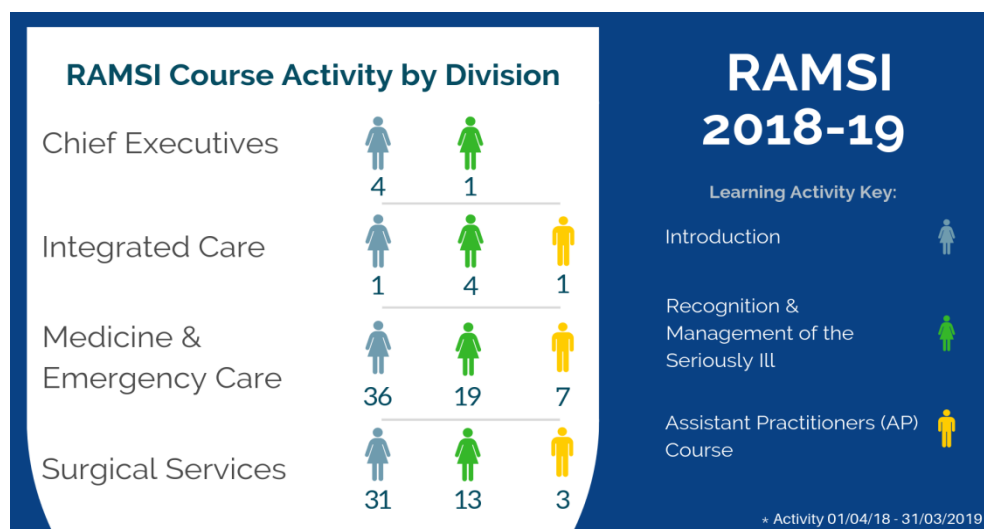
Simulation Training

Simulation-based learning is an essential component in inter-professional training and supports high quality workforce development. Simulation facilitates learning through immersion, reflection, feedback and practice, but without the risk in a similar real-life situation. Constructive debrief follows all simulations, incorporating feedback on clinical and technical skills as well as non-technical skills (human factors) such as communication and teamwork. In-situ simulation (in the workplace) also evaluates the environment in which we work; making sure it meets the needs of the staff and providing vital quality improvements to improve safety.

Care of the deteriorating patient has been a priority area for improvement over the past year and, in response, the Clinical Education and Training Team (CET) has provided further training using simulation to empower staff with the skills, knowledge and confidence to identify, care and treat these patients more effectively. This includes in-situ simulation training in the clinical areas as well as in the classroom.

Recognition and Management of the Seriously Ill Patient (RAMSI)

Recognition and Management of the Seriously Ill (RAMSI) patient course is a multi-professional, simulation-based programme to promote team working, communication, assessment and escalation for the deteriorating patient. The Intro to RAMSI (ITR) course was developed in 2014 to capture newly-qualified nurses within



the first 6-months of preceptorship and there is now an ITR delivered for the Assistant Practitioners. Seven ITR courses have been delivered in 2018/19

Maternity RAMSI has now been replaced with the PROMPT course.

PROMPT Training

Better Births (NHSE 2016), stressed that effective multi-professional teams trained together, thereby improving communication and developing a shared understanding of complex problems. The report presented PROMPT as an example of best practice in multi-professional obstetric emergencies.

National recommendations for multi-professional obstetric emergencies training for all maternity staff in the UK (National Maternity Review 2016), coupled with data demonstrating improved outcomes for mothers and babies, has led to PROMPT being adopted by most units in the UK. Derbyshire will be the

first Local Maternity System (LMS) to implement PROMPT in conjunction with a regional ambulance service and the most northern PROMPT center.

PROMPT courses commenced in February 2019 – with 4 courses run and with 5 more planned before August 2019: a multi-professional faculty has delivered on every course so far. One course was not able to have Obstetricians attending due to a clash with audit day. Critical Care Outreach Team (CCOT) (identified as Year 1 candidates from Theatres / Critical care division) presence on the course has been very highly evaluated. Equally the contribution from EMAS on the day – in demonstrating team working with our Community Midwifery teams is noticeable and well received



Next steps include:

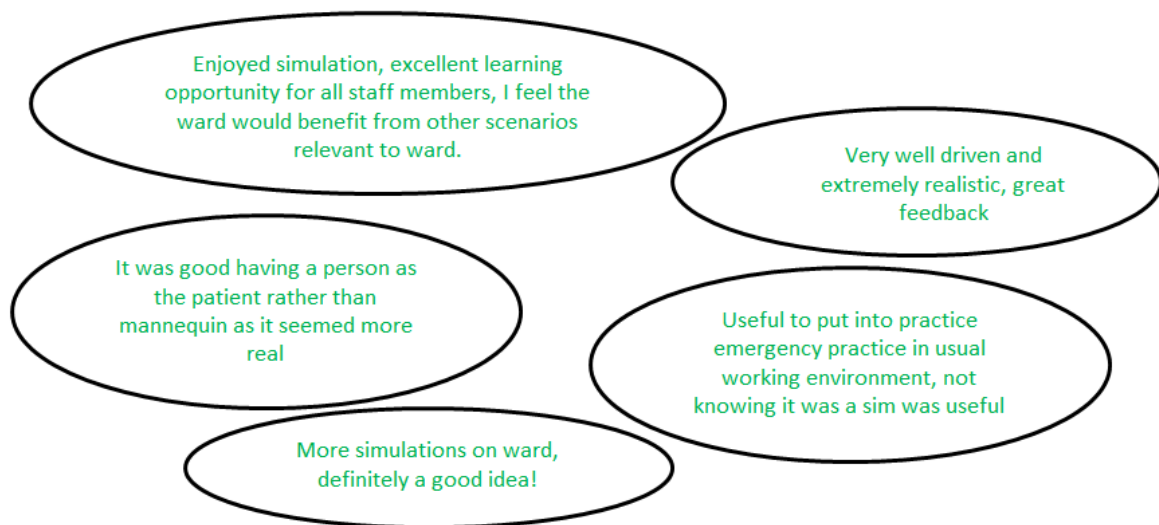
- Feedback to all involved in the implementation
- Share findings with all stakeholders
- Planning for local train the trainer (half day) to broaden faculty, in conjunction with UHDB
- Allocation planner for 2020 to be commenced

In-situ – Simulation

In-situ simulation is simulated clinical scenarios based within the live clinical setting.

We have completed nine successful in-situ simulations across different ward areas which were well received by staff. We have liaised with ward matrons seeking ideas relevant to their ward, creating scenarios accordingly and delivering the training in phases. This included a 20-minute scenario followed by a 10 minute debriefing session in the practice setting including all Multi-Disciplinary Team members.

This received excellent feedback and the overall response was that this is an effective way to learn:



In collaboration with paediatric, midwifery and theatre teams, the Clinical Education Team (CET) team have also been involved in emergency simulations in theatre and the Emergency Department.

Paediatric In-situ Simulations



Paediatric teams run a regular multi-professional in-situ simulation programme with simulations occurring both in the Emergency Department Paediatric Resuscitation and Nightingale ward. These are run in a high-fidelity manner with multi-functioning manikins and the crash bleep being called resulting in a full resuscitation team attending. Action points are disseminated following each simulation along with a certificate to participants and many quality improvements have been made to the environment or processes as a result of this education. Regular neonatal simulations also occur.

Paediatric and Stabilisation Day (PRES) runs twice-yearly in the education centre and is attended by members of the Paediatric, Anaesthetic and Emergency Department teams, including doctors, nurses and allied health professionals. The day particularly concentrates on management of the deteriorating baby or child.

Effective Performance Insight for the Future (EPIFFANY): CRH

EPIFFANY is a multi-faceted, complex educational and human factors approach for improving prescribing competence, performance and attitudes towards safe prescribing and patient care among junior doctors; to increase patient safety and reduce human error. It was led by the University of Leicester and as part of this Joint Working Agreement, EPIFFANY was delivered at Chesterfield Royal Hospital. Working together with Dr Helen Moore, Consultant Clinical Educator as EPIFFANY lead, and Andrew Hardy, Clinical Pharmacist, as pharmacy lead, an EPIFFANY simulation programme was established for July 2018. The scenarios were all based on presentations typically seen in an Emergency Management Unit on Clinical

Decisions Unit wards and created with input from both the pharmacy and clinical leads. The education team invited two patient partners to take part in the simulations and set up a mannequin as the third scenario.

The 25-strong August 2018 Foundation Year 1 cohort was split into three groups, each receiving different aspects of the intervention. Five participants in group 1 (G1) took part in simulations, received individual one-to-one video feedback, and were debriefed; Six participants in group 2 (G2) took part in simulations and were debriefed only; and 11 participants in group 3 (G3) did not take part in simulations and were used as a control group for evaluation purposes. A clinical educator and pharmacist delivered feedback to G1 participants in organised feedback sessions immediately following their completion of the simulation.

It was then arranged for reports from the Trust's e-prescribing system to provide data collection to be able to evaluate the impact of the intervention. A total of 52,899 items were prescribed by all occupation groups during the 17-week data collection period (31 July 2018 – 25 November 2018).

The EPIFFANY F1 group was found to have the lowest error rate (4.69%) compared to other occupational groups at CRH, despite having the highest number of items per prescriber (n=609.6). This means that they did the most work in relation to medicines prescribed and made the least errors: EPIFFANY prescribers are both efficient and effective.

Feedback from junior doctors was positive and suggests that they felt simulations were a good way to learn and apply their knowledge. According to one junior doctor:

"it's all good experience and I think obviously the more you do the better you get, and everything we have covered today underpins the basics of what we do day in day out and its really good practice for managing patients, communicating with them, professionals and handing over, and helping to grown your confidence and managing different things. A lot of this we have maybe done scenarios or gone over in group sessions but it's never been our responsibility if it doesn't get done"

Use of Simulation Bay (Staveley Ward)

A bay within Staveley ward was used within the last year as a simulation training area for students and staff members. Prior to this, simulations were carried out at ward level, often within a seminar room or classroom, which proved to be unsuitable in achieving a realistic representation of the practice environment. The simulation bay allowed us to simulate the characteristics of a real ward in order for staff or students to be appropriately taught or assessed in a safe environment.

