National Delivery Plan for Children & Young People's Specialist Services in Scotland Year 1 Progress Report

Area: NHS Education for Scotland

Total money awarded: £210,700

Resource/activity	Key Elements	Year 1 Funding	Money Spent	Status	Comments
Infrastructure	Educational Projects Manager – Allied Health Professional	£33,300	£12,624.88	Appointed In post 6/4/09	Clinicians employed on a sessional basis to meet key deliverables prior to appointment being made.
	Educational Projects Manager - Team Leader	£33,300	£22,989.21	Appointed	Educational Projects Manager commenced in post November 2008
	Project Leader	£27,800	£6,595.20	Recruitment complete In post 18/5/09	Clinicians employed on a sessional basis used to meet key deliverables prior to appointment being made
	Project Officer Project Administrator	£31,300	£21,333.29	Recruitment ongoing	Project Officer appointed Nov 08 Recruitment delay of the Project Administrator post due to internal NES Agenda for Change issues Use of temporary agency staff as interim measure.
	Total	£125,700	£63,542.58		

Resource/activity	Key Elements	Year 1 Funding	Money Spent	Status	Comments
Consultancy, Sessional and Projects Costs	Psychology	£5,000	£5,000	Year 1 deliverables complete	
	E-Library portal	£10,000	£15,000	Year 1 deliverables complete	£10k requested in Business Case but additional £5K required. Funded from slippage as agreed at NDP IG in December 2008
	Medical subgroup	£25,000	£6,025	Year 1 deliverables complete	Difficulty in releasing staff for consultancy work resulting in a delay of spend. Main reason for underspend is goodwill of participants. Only fees for Associate Dean required
	Training Needs & Gap Analysis for Adolescent Care	£20,000	£16,967.50	Complete	External contract for this piece of work. VAT has been reimbursed to NES resulting in a slight under-spend
	Workforce intelligence database	£10,000	£2,875	Year 1 deliverables complete	Invoice reduced due to outstanding money from another NES Children and Young People's project being offset against this work by an external IT company
	Telehealth	£5,000	£5,000	Year 1 deliverables complete	Led by RRHEAL

Patient Focus Public Involveme (PFPI) Miscellaneous	£10,000	£4,794.13 £3,048.50	Ongoing	3 members of the NES Children and Young People's group resigned and work has slowed down.
Generic Skills		£14,000	On target	Original forecast for Generic Skills was £30k to be funded from slippage, as agreed at the NDP IG December 2009 However, due to NES Strategic Alliance with Skills for Health we have managed to come in considerably under budget.
Advanced Practic	ce	£40,000	Complete (ongoing support required)	Currently no appropriate courses available in Scotland for a paediatric advanced practitioner course. Meetings with ALL Scottish HEI's held to address this are ongoing. As an interim measure in year 1, NES have brokered funding between NHS Boards and the Scottish Government to fund 10 places at Liverpool John Moores University for a 3 year paediatric advanced practitioner course. Places at London South Bank University for a paediatric advanced practitioner course are being funded from NES.
Total	£85,000	£112,710.13		

Overall Total		£210,700	£176,252.71 *		
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^{*} Forecasted slippage reported to NDP Implementation Group in December 08 = £28,723. However, actual slippage is now standing at £34,447

Progress Report:

The NES specialist children's services staff are now in post and taking forward the key deliverables identified in the National Delivery Plan (NDP). An Educational Projects Manager – Team Leader has been in post since November 2008 and the Project Lead was appointed in May 2009. An Educational Projects Manager with a focus on Allied Health Professional started in April 2009. The NES Project Management System is being utilised to ensure that work is kept on target and meets governance standards. The team have been involved in coordinating and facilitating all of the projects relating to the NDP, ensuring that there is consultation and involvement with key stakeholders. It is important to note that all of the Business Case activities relate to the provision of educational support over the 3 years of the NDP funding and that each year has key deliverables to support implementation (NES Specialist Children's Services - Responding to the National Delivery Plan – Interim implementation plan 2008-9, June 2008).

