

Nursing Associates at East Lancashire Hospitals NHS Trust

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ELHT Placement education Lead



Nursing Associates at ELHT

- ELHT was part of the fast follower's pilot for Nursing Associates in March 2017
- We are currently recruiting for cohort 6 which will start later this month
- Attrition over the 5 cohorts is less than 10%
- 66 NA's have qualified so far & of these 59 still work for the trust or are completing the RNDA top up with us

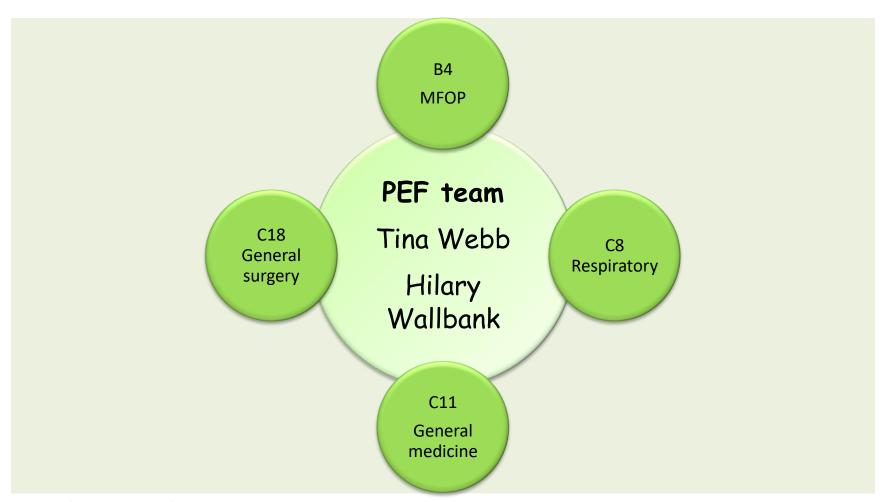


Nursing associate at ELHT

- We advertise internally & externally
- Candidates are not seconded. They are employed as full time tNA's
- Our PEF team manages the tNA's.
- tNA's have a base placement & a series of supernumerary placements that explore the breadth of experience both in the trust and in our wider community
- We have developed partnership agreements with local trusts, primary care & regulated care organisations to swap tNA's