Simulations are carried out in real-time with the help of trust staff and patient volunteers. These volunteers, often with prior experience as a patient, acted as patients within a ward bay. The circumstances of each simulated patient were prepared as individual case studies, with the aim to reflect a realistic clinical environment and were tailored to the specific needs of the participating student. Volunteers were prepared with an individual medical history, a set of baseline observations and a live electronic medicine prescription prepared by our pharmacy department. Actors needed to respond to and improvise based on the actions of the student, therefore prior clinical experience is valued but not essential.

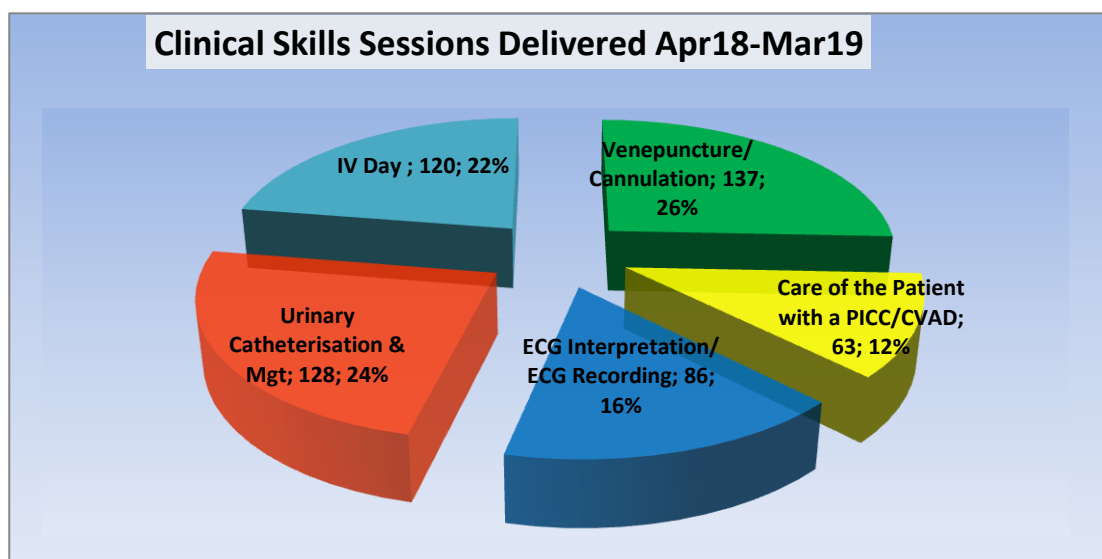
The Centre for Practice Learning team has used the simulation bay to support student nurses on numerous occasions. With the support of suitably prepared volunteers and trust staff 'acting' in the roles of patients and 'ward staff' a scenario of an acute ward was carried out. The specific issues that were tackled surrounded the management of a bay of patients and team of staff; the escalation of a deteriorating patient; the delegation of tasks; medication management/medication rounds and communication with the Multi-Disciplinary Team. The process proved beneficial for both the student and mentor by providing a risk-free environment for the student to develop these skills and to allow for open and honest feedback, both from the perspective of staff and patients.

In order to assist with compliance in annual updates for Clinical Manual Handling, the Manual Handling team have been using the simulation training bay on Staveley Ward, as well as supporting a programme of face-to-face sessions for out-patient departments in 2018/19.

Clinical Skills Training

The Clinical Education and Training (CET) Team facilitate delivery of a range of clinical skills study days collaborating with subject experts.

Many of the practical skills taught require supervised training in the workplace following a competency framework.



Clinical skills courses are consistently in high demand, therefore registered staff or those in the more acute areas are prioritised for the places.

From September 2019, nursing students will be learning many of the clinical skills during their training, therefore we are now focussing on registered staff to complete their supervised practice as they will be the future assessors.

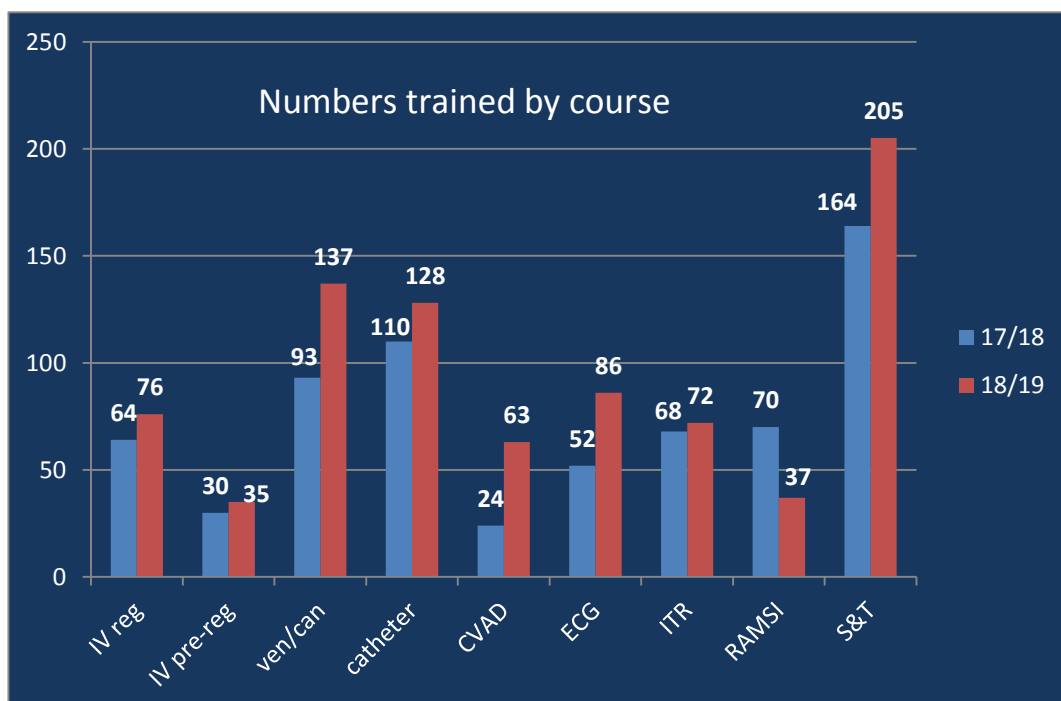
The chart below shows the increase in number of attendees from the previous year. This could be explained by our focus on reducing numbers of staff who did not attend (DNAs). We now have a permanent clinical education and training administrator who has been checking the registers and prompting staff that do not have study days booked into their off-duties. The use of the on-line study

leave form ensures that responses are more promptly sent back to individuals and their managers, thereby improving communication. This also means that cancelled places can be filled more efficiently.

The CET Team work with the inter-professional clinical educators to support good practice and supervision in the clinical areas. To aid this collaboration, the Clinical Nurse Educator forum was developed, which connects the clinical educators with the clinical education and training team via monthly meetings and also via a 'WhatsApp' group.

This enables the sharing of good practice and recommendations from incidents, development of competency booklets, identifying areas where extra support maybe needed or where staff may need to access study days and communication of any educational opportunities or new ways of training.

Such collaboration with the Inter-Professional Clinical Educators is another factor for the increase in numbers trained as additional candidates can be booked on directly when the need arises.



The reduction in RAMSI numbers can be explained by the move from 2 simulation courses, ie Intro to RAMSI and RAMSI, to just 1 which runs 7 times a year and the increase in in-situ and simulation training.

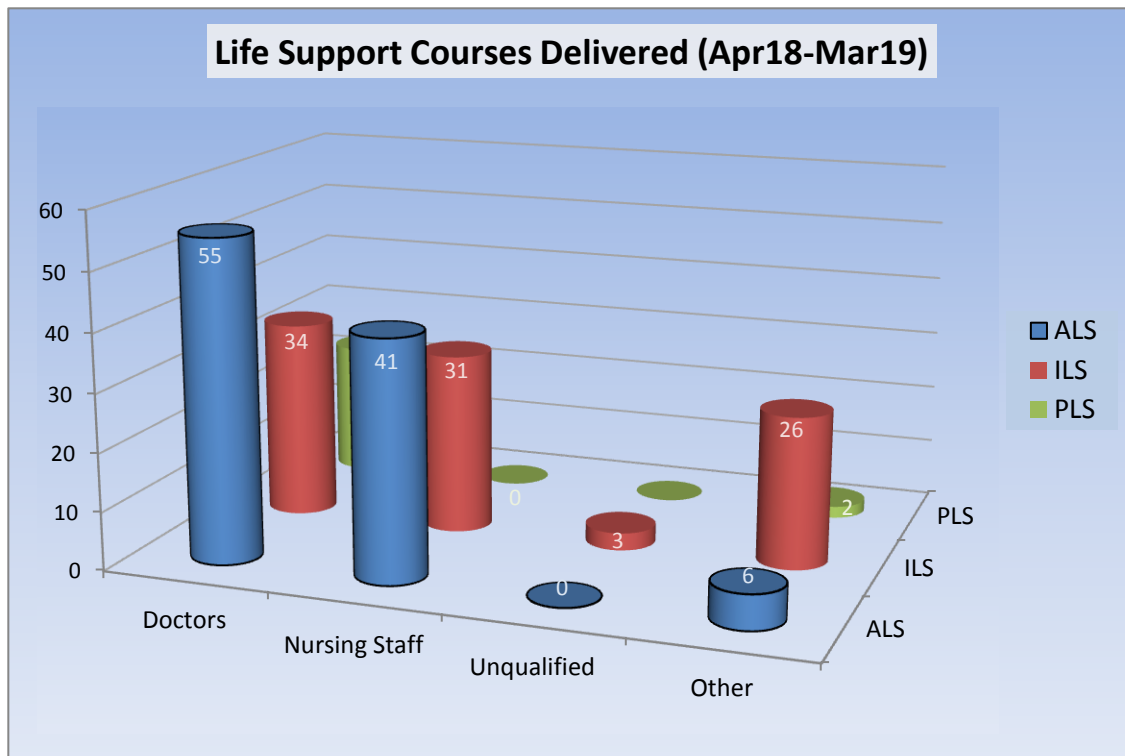
It had been difficult to ensure sufficient faculty for all the courses and provide in-situ simulations which are also faculty heavy: therefore, it was decided to reduce the amount of classroom teaching to focus on in-situ simulations.