	Business Case Activity	Key Deliverables Year 1	Progress Report
	The Way Forward – Furth	ner Work	
1	Identify support required in specialist service clinical areas other than those separately identified as priorities.	 Develop forward plan of education support for clinical areas addressing pattern and sustainability of current service models. 	While Cancer, Complex Respiratory & Cystic Fibrosis, Inherited Metabolic Disease and Rheumatology were identified as Year 1 priorities, links have been made to the other specialist areas to consider forward planning (eg: Palliative Care). The majority of Managed Clinical Networks (MCNs) have been allocated a NES representative. A number of the MCNs have not yet identified specific learning needs and may find the Year 2 educational toolkit which includes a Learning Needs Analysis Tool useful in completing this.
2	Build capacity in CYP psychological services.	 Establish a network of specialists in this field. 	A network of paediatric psychologists across NHS Boards has been established who are supportive in delivering training and supervision of non psychology staff working in Specialist Children's Services. A psychology post is currently in the recruitment process with funding from Year 2 to take forward educational developments.

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		 Build evidence base for skill mix in role redesign and identify educational solutions for the untapped pool of potential workforce. 	Educational support for staff with a variety of skills levels will focus on psycho-social interventions to improve adjustments to diagnosis, adherence to medical treatment and self-management. The outcome for the child, young person and their family will be to increase their independence and capacity for self-care ensuring care is provided as close to home as possible.
		 Provide benefit analysis of potential psychologist support to education and training of other clinicians, provide both consultancy and direct service delivery. 	A benefit analysis of psychologist support to education and training of other clinicians has been completed. This recognised how chronic health conditions impact on the child or young person's psychological wellbeing, including their family and social relationships. Intervening at an early stage aims to prevent future problems and also improve physical health outcomes.
		 Produce future work plan informing NDP years 2 and 3. 	Please refer to 2009/10 Business Case for plans for Year 2
3	Build Emergency Care capacity within health boards following completion of NES programme.	Extend on-site delivery of training (currently delivered by four clinical education health leads) by embedding skills and educational resources within Boards, providing sustainability and enhanced capacity, and linking to	No funding was received. This is being delivered through the NES Emergency Care project. Emergency Care not part of Year 1 NDP.

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		the patient safety agenda.	
4	Develop Allied Health Professional (AHP) roles, training and competencies in support of specialist services priorities.	Define roles and competencies for AHPs in support of specialist services priority areas	 Scoping of AHP roles, training and competencies has been completed. The 3 key strands are: 1. Existing education scoped at pre- and post-registration level for AHP's, both qualified and support workers, who are working with children and young people. This identified the limited availability of paediatric specific education for AHP's. 2. Development of a Learning Needs Analysis Tool (LNAT) for AHP's within Specialist Children's Services and identification of a pilot group. This work is in progress and will be taken forward as part of the AHP Paediatric Network. 3. Responding to the views of AHPs in practice, it is proposed to remove competencies from the deliverable and concentrate on the development of an educational toolkit.
		 Plan required development of education resources in NDP years 2 and 3. 	Please refer to 2009/10 Business Case for plans for Year 2
	Supporting Service Deliv	ery	
5	Support alignment of medical education with specialist services requirements.	 Evaluate alignment of medical guidance and training with current paediatric policy initiatives. 	Alignment of medical education has been investigated in conjunction with the RCPCH. Contacts have been established with the MCN's, Medical Directorate Executive Team and Royal Colleges to consider appropriate programmes for CPD.