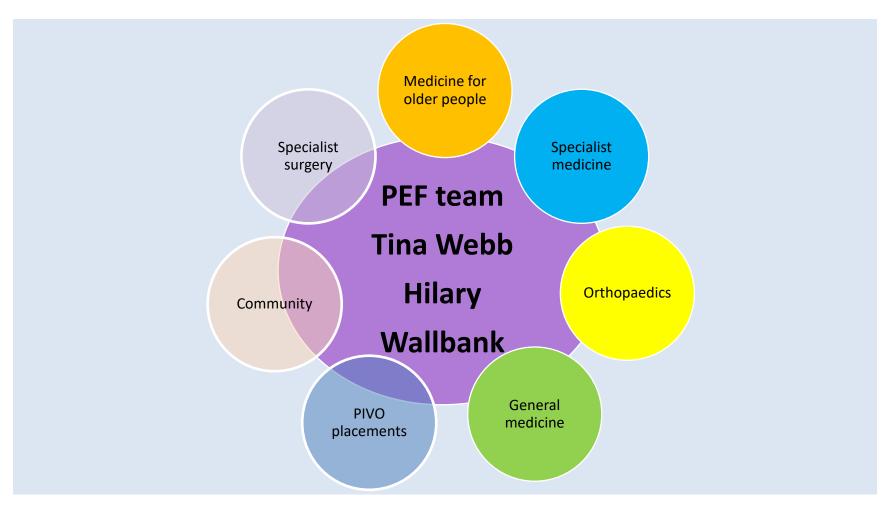


ELHT Hub Placements 2017



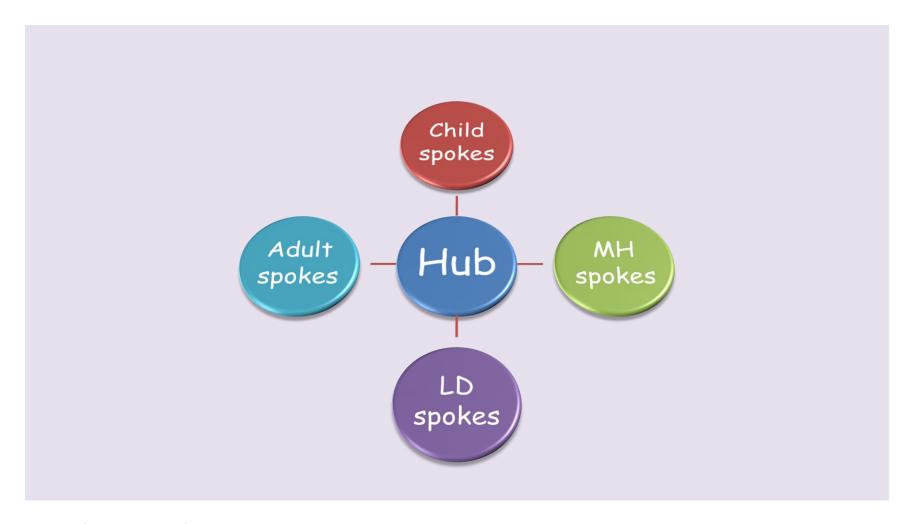


ELHT Hub Placements 2022





Cross field learning





ELHT tNA placement plan

Year 1 Base placement (12 weeks) In placement spokes	MDT physio, OT, radiographyPath labPlanned admissions	EBME Theatre PALS
Placement 2 (11 weeks) Near to home spokes	Discharge lounge GP practice OPD	MIU / UCC Treatment room Outreach teams
Placement 3 (11 weeks) At home spokes	District nursingAge concernHealth visitors	Nursing homes Domicilary services School nurses
Base placement (11weeks) Specialism spokes	MDT (meetings)Advanced nurse pratitionersPain team	Specialist nursing Dementia team Pharmacy
Year 2 Placement 5 (15 weeks) Child, LD & MH Near to home & At home	Mental health crisis services Mental health community outreach teams Community learning disability services	Intensive Home Support Service Hospice Community paediatric team
Placement 6 (15 weeks) Specialist / higher care spokes	Critical care Accident & emergency	Coronary care AMU A / AMU B
Final Base placement (15 weeks) Leadership / preparing to qualify spokes	Ward managerBed teamSafeguarding	Shift co-ordinator Complex discharge teams



Placement planner

ELHT

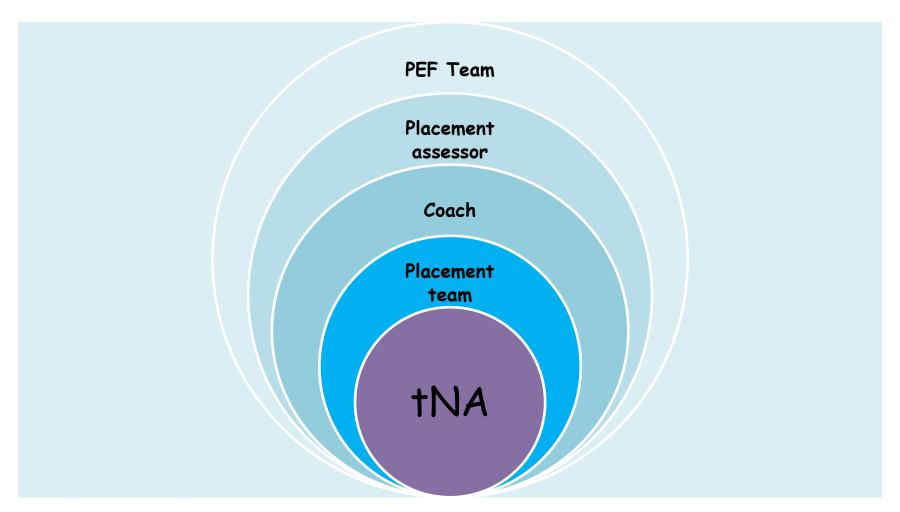
		Year 2											
Candidate	Placement 1	Placen	nent 2	Placement 3		Placement 4	Placement 5				Placement 7		
	Community1	Child	<i>C</i> 5	C2	C2	Comm1	MH/LD	D3	D3	Spp	B22	B22	Comm1
	Community2	C2	Child	D3	D3	Comm2	B22	MH/LD	B22	<i>C</i> 9	Spp	<i>C</i> 9	Comm2
	MFOP C9	Comm1	<i>C</i> 5	Child	C4	<i>C</i> 9	D1	D1	MH/LD	B24	B24	Spp	<i>C</i> 9
	<i>C</i> 9	<i>C</i> 5	Comm1	C4	Child	<i>C</i> 9	Spp	D1	D1	MH/LD	B24	B24	<i>C</i> 9
	<i>C</i> 9	Child	<i>C</i> 5	Comm1	C4	<i>C</i> 9	D3	Spp	D3	B22	MH/LD	B22	C9
	MFOP C5	C2	Child	D1	Comm1	C5	B24	B24	Spp	<i>C</i> 9	<i>C</i> 9	MH/LD	C5
	C5	MH/LD	C4	Child	D1	C5	Comm1	B22	B22	Spp	<i>C</i> 9	<i>C</i> 9	C5
	C5	C4	MH/LD	D3	Child	C5	B24	Comm1	B24	<i>C</i> 9	Spp	<i>C</i> 9	C5
	Gastro C2	Spp	D1	MH/LD	B22	C2	Child	<i>C</i> 9	Comm1	<i>C</i> 5	<i>C</i> 5	Spp	C2
	C2	D3	Spp	B22	MH/LD	C2	<i>C</i> 9	Child	<i>C</i> 9	Comm1	<i>C</i> 5	<i>C</i> 5	C2
	Gastro C4	D3	D3	Spp	B24	C4	MH/LD	<i>C</i> 9	Child	<i>C</i> 5	Comm1	<i>C</i> 5	C4
	C4	D1	D1	B24	Spp	C4	<i>C</i> 9	MH/LD	<i>C</i> 9	Child	<i>C</i> 5	Comm1	C4
	Endocrine D3	Comm2	B22	<i>C</i> 9	<i>C</i> 9	D3	Spp	<i>C</i> 5	MH/LD	C2	Child	C2	D3
	D3	B22	Comm2	<i>C</i> 9	<i>C</i> 9	D3	<i>C</i> 5	Spp	<i>C</i> 5	MH/LD	C2	Chi;d	D3
	D1	Child	B24	Comm2	<i>C</i> 9	D1	<i>C</i> 5	<i>C</i> 5	<i>C</i> 5	C4	MH/LD	C4	D1
	D1	B24	Child	<i>C</i> 9	Comm2	D1	<i>C</i> 5	<i>C</i> 5	Spp	C4	C4	MH/LD	D1
	Ortho B22	MH/LD	<i>C</i> 9	Child	<i>C</i> 5	B24	Comm2	C2	C2	D3	Spp	D3	B22
	B22	<i>C</i> 9	MH/LD	<i>C</i> 5	Child	B24	C2	Comm2	C2	D3	D3	Spp	B22
	Ortho B24	<i>C</i> 9	<i>C</i> 9	Spp	<i>C</i> 5	B22	MH/LD	C4	Comm2	D1	Child	D1	B24
	B24	<i>C</i> 9	<i>C</i> 9	<i>C</i> 5	Spp	B22	C4	MH/LD	C4	Comm2	D1	Child	B24