Resuscitation

Advanced Life Support (ALS) and Immediate Life Support (ILS) courses provide skills and knowledge in relation to the deteriorating patient and are attended by staff from higher dependency areas, e.g.

Emergency Department/Emergency Management Unit. Paediatric Life Support (PLS) is also delivered for staff that regularly care for sick children.

From the ALS courses we have nominated 11 members of staff for instructor training and we will now have Kim Castelluccio - Learning Placements Lead Undergraduate Medicine, Anna Watkin - Specialist Trainee in Anaesthetics, Vittoria Sorice - Research Nurse joining our instructor faculty.



Clinical Moving and Handling

The Clinical Moving and Handling Team introduced self-declaration forms which record point-of-care observations undertaken by Key-Movers or the Clinical Handling Team on an annual basis.

Staff make themselves available for these observed sessions. The self-declaration forms are signed by a Key-Mover or manager, and provide evidence that they have met the Manual Handling Update requirements using the new Validation of Learning in Practice (VoLiP) system.



DIAG Declaration of Manual Handling Competency

This document is to be completed by staff when competency in the Manual Handling skill(s) detailed below have been achieved and demonstrated in practice (under supervision). This document is applicable to staff who have received training at Chesterfield Royal Hospital Trust, or training elsewhere (evidenced).

As a member of CRHFT staff, I declare :		Self-declaration	
<ul style="list-style-type: none"> I have read, understood and adhere to policies which are linked to Manual Handling activities. I have observed Video clips www.practicelearning-crh.com to update theory and practice. I understand the risks associated with unsafe techniques and how to minimise risks. I understand the necessity of using Manual handling information in patients Core Care Plan. 			
The member of staff has been observed demonstrating safe practice in line with policies and procedures for the activities		Assessor to sign	
Preparation of the patient prior to the procedure, preparation of self and all the equipment where necessary.			
Correct checking and preparation procedure as per policy.			
Informed consent gained or MCA completed accordingly			
Performed manual handling activities, assessing the patient appropriately throughout.			
Appropriate patient aftercare, review and amend Manual handling documentation as required.			
Correct after care of equipment, infection control procedures adhered to throughout.			
Patient given advice and instruction as appropriate.			
Please observe three of the activities below	Completed Date	Discuss Re assess	Training Required
1. Able to correctly reposition patient on a bed /trolley using a sliding sheet			
2. Able to correctly transfer patient using hoist and sling			
3. Able to correctly assist patient into a standing position, from bed or chair			
4. Able to correctly turn/roll patient on a bed /trolley			
5. Able to correctly use a Rotunda or Arjo Steady.			
6. Other: Able to demonstrate how to sit up the bed using a monkey pole			
7 Any other activity relevant. Please describe:			

(Print staff name)

Assessor (Print Name) _____ (Sign) _____ Date _____

I confirm that I am aware of my responsibilities, limitations and accountability in relation to all aspects of **Manual Handling**. I am confident in my competency and will continue to update my knowledge of local policy and skills developments. I am aware that I can discuss any concerns or request future training in line with development needs, with my line manager and the Clinical Education and Training team.

Name _____ Workplace _____

Signature _____ Date _____

Line Manager/clinical educator (signature and print) _____

When completed, please send a confirmation email to lorraine.bower@nhs.net with cc to your manager. Keep a copy for yourself as we will not return your form. We will update your individual learning record on the skills passport.

Other resources to support staff at point-of-care include:

- The website www.practicelearning-crh.com/moving-and-handling which has been developed to include photographic information on Manual Handling Techniques.
- A series of six pocket-sized compact information booklets compiled on specific topics have been produced. Responding to topics of the day in order to reach point-of-care staff quickly and effectively. These include: Information for new starters; Bariatric Patients; Safe and Effective Manual Handling; Overhead Tracking; Outpatient Departments; Midwifery; Aggresso Numbers for equipment purchases and Replacement Safe Handling in Outpatients

RECOGNISE AND REWARD THE SKILLS AND KNOWLEDGE OF OUR EDUCATORS AND LEARNERS

Carrie Marples – North Midlands and South Yorkshire Apprenticeship Awards: Large Employer of the Year.

Emma Yeomans – University of Derby Dean’s Award

Mr Chandrasenan-Best Teacher Award (voted by Sheffield medical students)

Dr David Elphick- Best Teacher Award (voted by Sheffield medical students)

INVEST IN WORK-BASED LEARNING EDUCATOR STRUCTURE

Inter-Professional Clinical Educator Team

In September 2018, the team recruited four additional educators with multi-professional backgrounds to help support and deliver inter-professional learning and development at the point of care. The new team is aligned to Care Units and the increased visibility and accessibility to all learners facilitates the delivery of Care Unit priorities as well as promoting inter-professional learning opportunities.



Support of Key Movers

The main aim of the Key-Mover system is to provide a network within the trust to develop Moving and Handling practices which are in line with the Trust’s Manual Handling Policy, the Manual Handling Regulations 1992 and the Derbyshire Inter-Agency standards and Codes of Practice 2000.



Key-Movers are members of staff at all grades and job roles working within the wards and departments. They undertake an initial in-house 3-day course with courses run throughout the year and attend subsequent one-day updates on an annual basis.

This year we have increased to 52 Key-Movers in the trust, covering the majority of our wards and clinical departments. These Key-Movers make an enormous contribution to Manual Handling Standards at a local level in our wards and departments and contribute to the point of care advice and training for clinical teams. It is crucial that to maintain the numbers of competency assessment for existing staff that we ensure that wards and departments have their own key movers.

- Initial three day manual handling training course
- Bi-monthly Key-mover newsletters
- Group emails
- Monthly ward visits
- Celebratory events
- Bespoke training support
- Key-mover 'What'sApp' group

ENCOURAGE AND ALLOW OUR PEOPLE TO LEARN FROM OTHER ORGANISATIONS

The Library has established a number of relationships to enable shared learning with other organisations.

In May 2018, we launched a joint initiative with the Macmillan Cancer Centre to provide an information and resource service for the children of parents with advanced cancer. Parents are offered a one-to-one with the Information Officer at the MacMillan Centre, and they are given age appropriate books and resources to help facilitate difficult discussions with their children.

In April 2018, we launched a joint Derbyshire Library and Knowledge Service for employees of Derbyshire Community Healthcare Service. This is a unique partnership in Library and Knowledge Services and is a joint collaboration with Chesterfield Library Service, Derby Royal Hospital and Derby Kingsway Hospital Library Services, to deliver improved services and coverage. We are in the process of evaluating the service with a view to expanding our services in 2019.

By working together with other Midlands NHS Trusts we have expanded our range of electronic resources. Working in collaboration means we can secure the best possible price enabling a wider coverage for our clinical and non-clinical staff.

Learning Culture

To develop a culture that learns from its success and failures to engender continuous quality improvement (*Quality Strategy 2016*)

- Promote inter-professional learning opportunities.
- Create/support 'interest groups' to co-ordinate and drive educational developments.
- Embed learning from feedback, complaints/incidents into in-house training
- Patient and Public Involvement
- Improve functionality of the skills passport.
- Provide essential training in a way which is flexible, accessible and valued.
- Embed opportunities for reflection and supervision in practice.
- Develop digital resources which enable people access to knowledge in the workplace
- Identify emerging educational leaders and support their development.
- Strengthen partnerships with quality governance to connect learning and change.

Introduction

The strategic plan is to “...help realise the required cultural transformation by engaging and empowering existing people as leaders of change: connecting people with shared interests, creating a lively communication conduit between those people and the existing governance and quality structures, and supporting people to grow into leaders in this area”

PROMOTE INTER-PROFESSIONAL LEARNING OPPORTUNITIES

Medical Student Support

On several occasions, we have provided Observed Structured Cultural Encounters preparation sessions and included trainee Advanced Clinical Practitioners (ACPs) and medical students as co-candidates. This has since evolved as the ACPs are now taking part in the assessment and feedback of those sessions with senior clinicians, allowing them to further develop their skills with supporting junior members of the team.

The Inter-Professional Clinical Educators (IPCE) are beginning to take a greater role in supporting the medical students in the clinical areas: this includes supervising procedural skills, or helping them to find opportunities and appropriate supervision. They have an integral role to play in encouraging and supporting the other members of the ward teams to welcome the medical students into the teams and understand the roles they have whilst on the ward. Having a visible member of the education team at point-of-care has been fed-back by students as useful, especially early in their placement as someone they can approach. This has happened successfully for the small cohort of Nottingham medical student and will continue to grow as the larger groups of Sheffield medical students start their longitudinal placements.

Inter-Professional Student Forum

The Centre for Practice Learning (CPL) has explored the benefits of inter-professional student learning and how to provide this opportunity for the students whilst on their placements. The aim was to develop an

opportunity for students from different professions to share and discuss their experiences, the differences in their placement challenges, and to facilitate an inter-professional discussion around case studies.

Between April 2018 – March 2019, 21 inter-professional student teaching sessions were delivered with 406 students attending.

Topics included: Mental Health and substance misuse; Jehovah Witness patient requirements; the role of a Neuro Physiotherapist; Clinical

research: Preceptorship; Simulation of a deteriorating patient, and eating disorders. These sessions have been facilitated by representatives from 10 different healthcare professions.



Inter-disciplinary and Inter-professional End of Life Training

SAGE and THYME is a foundation level communication course focused upon end of life care, which is available to inter-professional and inter-disciplinary staff from across the trust. The course empowers delegates to notice distress, hear concerns and respond helpfully.

The course is run in collaboration with the palliative care team and educators from the Trust and Ashgate Hospice.

We have developed a 2-day end of life course in partnership with the Senior Matron in Palliative Care, and 41 members of staff of all nursing grades have benefitted from this course to contribute to our outstanding CQC status in this area.