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		 Identify educational requirements in support of succession planning. 	Educational requirements scoped by external consultant and recommendations proposed to newly appointed Specialist Children's Services Medical Subgroup and RCPCH. Both groups supportive of a coordinated programme for specialist paediatric CPD across Scotland. This will link with the NES Children's Services Managed Knowledge Network (MKN) development. Some MCNs are yet to identify some specific learning needs.
	Children's Cancer Service	es, CF, Inherited Metabolic	Diseases & Paediatric rheumatology
6 - 8	Establish required educational support for Children's Cancer Services, CF, Inherited Metabolic Diseases & Paediatric Rheumatology.	 Establish Managed Educational Networks supporting specialist teams at regional level. Evaluate CYP 	In discussion with Managed Clinical Networks, the establishment of a Managed Educational Network (MEN) was not viewed as best support for all areas. Work has commenced on identifying specific MCN learning needs supported by the ongoing development of the Year 2 educational toolkit, which includes a Learning Needs Analysis Tool. There is general agreement that the development of education and training should be multi professional and accessible for all staff caring for children and young people requiring specialist services. NES Specialist Children's Services Team have made contacts with the majority of MCNs and allocated a representative for each one. They will offer support for educational requirements. Report completed and links made with Children and Teenagers
		coverage in existing cancer framework	Scottish Cancer Network (CATSCAN) and Scottish Children and Young People's Palliative Care Network. This work also includes establishing a link to the NES "Living and Dying Well" project.

	Business Case Activity	Key Deliverables Year 1	Progress Report
		 Build evidence base of educational requirements for specialist nurses, GPs and Children's Community Nurses 	A needs analysis was undertaken during the development of a Children's Services Managed Knowledge Network and this will provide the focus of educational support for these practitioners.
		Identify educational priorities for future work in NDP Years 2 and 3	A scoping of educational needs was undertaken through the review of the draft NDP Year 2 bids for all regions and specialities. The outcome of the scoping has been discussed at the Children's Regional Planning Groups and it would appear that the key education needs encompassing all of the specialities are: - The need for the development of education for advanced practice for nursing and allied health professionals - Development of skills to care for adolescent patients - Need for increase in psychological capability and capacity in the wider workforce, particularly early intervention and support at diagnosis - Coordination of the current provision of education and training for all professions; this includes support to deliver education via the Managed Clinical Networks (MCN) Skills and resources to utilise telehealth and for the delivery of education.
	General Surgery of Child	lhood	
9	Support the enhancement of education in the field of children and young people in surgical	 Investigate inclusion of general surgery of childhood as a mandatory element of core training in general 	The Paediatric Speciality Training board and the Surgical Speciality Training Board have been involved in discussions to identify training opportunities in surgical paediatrics which would enable a trainee to develop an interest in general surgery of childhood. The programme directors agree that training can be provided if the demand is there.

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	training.	 Identify requirements and structure for CPD of surgeons, anaesthetists and AHPs involved in the general surgery of childhood. Establish medical subgroup in support of 	Discussions have been held with general and paediatric surgeons to consider a way forward however, it is clear that this would require significant "buy in " from service colleagues before trainees in general surgery will see the benefit in undertaking general surgery of childhood. If this agenda is to be taken forward there needs to be close working with the Children's Regional Planning Groups to identify need. An exploratory meeting of interested paediatricians, paediatric surgeons and anaesthetists has been held in order to support and direct Fiona Drimmie, Associate Dean who is leading on this work. AHPs scoping work has not identified any educational needs specific to AHPs who work in general surgery of childhood. Their role is part of a wider AHP remit. A medical subgroup was established in November 2008.
10	Role of networks Establish e-Library portal	these deliverables. Deliver knowledge	An E-Library portal and website has been established for Children's
	for CYP	portal in support of specialist services networks and individual practitioners.	Services. The main feature of this will be the Managed Knowledge Network (MKN) which will support learning and enable practitioners to access, share and use knowledge based education online. Sections for specialities are being created by "Communities of Practice" and the 4 initial specialist areas are:

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			(Children and Teenagers in Scotland Cancer Network (CATSCAN), Cystic Fibrosis, Inherited Metabolic Disease and Gastroenterology). A needs analysis was undertaken between December 2008 and February 2009 through interviews, questionnaires and a consultation event and the findings have been used in the MKN development. The MKN will provide the following opportunities for stakeholders: - Access to key resources and websites - Topic links to browse tailored searches of full e-Library resources - Addition of local documents accessed via the resource library - Links to Managed Clinical Network websites - Links to NES delivery targets and work strands - Development of subjects for a wiki - Development of topic areas for discussions Year 2 will involve expanding the "Communities of Practice" and user groups. AHP's, Complex Needs and Palliative Care have expressed an interest for their communities to be developed next.
11	Drive effective use of Telemedicine tools	 Produce diagnostic methodologies required to support education for Specialist Services through Telemedicine. 	Remote and Rural Health Alliance (RRHEAL) have been working with Scottish Centre for Telehealth in order to plan training days for those staff involved in Caring for Children & Young People in Remote & Rural areas with a focus on Specialist Children's Services.
		 Identify priorities for development of training in NDP years 	Please refer to 2009/10 Business Case for plans for Year 2

	Business Case Activity	Key Deliverables Year 1	Progress Report
		2 and 3.	
12	Develop AHP networks.	 Establish AHP educational children's networks to support delivery of SCS 	Findings from the scoping exercise to identify existing AHP paediatric networks found that there are no educational networks across Scotland for AHP's in CYP services. Year 1 work has concentrated on the establishment of a AHP paediatric network due for implementation in 2009/2010
13	Review and align educational networks across all priority specialist service areas.	Identify and establish educational networks in support of priority areas.	The AHP Paediatric network and Children and Young People's Advanced Practitioner network are in development but have taken longer to establish due to the limited information available. To be implemented in Year 2. In relation to this activity, it became clear that it would not be possible to establish Managed Education Networks as each specialist area
		Identifying future potential for Managed Educational Networks to support specialist services.	and MCN were at different stage of planning and development. NES Specialist Children's Services team have made contact with the majority of the MCN's and allocated a representative for each one. They will offer support for educational requirements. Year 2 will include the development of an Educational Toolkit which will include a Learning Needs Analysis Tool.
	Workforce		
14	Workforce capacity building.	Identify requirements for training and education for nursing and AHP staff in SCS.	A key need in increasing workforce capacity is the demand for education for advanced practice for nurses and AHP's. A scoping exercise of paediatric advanced practice has been completed and this highlighted the wide range of job profiles and titles in use across children and young people's services. A meeting was held with the Scottish Higher Education Institutions (HEI's) where it became clear that no appropriate educational provision is currently available in

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		Scotland for paediatric advanced practice. NES is establishing a succession planning cohort of potential Advanced Practitioners in Children's Services linked to the SGHD Advanced Practice Toolkit. The Toolkit supports the process for the implementation of Advanced Practice. It provides a comprehensive approach encompassing definitions, job profiles and KSF outlines, agreed national competencies, education and credit to the NHS Career Framework, as well as exploring the broader governance and regulation issues. This is an alternative work based route for moving into advanced practice posts. The Paediatric Advanced Practice Succession Planning Pathway will include nurses and allied health professionals.
		In the meantime, NES has brokered Scottish Government Health Directorate (SGHD) funding to Health Boards for a cohort of 10 students to undertake the Liverpool John Moores University, Paediatric Advanced Nurse Practitioner masters programme. In addition, two students are being funded by NES to undertake Advanced Practice education at London South Bank University, which provides education appropriate to specific service needs identified by RHSC in Edinburgh and Glasgow.
		Meetings with Scottish Higher Education Institutions (HEIs) continue.
	 Scope required range of CPD programmes to support medical and surgical staff working within specialist children's services. 	This deliverable overlaps with numbers 5 & 9 and was incorporated into the work of the NES Specialist Children's Services Medical Subgroup detailed at number 5.