Nursing homes

	Year 1							Year 2										
Candidate	Р	lacement	1	Placen	nent 2	Placem	nent 3	Placement 4		Place	ment 5			Plo	acement	6	Place	ment 7
					D3		B22	MH/LD	Child				Comm1					
					C2		B24	MH/LD		Child				Comm1				
					B22		C2	MH/LD			Child				Comm2			



Supporting our tNA's





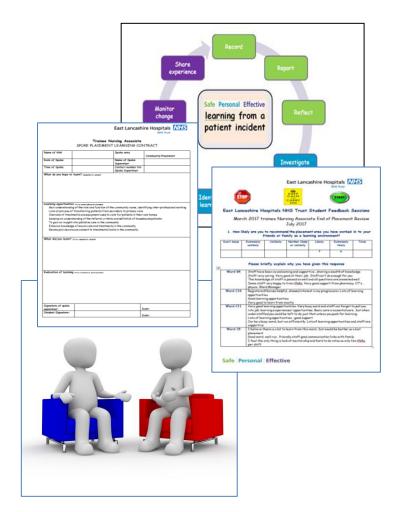
Situational Coaching

Telling / Directing style	and behaviours of coaching:	
Trainee Level	-	Mentor style
The trainee lacks the specific knowledge, skills or confidence to carry out safe and effective care in practice	Directing Coach	The mentor adapts to a directing / telling style of coaching Decisions are made by the mentor and communicated to the student Mentors monitor students very closely.
Participative / Supportiv	ve style and behaviours of co	aching:
Trainee Level		Mentor style
The trainee has some specific knowledge, skills but is not confident to carry out safe and effective care in practice	Supporting Coach	The mentor adapts to a supporting style of coaching Decisions remain the mentors prerogative, but communication is much more two way Mentors use coaching questions
Delegating style and bel	naviours of coaching:	
Trainee Level		Mentor style
The trainee is confident to carry out essential safe and effective care in practice & has developed the knowledge & skills required to underpin this care.	Delegating Coach	The mentor adapts to a delegating style of coaching The mentor facilitates and takes parts in decision making but control is mainly with the student The student is able and willing to decide when the mentor should be involved The mentor provides supervision and support when requested by the student.



Evaluating the programme

- Assessment of competence in every placement
- 12 week reviews, PDR &
 1:1's with PEF team
- End of placement reviews
- Reflection
- Placement manager feedback
- Weekly ward visits
- Patient stories





Patient stories

"If you ask them any questions, they always tell someone. You don't get the answer right away but they will always come back with the answer"

"Nothing is too much trouble"

"The TNA's are nice girls...Kelly & Vanessa talk to you not at you"

"Kelly spent time with me and listened to me, we got on so well, she was kind and caring" "I loved talking to Kelly; we had a long chat of when I was a girl. She was shocked, no T.V's only people who lived in posh houses had a TV. We chatted about where I worked and how I met my husband"



The future of our tNA's

- We hope to move to 2 cohorts per year
- Our qualified NA's complete the same preceptorship programme as our newly qualified nurses
- We offer a 2 year RNDA course for NA's to top up
- We hosted a listening event last week to ask our NA's how they wanted to develop in their current role