Feedback from the SAGE and THYME sessions has been very positive:



Provides a good structure and thought-provoking

All staff should do this course

Increased confidence to have difficult conversations

More likely to make sure family and patient feel listened to

Inter-Professional Competencies

As part of the work stream for Team around the Patient, we have looked at the different professionals that work on a ward and have been able to identify areas of duplication and ways in which to streamline the patient 'contacts'. This has led to shared inter-professional competencies being developed in two main areas: Firstly, training nursing staff in mobilising patients on 'Day 0' that have had an elective joint replacement, as this is part of their Enhanced Recovery Pathway. Secondly, therapists and other Allied Health Professionals (AHP) have received training and competency packs relating to clinical observations/vital signs and using nursing documentation (some of the risk-assessments which are appropriate). The aim of this is to try and avoid replication of work and promote a more integrated, team effort way of working.

CREATE / SUPPORT INTEREST GROUPS TO CO-ORDINATE AND DRIVE EDUCATIONAL DEVELOPMENTS

Inter-Professional Education Group (IPEG)

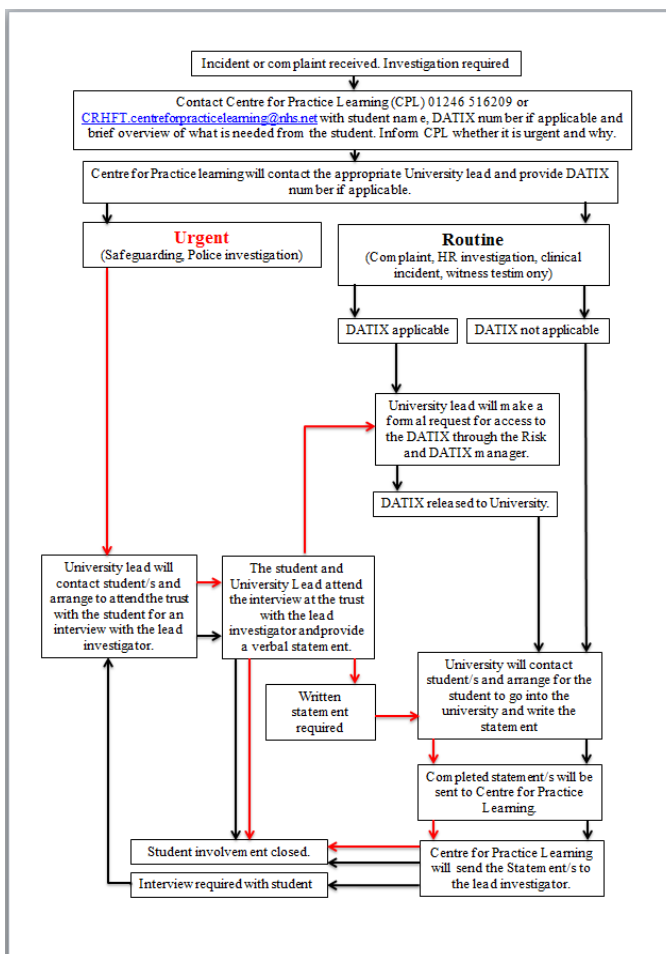
The Inter-Professional Education Group (IPEG) Terms of Reference has been reviewed to promote an increased focus on strategic priorities linked to The Quality Strategy and People Strategy. To enable this change of approach, the Clinical Educators Forum has been strengthened and reports to IPEG providing a stronger link and increased effectiveness of these two key education meetings.

EMBED LEARNING FROM FEEDBACK/COMPLAINTS/INCIDENTS INTO IN-HOUSE TRAINING

Student Involvement in Incident Guidelines

A priority of the recent Learning Environment Manager (LEM) days has been to discuss and finalise the process to follow if a student is involved in an incident or complaint. In partnership with the Higher Education Institutions (HEIs) an incident flow chart was produced and added to the trusts complaint policy as well as being distributed trust-wide through the LEMS.

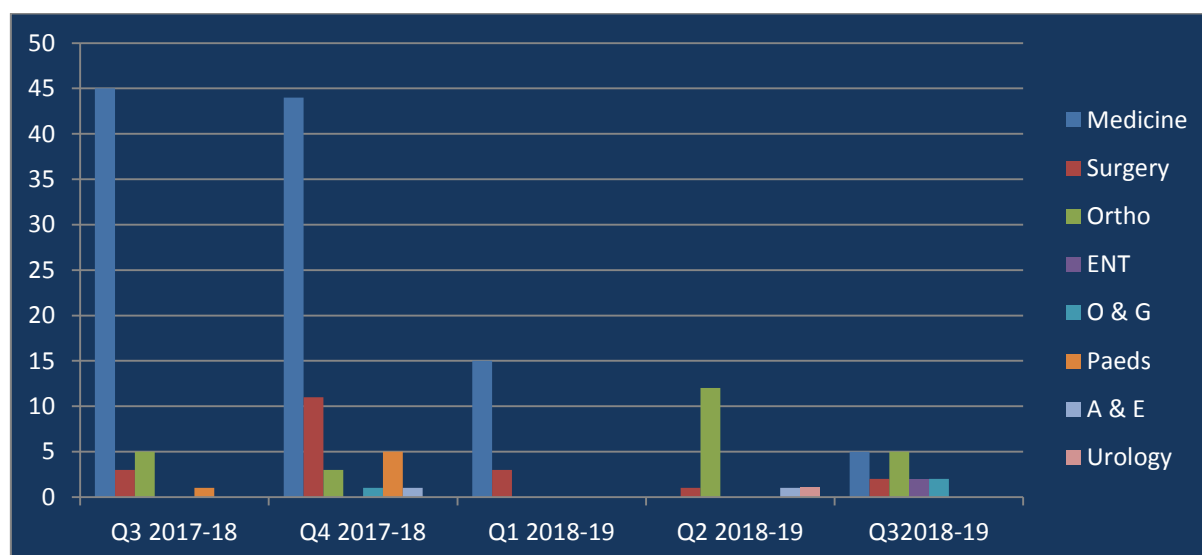
Following each LEM meeting a newsletter is produced aimed at mentors and any professional acting in the support or educator role for students on placement at the trust. The newsletter is produced by a member of the CPL team and provides an overview of subjects covered at the meeting, current topics or issues, anything new in student education or the university curriculum and information about the student teaching sessions available in the following month.



Guardian of Safe-Working

The role of Guardian of Safe-Working Hours for the Trust is to ensure that issues of compliance with safe working hours for junior doctors are addressed, and to provide assurance to the Trust Board that the doctors' working hours and conditions are safe. The role was developed in association with the new junior doctors' contract in 2016. The doctors can submit exception reports electronically if they work over their contracted hours, if they feel that there is inadequate service support when they are working, or if they miss planned educational opportunities because of work.

When the electronic system was activated in 2017, a large number of exception reports for working excess hours came in from doctors working on one particular medical ward. The clinical and divisional directors for medicine made a case for extra staff and once the additional staff were in place, the number of exception reports from medicine fell dramatically, showing that the exception reporting system can work. This is illustrated in the graph below.



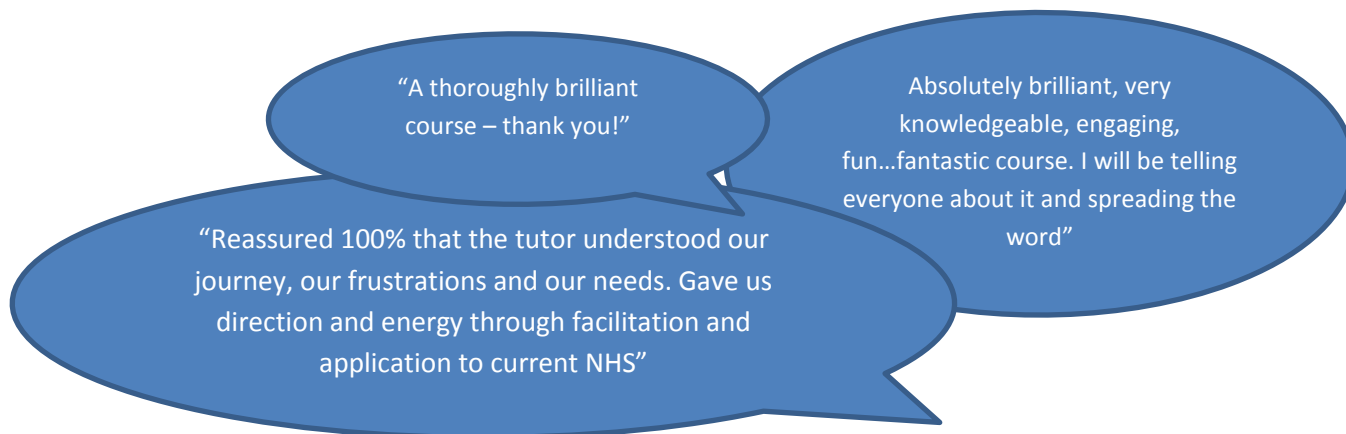
Exception reporting has promoted changes in staffing levels, clarification of care pathways and improvements in handovers, in order to benefit patient safety and the working lives of junior doctors.

Human Factors

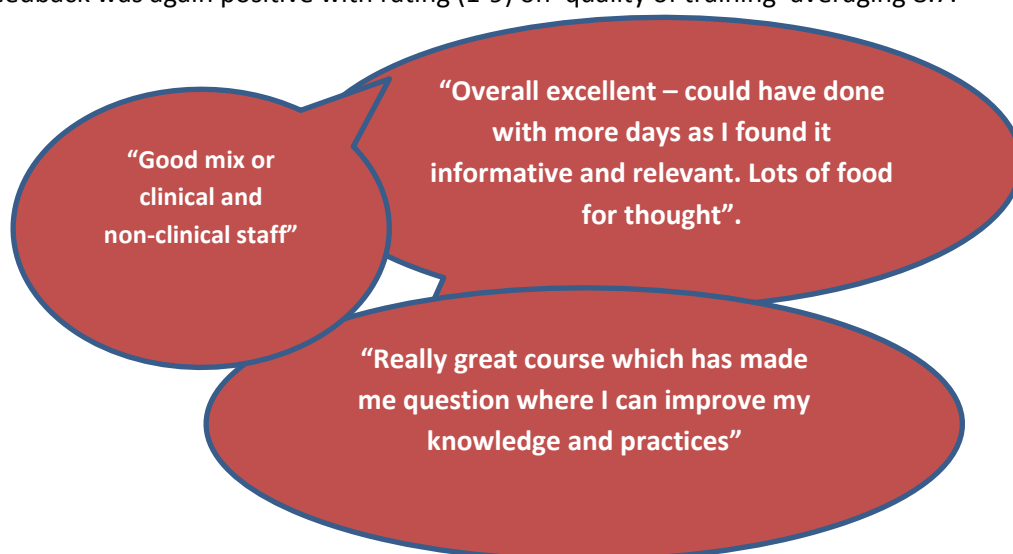
Our common goal is to deliver safe care that is of the highest quality. For most patients this is achieved, leading to an improvement in their health: However, there are patients who are unfortunately harmed as a consequence of being admitted to hospital. Human Factors focus on optimising human performance through a better understanding of the behaviour of individuals, their interactions with others and their environment and the system in which they work.