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		 Map educational requirements for Nurses/AHPs in clinical leadership, advanced and consultant support roles. 	The AHP scoping exercise suggests that the Advanced Practice role/Consultant Practitioner role development would meet wider AHP agendas across all CYP sectors.
		 Develop support worker agenda at assistant practitioner level to support skill mix in specialist services. 	Capability Framework for Senior Healthcare Support Workers and Assistant Practitioners working with Children and Young People completed. Pilot course at Robert Gordon University running with first cohort focusing on School Health and second on Specialist Children's Services (2009/10), which will include the recruitment of AHP Support Worker staff.
15	Maintain intelligence on the level and distribution of appropriate skills in the NHS workforce.	 Progress from completed pilot phase of skills database to encompass specialist services workforce intelligence across NHS Scotland. 	Educational data has been collated for Allied Health Professionals working in specialist children's services and Advanced Paediatric Nurse Practitioners. It will be added to the national database developed to support the Emergency Care Framework but now being adapted to be used for Specialist Children's Services.
16	Evaluate required educational support for all other priority areas in specialist services.	 Define new AHP roles in support of priority action areas in specialist services. 	This deliverable was incorporated into the workplan for all AHP deliverables and overlaps with update number 4.
		 Plan further work required to support priority specialty services in NDP years 2 and 3. 	Please refer to 2009/10 Business Case for plans for Year 2

	Business Case Activity	Key Deliverables Year 1	Progress Report
17	Package generic skills training resources providing base level of skills on which to build specialist.	 Produce online resource in generic skills available to all health care staff, providing baseline for specialist care training. 	In order to produce a robust set of skills, it was necessary to refresh the mapping of Scottish stakeholder responses to the current work in England and Wales on generic skills. This has resulted in a bigger piece of work than was anticipated and will be available for consultation in autumn 09. This deliverable has the potential to apply more widely than Specialist Children's Services.
	Improving Quality – Performance Management		
18	Build capacity for stakeholder involvement for Children and Young People.	Provide evidence- based model for continuous engagement with CYP stakeholders in specialist services.	The NES Young People's Public Partnership Forum is a group of young people supported by the NES Children and Young People's team. They have been involved in all interview panels for new posts to support Specialist Children's Services deliverables. They are currently working on revising a 'Best Practice Guide' for consulting with children and young people which has been designed and contracted out in collaboration with Scotland's Commissioner for Children and Young People. This is due for completion in summer 2009.
	Age appropriate care		
19	Training needs analysis in support of age appropriate care for adolescent patients.	Deliver Training Needs Analysis to inform future educational solutions.	A training needs and gap analysis (TNA) for staff working with adolescent patients was externally commissioned and is complete. The results of this will inform the development and content of a multi-disciplinary training package for all healthcare practitioners working with adolescents. The key learning needs based on the analysis of all data were: • legal/ethical framework • mental health

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		 chronic conditions and transitions (health board feedback also emphasised the need for training in relation to transitions in particular) communication and consultation with young people substance use and misuse
		 In Scotland it is clear that there is not a comprehensive and coordinated approach to the provision of learning and development for staff working in this area. Different staff groups and levels of staff have varying levels of need: the framework must be flexible enough to provide learning and development appropriate to the different groups and levels. Learning and development should be targeted so that those who may actually come into contact with adolescents are those who receive it. The Royal College of Paediatrics and Child Health (RCPCH) "Adolescent Health Project" curriculum provides a comprehensive starting point in the development of courses and modules which could inform future development and discussions have been held with the Scottish Chair of the RCPCH re the way forward.
	 Produce programme of priorities for NDP years 2 and 3. 	Please refer to 2009/10 Business Case for plans for Year 2 NES will continue to work with key stakeholders to take forward the
	Z aliu 3.	recommendations of the training needs and gap analysis in 200

Biggest Success:

The biggest success in year 1 has been the recruitment of high calibre staff to new Specialist Children's Services (SCS) posts at NES. The main effect of this is improved external communication which in turn has contributed to a greater understanding of what education is required and what support is considered to be the most useful. In particular, regular NES representation at the Children's Regional planning Groups and Managed Clinical Network meetings and the establishment of regular meetings with NSD have contributed to closer working and greater understanding of constraints and limitations. This face to face communication has been augmented by the establishment of an e - library portal for SCS and the piloting of a number of "communities of Practice" which offer e - communication and educational support. Once again, the success of this activity is due, in the main, to the enthusiasm and clinical and educational expertise of staff.