As a Trust we are committed to see Human Factors embedded within our day-to-day work, supporting cultural change and empowering the trust to put patient safety and clinical excellence at its heart.

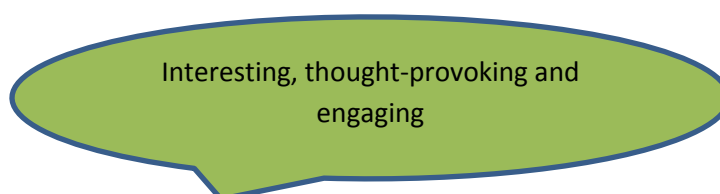
We have trained 16 staff members from a range of professional roles to be Human Factors trainers within the Trust. Evaluation of this training has been very positive. Rating (1-9) on 'How well did your course meet your objectives', the average rating was 8.9 from 16 individuals.



We have also provided 60 places on a 3-day Human Factors Managements course and have offered the places to members of the Leadership Academy. All places are filled and the sessions are taking place between April and September 2019. One course has been completed and has been attended by 11 staff members. Feedback was again positive with rating (1-9) on 'quality of training' averaging 8.7.



The human factors trainers are now providing education on human factors to every new employee to the Trust as part of the corporate induction programme. The most recent cohort with 20 new staff members all gave positive feedback about their induction.



In the future, the human factors trainers aim to develop further half-day sessions on various aspects of human factor training. These will be offered to all staff members across the trust. We hope to embed the human factors culture further into patient care, quality improvement, system design and error management within the trust.

With the above we should be able to recognise human needs within the work place, maximising safety and minimising risk and try to design out the potential for health care professionals to make mistakes.

Service User Partnership

Service Users' Partnership is the name we have given to a programme which aims to recruit patients and carers to help in the education and training of all staff groups. Run by a consultant and administrator, we have started by recruiting volunteers to act as simulated patients, as well as a small number of patients with chronic illnesses. In the last year we have used the volunteers in the following ways:

- Simulated patients for staff training for the Care Certificate
- Simulated patients for training staff how to take ECGs
- Talking to students about a chronic illness
- Talking to students about experiences of health care
- Simulated patients for student doctor Observed Structured Clinical Encounter (OSCE) exam
- Simulated patients for new doctors for research simulation ("EPIFFANY") based around prescribing.

We are now trying to recruit more widely, particularly patients with chronic health problems and clinical signs, in order to create a pool of volunteers who can help educators across all professions in the trust. Volunteers have fed-back to us that they have enjoyed the experience and found it interesting and informative.

Patient Book Trolley Service

The Library Service continues to run a patient book trolley service on our wards. In June 2018, we evaluated the service. Six wards responded and all six said that the trolley service had a positive impact on a patient's stay in hospital and also that they would like other items to be offered. In response to this we now give out crosswords, word searches and colouring sheets. We now cover eight wards and are hoping to increase the frequency of these visits in 2019 with the help of the volunteer service.

Carers In Derbyshire

We have organised a display in the Library in conjunction with our Carer Liaison Officer providing information, packs and leaflets for any carers who work or visit our Trust.

Patient Information Resources

The Library has expanded our popular dementia resource collection in the Library during 2018 to now include audio books, dolls, colouring sheets and pencils and jigsaws.

Autism Resources

Following a successful bid to obtain charitable funds, a task and finish group was set up to develop resources to support patients and their carers who were using the hospital services to have an improved experience. The resource group sought user views and looked at what other organisations were doing already before developing a resource box and patient pack. The boxes contained items to support

different elements of sensory deficit that may be experienced by someone on the autistic spectrum such as ear defenders, sunglasses and alternative means of supporting communication.

All clinical areas received 2 patient packs and are able to access more packs from the Library as required. After starting with 4 resource boxes based at emergency points of contact within the Trust, it was recognised that more resources needed to be available more widely.



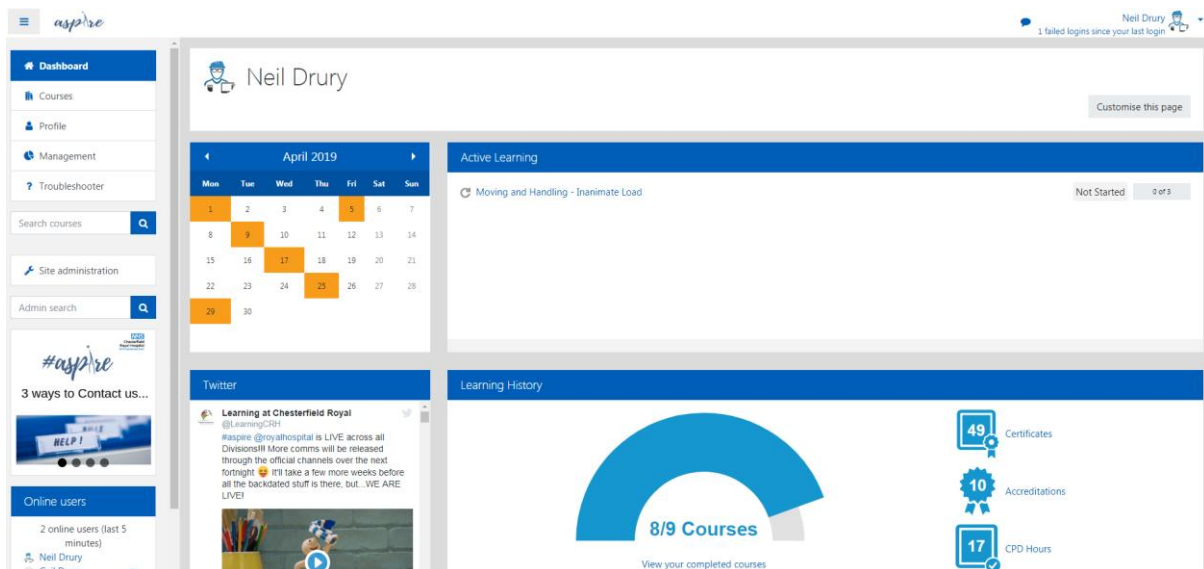
So far 100 packs have been given out and there are now 16 boxes available many areas.

In addition we have successfully designed and Trade-marked a logo for our Autism resources



IMPROVE FUNCTIONALITY OF THE SKILLS PASSPORT

The Proud to Learn Portal was used up until February 2019 as our Learner Management System (LMS) which records the training data for our staff. Developed in 2016 by Royal Derby Hospitals, this became inaccessible to all our staff (via a Skills Passport app) at the end of January 2019 without notice. The Digital Learning Team recovered most of the essential training data from the Portal and built a new LMS to replace it, based on the open-source [Moodle](#) platform.



Above: Dashboard (homepage) for the “aspire” Learning Management System

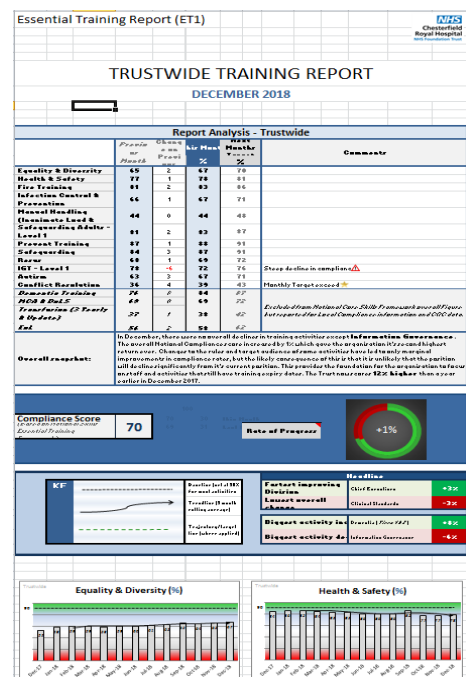
Our people have access to “aspire” which provides them with an easy to understand summary of all their essential training, their compliance status and how many days until they need to take the programme again.

The monthly **essential training reports** were further developed based on user feedback and the number of users for these reports now exceeds 130.

The first report (opposite), **Essential Training 1 (ET1 or “Trustwide Training Report”)** provides a dashboard view of the overall Trustwide compliance against each of the essential training activities outlined in the Skills for Health National Skills Framework document.

ET1 provides a macro view of the organisation and has functionality to provide a snapshot view by Division as to the overall number of staff who have completed their training.

The information is provided in a tabular and graphical format and the feedback from the users has been hugely positive.



ET1 Report Dashboard view

It also provides analysis such as increases/declines in training activity for each of the mandatory skills, the rate of progress towards full compliance by Division and a summary of any system downtime.

Row Labels	Division(s)	Department(s)	Business Unit(s)
Alison Wainwright	Surgical Services Division	Admin and Clerical	Safety Management
Equality & Diversity	Chief Executive	Advanced Clinical Pr...	Security Services
Carly Miller	Clinical Standards and ...	Ashover Ward	Specialty Medicine ...
Equality & Diversity	Facilities Services	Audiology Services	Strategy and Perfor...
Christopher Haywood	Integrated Care	Barnes Ward	Surgical Services Div...
Equality & Diversity	Medicine & Emergency ...	Bereavement Service	Surgical Support Ser...
Hayley Booker		Breast Cancer Scree...	Tissue Viability
Equality & Diversity		Breast Care Services	Workforce and Orga...
Heather Watts			
Equality & Diversity			
Nicola Elliott			
Equality & Diversity			
Susan Cooke			
Equality & Diversity			
Vicki Sheppard			
Equality & Diversity			
Grand Total			

Learning Path	Compliant Note
Adult Resus and Paediatric Basic Life Support	Compliant
Autism Awareness	Non Compliant
Conflict Resolution	
Dementia Training - Tier 2	
End of Life	
Equality & Diversity	

Trendlines on the individual activities, per Division, gives the user an opportunity to spot any patterns in the data and plan accordingly.

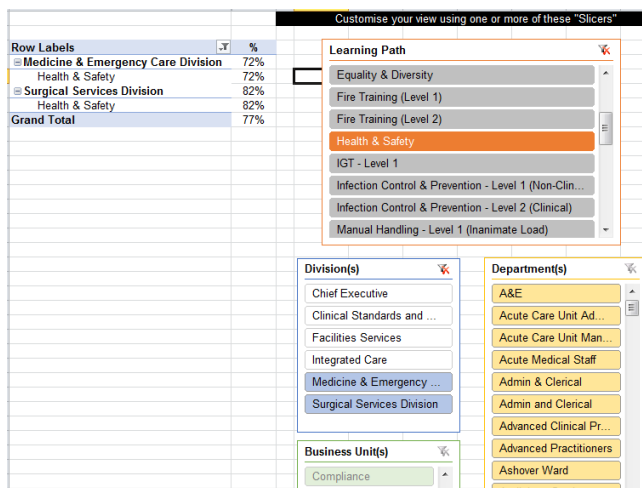
The second of the reports **Essential Training 2 (ET2 or “Behemoth Slicer”)** continues to be utilised as the report of choice for monitoring staff compliance.

This allows users to “drill-down” to their own work area and see who is/is not compliant in each of the Essential Training activities.

ET2 Report - Behemoth

The Slicer (as it has become popularly referred to) puts the overwhelming volume of training data that is reported Monthly in the hands of the Managers/Matrons, in an intuitive and user-friendly format.

Using a combination of the Slicer buttons, they are able to quickly focus on Staff and/or activities to ensure that their Teams are up-to-date with their training.



Users can focus on smaller teams where training compliance in some activities is very much lower than the overall average.

The reports empower Managers and Matrons to have full scrutiny over the progress of their teams and be able to focus on areas for improvement and celebrate successes.

PROVIDE ESSENTIAL TRAINING IN A WAY WHICH IS FLEXIBLE, ACCESSIBLE AND VALUED

Essential Training Review

The organisation monitors data compliance against the [National Core Skills Training Framework](#) to ensure our staff have the mandatory skills to perform their duties. In 2018, 43% of all training activities were provided via e-Learning (that's **12,396** activities completed!). Our learners want mobile, relevant, personalised and self-paced content at a point of need and this empowers them to utilise their time and minimise impact on the wards and workplaces.

The Strategic Workforce, Education and Training Group undertook a comprehensive review of essential training to ensure the Trust was providing the required training for safe, quality care of patients and ensure a safe environment for staff members and our patients and visitors. This review was approved at Hospital Leadership Team in February 2018.

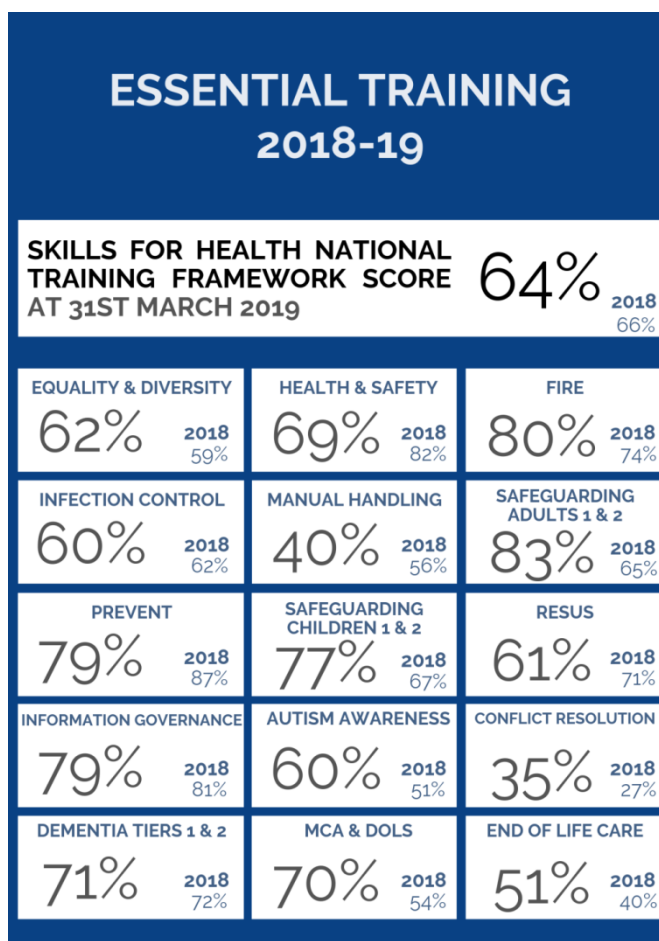
The results over the past year reflect the effectiveness of this approach. Ten of the twelve essential activities increased their overall compliance rate (only Manual Handling & Health & Safety declined).

The most significant improvements include Safeguarding Children, Levels 1 and 2 (up **26%**), Safeguarding Adults, Levels 1 and 2 (up **25%**), Conflict Resolution (up **24%**) and Autism Awareness (up **36%**)! The Trust overall National Compliance score increased by 12% on the previous year to **70% overall** which was an outstanding achievement.

The Aspire system and LMS allows staff to access a large number of courses without attending face-to-face sessions via e-learning.

Benefits include:

- Programmes available 24/7/365 to accommodate our people who have a wide-range of working patterns
- Courses accessible from outside of the workplace
- When our people undertake e-learning, the training outcome will be automatically recorded to their staff training record



DEVELOP DIGITAL RESOURCES WHICH ENABLE PEOPLE ACCESS TO KNOWLEDGE IN THE WORKPLACE

Facilitation of e-learning

The Library provides a learning environment with 16 PC's where staff can complete their essential e-learning and receive the help and support they require. This has been successful in encouraging staff to access e-learning and build their confidence in using technology enhanced learning.

Eight new e-Learning courses were added with more in the planning stages for future release. The Trust's e-Learning platform continues to evolve into the main way that our staff chooses to get their training.

E-Learning developed and promoted in 2018/19 included:



Eduroam

Working with the Trust's Information Technology team we are now able to provide all learners on placement at CRH a 'Bring Your Own Device' (BOYD) WiFi network, using the world-wide Higher Education 'Eduroam' platform. This means, for example, that they can access the virtual learning environments and learning resources from their Higher Educational Institutions in the workplace and complete online assessments in practice.

Simply Book It

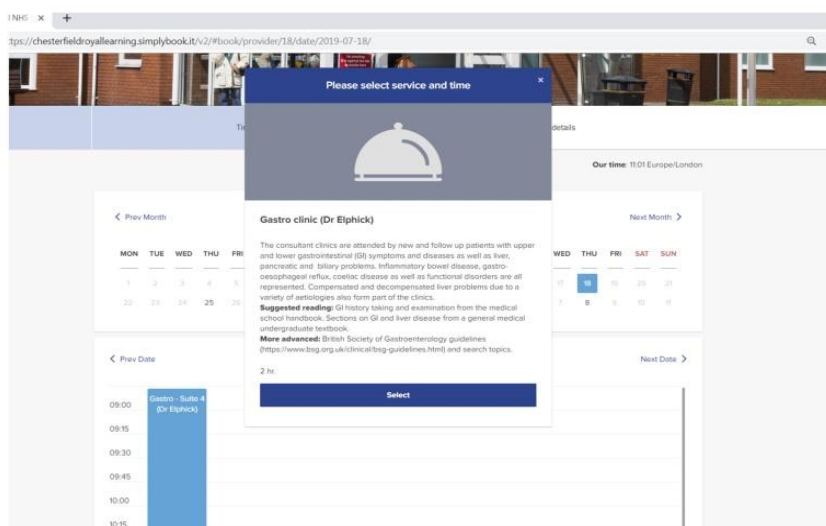
'Simply Book it' is an online application that allows a learner, or a member of staff seeking to expand their experience, to book a slot observing one of a wider range of elective activities taking place around the Trust. It is currently accessed by Medical Students from the University of Sheffield and University of Nottingham. It is hoped that in future this may be rolled out to facilitate other trainee and career-grade staff to access these sessions. The application is intended to give students choice, make observations sessions visible and easy to arrange to facilitate their learning and experience.

The application is linked to the 'Clinical Sessions' on Medway thus offering the Medical Students a choice of different sessions to attend over the week. As an example some of the clinical sessions could be any of the following:

1. Outpatient Clinics
2. Ward Rounds
3. Operating Theatre
4. Radiology
5. Endoscopy

Each session has an online brief description of the session such as the problem patients present with, the procedures they may have. There is also a reference to suggested reading materials to help the students come prepared at these sessions.

When a student elects to attend a session and has booked, the relevant clinician is sent an email to inform them of their attendance. This also allows monitoring of the student's learning activities.



The students found the booking system a useful way to manage their learning. Included are some quotes from Medical student feedback:

"I feel like we have had many opportunities for teaching, attending clinics and seeing a variety of things around the

"They (CRH) have a wide variety of opportunities for the students to take."

"CRH offered a wide variety of experiences for us in order for us to meet our learning objectives."

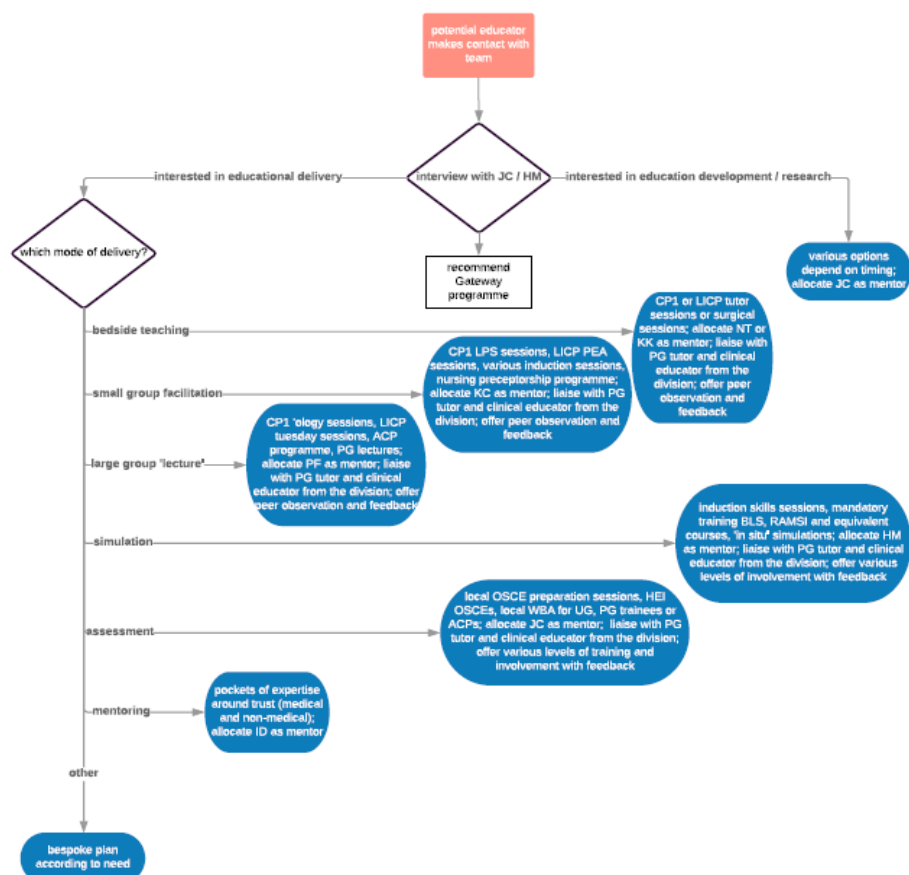
The feedback from session providers has been positive overall, with many clinicians preferring to know who is coming rather than people just dropping in. The 'Simply Book It' system also allows the clinicians to cancel sessions if there are issues for example, with staffing, and the student can be informed prior to arriving. As clinicians become more familiar with the system, we have been able to add more opportunities and smooth out issues such as ensuring the correct clinicians receive the email that informs them of a booking. Though initially a large amount of work was required to populate simply book it, it is a system that is constantly improving.

supporting educators pathways

James Crossley | September 21, 2018

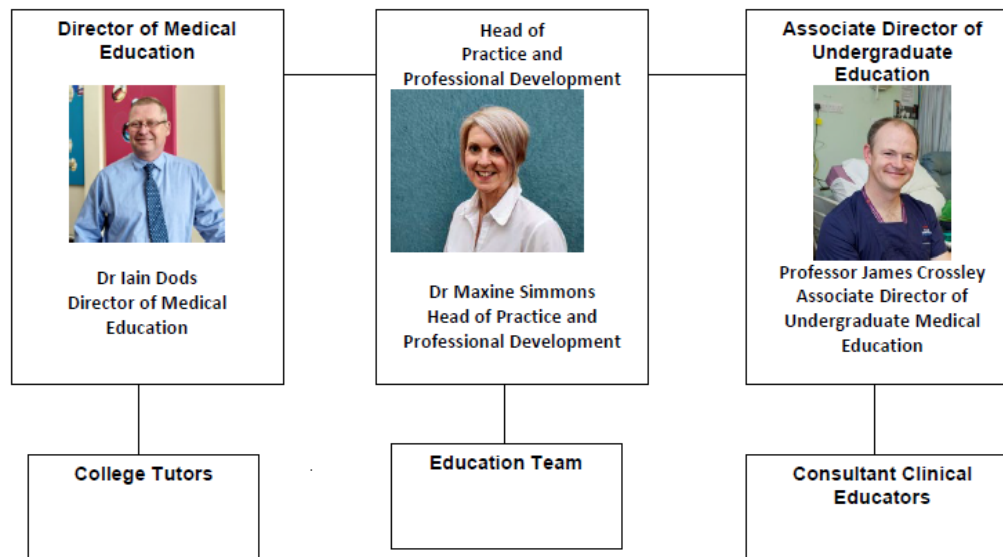
Supporting Educators' Pathway

We are keen to involve as many interested medical and non-medical staff in developing education careers. The pathway below helps us to support any member of staff expressing an interest in becoming involved in the next generation of educators.

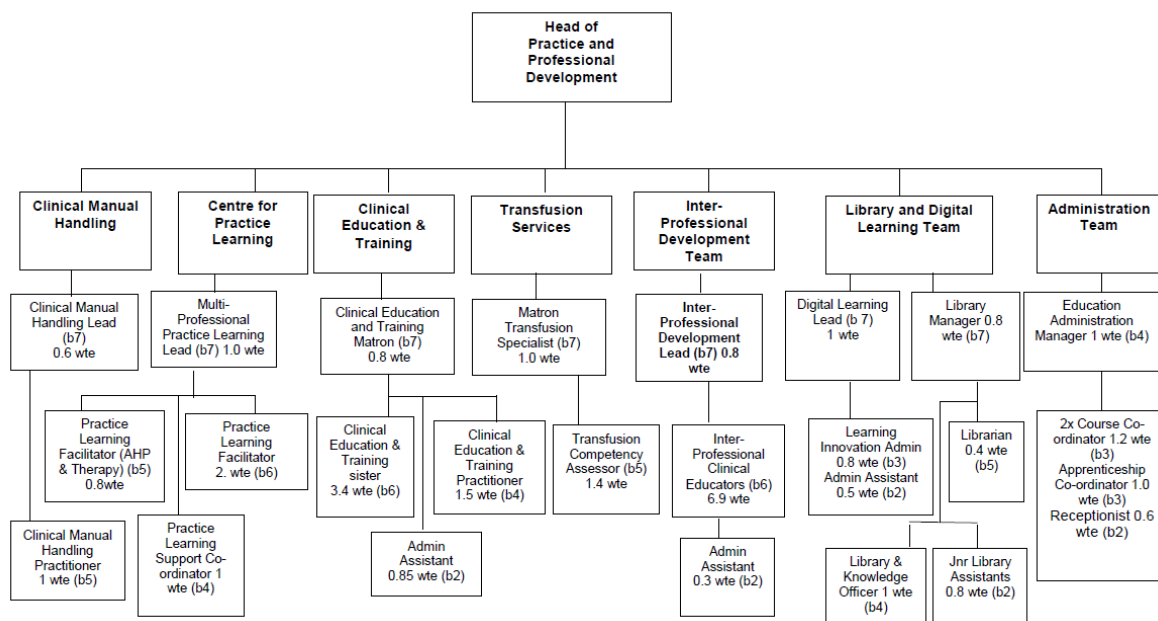


Introduction to the Team

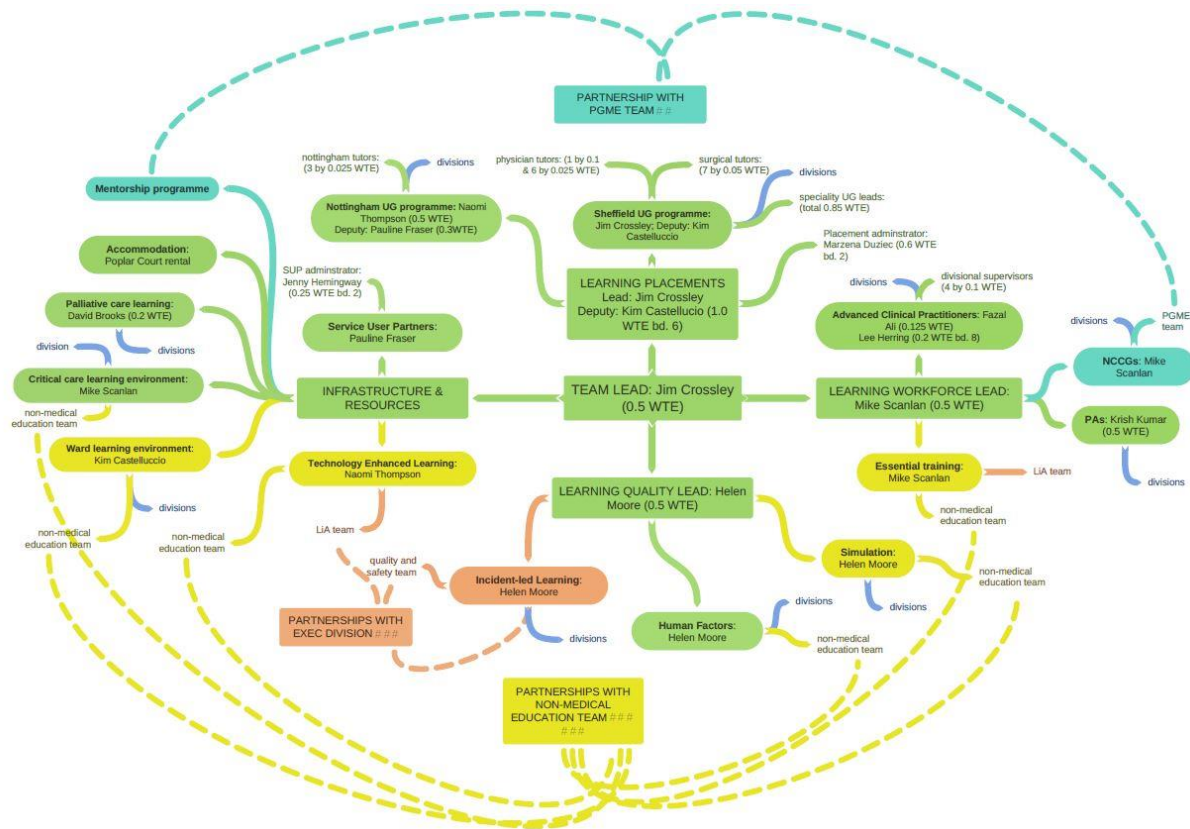
Multi-Professional Education Team Organisational Chart



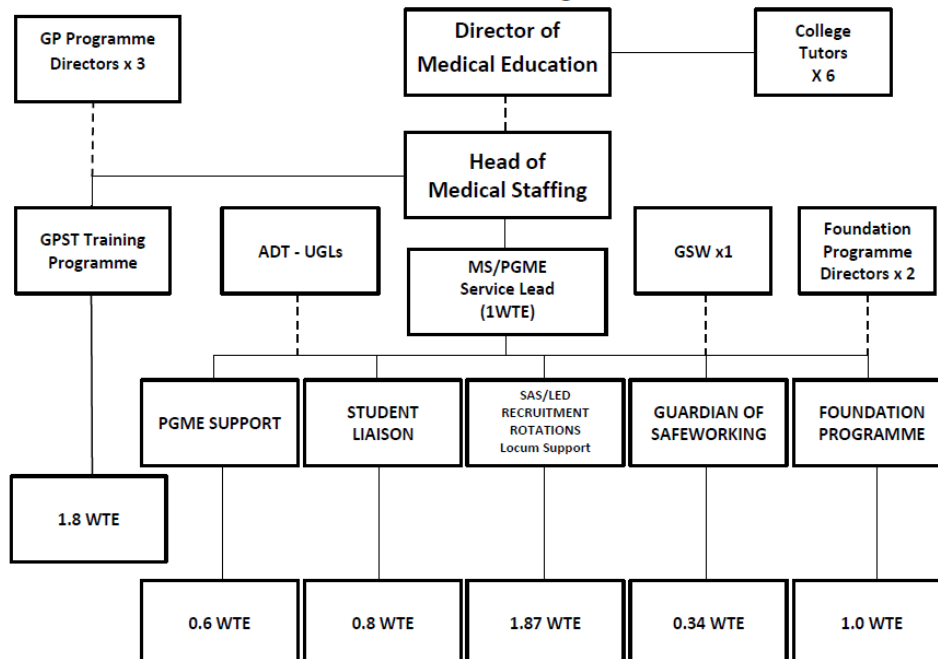
Multi-professional Education Team Organisational Chart



Consultant Clinical Education Team



Medical Staffing & PGME



Multi-Professional Education Team Professional Development

Centre for Practice Learning

Name	Development	Awards
Claire Langford: Multi-professional Practice Learning Lead	MYEPAD Stakeholder Conference NMC SSSA consultation & training NMC validation event UoD ERG Education and Training PAN Midlands PAD Conference RTP Summit Mental Health Awareness Midwifery NMC consultation	
Emma Taylor Practice Learning Facilitator	IPPE PAN Midlands PAD Conference SSSA training session Mentor Conference Mental Health Awareness	Applause
Josh Draper Practice Learning Facilitator	PAN Midlands PAD Conference SSSA training session MYEPAD Stakeholder Conference Midwifery NMC & SSSA	
Tina Thompson AHP and Therapy Practice Learning Facilitator	Equality and Diversity Conference AHP Educator day SSSA training session	
Michelle Day Practice Learning Co-ordinator		

Library and Knowledge Management

Clare Dawson Library Service Manager	Bibliotheca Library Conference Nottingham GDPR Workshop London Relationships & Connectivity Workshop Derby CILIP Showcase Library Management Systems London Positive Mental Health Conference CRHFT TEL Event Leicester
Aneesa Lindau Librarian	Midlands and East of England Library Event Organising Committee Midlands and East of England Library Event Leicester Job Shadowing a Clinical Librarian at Derby Hospitals/completing a ward round

Maria Slater Library Assistant Library Assistant Training Day Leicester

Jennifer Hemingway Library Assistant Library Assistant Training Day Leicester

Clinical Education and Training

Gemma Cort
Clinical Education & Training Matron QSIR Practitioner Training
ALS Instructor Day (RCUK)
Derbyshire Wide ReSPECT Implementation Group
NHS Employers Conference – Nursing Associate Implementation
Yorkshire HRD Network

Kate Turner
Clinical Education and Training Sister ALS Instructor Day (RCUK)
Human Factors Train the Trainer Course
Accepted secondment as Digital Improvement Matron

Elizabeth Claridge
Clinical Education and Training Sister Human Factors Train the Trainer Course
Consultation around apprenticeships
Leeds Learning event Nursing associates/ Derby
Health Education England learning event
Apprenticeship and education leads in Leicester
Healthcare support worker conference
ROATP&OFSTED Workshop Manchester, M & K Conferences
ILS Recert

Amy Booker
Clinical Educator for TNAs ILM course, Chesterfield College
'Same but not the Same', Nottingham University
Hospital workshop
Nursing Associate Workshop, Derby University
Learning event Nursing associates/Derby
OFSTED Inspection preparation day
NMC Conference London - Nursing associate
Leeds conference delivering presentation
Health education England learning event
Team Around the Patient

Dawn Moore
Clinical Education and Training Practitioner Healthcare Support Worker Conference
ROATP&OFSTED Workshop Manchester, M & K Conferences

Jane Furness
Clinical Education and Training Practitioner New addition to the team in 2018

Clinical Manual Handling Team

Carol Warren Clinical Manual Handling Lead	Clinical Holding Facilitator recert National Back Exchange Conference Member of National Back Exchange Member of East Midlands Branch	
Sue Baldwin Clinical Manual Handling Trainer	Clinical Holding Facilitator recert Naidex, Birmingham M & H training, U o D Shadow TVN, CRHFT End of Life, CRHFT Freedom to Speak Up Champion, National Guardian, CRHFT Clinical Holding update, CPI Stoke on Trent Occupational Therapy Show, NEC Birmingham	Applause Award

Inter-Professional Clinical Educator Team

Sarah Sewell Inter-Professional Development Lead	Preceptorship Conference, Manchester Placements masterclass, Derby Delivering integrated care, Sheffield Coaching through change workshop, London	Applause Award
Carol Hickman Inter-Professional Clinical Educator	Autism Train the Trainer Workshop Humidified Oxygen Conference Clinical Holding Advanced MCA workshop	2 Applause Awards
Denise McParlane Inter-Professional Clinical Educator	Human Factors Train the Trainer course and becoming a member of teaching faculty	Applause Award for supporting with winter pressures
Debbie Kilmartin Inter-Professional Clinical Educator		
Lyndsey Beardsley Inter-Professional Clinical Educator	Derbyshire Wide Preceptorship Group, University of Derby	
Gemma Hardy Inter-Professional Clinical Educator	Train the Trainer Autism Workshop Clinical Holding Advanced MCA workshop Educators Masterclass, UH Derby & Burton Teaching Hospitals	

Emma Cox Inter-Professional Clinical Educator	Train the Trainer Autism Workshop Calderdale Workshop for Trainee Assistant Practitioners at Sheffield Teaching Hospitals SHU ODP Recruitment Event AHP Event with Suzanne Rastrick in Derby	
Sally-Anne Wright Inter-Professional Clinical Educator	Humidified Oxygen Conference	
Leanne Stevens Inter-Professional Clinical Educator		
Central Administrative Team		
Elaine Woodhall-Windle Education Centre Manager		Applause Award
Joanne Long Course Co-ordinator		
Sue Simpson Receptionist		
Carrie Marples Apprenticeship Co-ordinator /Secretary	ROATP & OFSTED workshop - Manchester Skills and Careers Conference - Chesterfield Borough Council	2018 Winner of the NMSY (North Midlands & South Yorkshire) Large Employer of the Year Award for Apprenticeships. 2 Applause nominations for work around apprenticeship promotion
Learning Portal Team		
Neil Drury Digital Learning Manager Learning Portal Lead	Hyper Text Mark Up Language Version 5 and Cascading Style Sheets, EDX	2 x Applause Award
Linda Smith Digital Learning Administrator		
Lorraine Bower Assistant Digital Learning Administrator		

Head of Practice and Professional Development

Maxine Simmons Head of Practice and Professional Development	Leading the Chesterfield Way M&K Developing the Nursing Associate Role London
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Consultant Clinical Educator Team

Jim Crossley Lead CCE	University of Durham, further leadership development Faculty development days for Sheffield programme Grievance investigation training, CRH	Distinction in Graduate Certificate in Theology, Ministry and Mission
Naomi Thompson Nottingham Programme Lead	Maternity leave	
Pauline Fraser Service User Partners Lead	Faculty development days for Nottingham programme Human Factors Train the Trainer status Post-graduate Certificate in Medical Education	
Helen Moore Learning Quality Lead	Human Factors Train the Trainer status	Successful applicant – CRH charitable funds
Kim Castelluccio Deputy Learning Placement Lead	PG Certificate in Medical Education, Dundee Faculty development days for Sheffield and Nottingham programmes ALS Instructor training (GIC)	
Mike Scanlan Learning Workforce Lead	Newly appointed to CCE post as Lead for Learning Workforce in 2019	
Krish Kumar Physician Associate Lead	Newly appointed to CCE post in 2018 Faculty development days for Nottingham programme	
David Brooks Palliative Care Learning Lead	Newly appointed to team as Palliative Care Learning Lead in 2019	

Presentations & Publications

Jim Crossley

PEER REVIEWED PUBLICATIONS:

- Crossley J 'Workplace based assessment'. In *Learning and Teaching in Clinical Contexts: a practical guide* Ed. Delany, C & Molloy, E (**London: Elsevier, 2018**) p.253-272
- Siau K, Crossley J, Dunckley P. et al. *Training and assessment in flexible sigmoidoscopy: using a novel direct observation of procedural skills (DOPS) assessment tool*. **Journal of Gastrointestinal and Liver Diseases** **2019**; 28 (1). pp. 33-40

REGIONAL OR NATIONAL PRESENTATIONS:

- *Assessment and feedback in postgraduate medical education*. Keynote lecture, **Swiss Annual Medical Education Symposium**, Zurich: February 2018
- *Issues in assessment*. One-day seminar, **HEE East Midlands masterclass series**, Nottingham: March 2018

Maxine Simmons

REGIONAL OR NATIONAL PRESENTATIONS:

- Implementing the Nursing Associate Role in practice. Keynote lecture, **M&K Conferences**, London
- Implementing Team round the Patient, **Regional HRD network, Birmingham and East Midlands**
- NHS Employers best practice case study **implementing team around the patient**