

<b>Institution:</b> Northumbria University at Newcastle		
<b>Unit of Assessment:</b> 3 (Allied Health Professions, Dentistry, Nursing and Pharmacy)		
<b>Title of case study:</b> Developing a competent workforce to care for older people with complex needs		
<b>Period when the underpinning research was undertaken:</b> 2015 – 2020		
<b>Details of staff conducting the underpinning research from the submitting unit:</b>		
<b>Name(s):</b>	<b>Role(s) (e.g. job title):</b>	<b>Period(s) employed by submitting HEI:</b>
Juliana Thompson	Senior Lecturer	05/11/2011 – Present
Sue Tiplady	Senior Lecturer	03/05/2011 – Present
Glenda Cook	Professor	01/11/1989 – Present
Phil Hodgson	Lecturer	01/11/2009 – Present
Anne McNail	Associate Professor	01/07/1987 – 30/06/2019
Anne Hutchinson	Senior Lecturer	01/10/2012 – Present
Carole Proud	Senior Lecturer	01/12/1994 – Present
Jane Murray	Senior Lecturer	02/01/2008 – Present
<b>Period when the claimed impact occurred:</b> 2015 – 2020		
<b>Is this case study continued from a case study submitted in 2014? N</b>		
<b>1. Summary of the impact</b> (indicative maximum 100 words) <p>With an ageing population, there is an urgent need to develop the workforce to be competent to care for older people with complex needs. Northumbria University research has identified priority areas for competency development to ensure standardised, high-quality care for older people across all health, voluntary and social care sectors. This research has led to the widespread implementation of a workforce competency development strategy, which includes new job roles to lead competence improvements across the sectors. The research has also led to significant improvements in gerontological education, in the form of internship placements and service user involvement to provide dynamic and authentic learning environments. This has resulted in improved competency in current staff and graduating nurses, which in turn has improved quality of care and quality of life for older people.</p>		
<b>2. Underpinning research</b> (indicative maximum 500 words) <p>As the population ages, health and social care services are increasingly required to care for older people with complex and unpredictable conditions, including cognitive impairment, limited mobility, multi-morbidities, frailty, high levels of dependency and end of life care. However, the workforce does not always have the skills, knowledge and competence required to manage this increased complexity, and provide consistent high-quality care. It is essential to understand what competencies are required to care for older people, and make sure competency is standardised across the gerontology workforce to ensure high quality, effective care. Newcastle Gateshead Clinical Commissioning Group (NGCCG) funded Dr Juliana Thompson and Sue Tiplady from Northumbria University to undertake three, interrelated, collaborative action research studies (total funding GBP65,002 [G1-G3]) to investigate and support development of the local gerontological workforce as part of their Enhanced Health in Care Homes (EHCH) integrated care programme.</p> <p><b>2.1. Establishing key competencies</b></p> <p>Northumbria researchers used a collaborative action research approach to evaluate the EHCH programme in Gateshead Care Homes. This model links General Practitioners (GPs) and Older People Nurse Specialists with specific care homes and establishes regular, patient-centred, multidisciplinary team meetings, which include care home staff. A series of interviews (n=38) and two workshops (28 participants) demonstrated how team-working between GPs, Older People Nurse Specialists, and care home staff – with access to specialist advice when required – leads to proactive and effective care and an increased quality of life for patients. The findings also highlighted the support and infrastructure required to do this effectively [R1]. However, the research also identified that the sustainability of the model depended on developing and maintaining key workforce competencies, which need to be standardised across all</p>		

organisations and professions, and that this could be achieved through the establishment of a Workforce Competency Framework (WCF) for gerontological care [R1].

## 2.2. Participatory design of the Workforce Competency Framework

Northumbria researchers undertook an extensive critical analysis of the peer reviewed, organisational and policy literature on professional competency pertinent to the care of older people. This included existing competency frameworks, regulated qualification frameworks, policy directives and job descriptions for roles relevant to the care of older people. They also observed, over a six-month period, weekly NGCCG workforce planning meetings, attended by representatives from all professions, and health, local authority, private and voluntary organisations providing gerontological care across the region. The analysis of these two data sets led to the development of a draft standardised WCF. The framework is applicable to all care professionals working at essential, specialist and advanced levels across all health and social care service organisations.

Competencies were classified within four domains: (i) Values and Attitudes (ii) Collaboration, Co-operation and Support (iii) Leading, Organising, Managing and Improving Care, and (iv) Knowledge and Skills for Care. The draft WCF was refined through workshops with 65 representatives from: NHS primary and secondary care services; local authority, private and voluntary sector services; clinical educators, education and training providers; and older service users. This led to the finalised WCF, known as the Enhanced Care of Older People (EnCOP) framework – the first standardised competency benchmark for the provision of effective, integrated care for older people which has been formally implemented into practice across all types of service providers [R2].

## 2.3. Piloting EnCOP with the current workforce

Cook, Thompson and Tiplady piloted EnCOP in two sites. Participants were staff involved in care for older people living in care homes in these sites: primary and community, medical, allied health, nursing, and care assistant staff. A competency gap analysis, involving a survey (n=36) and observations of practice (n=71), identified priority areas for workforce development. Within the four domains of EnCOP, priority areas included subdomains of: collaborative working and support; developing strong leadership for workforce development; developing the staff knowledge base in frailty, managing multi-morbidity, recognising deterioration; and interprofessional and interagency communication. Further, an additional survey (n=36) and interviews (n=29) identified the key facilitators and barriers to addressing the competency gap and meeting the benchmark WCF (Tiplady et al. [doi.org/10.1101/2021.01.21.21250213](https://doi.org/10.1101/2021.01.21.21250213)). Employing Strategic Workforce Development Leads for Older People – to build cross-system infrastructure and capacity for practice-based learning and assessment – was recommended [R3].

## 2.4. Embedding research to build competency in the future workforce

Finally, the team incorporated these research findings [R2] into the pre-registration nursing curricula at Northumbria University (Modules: 'Values and principles for nursing people in later life' and 'Enhancing the care of older people in contemporary society'). They also established internship and initiated the involvement of older people in the delivery of the curriculum. The Service User Participation and Engagement in pre-Registration (SUPER) Adult Nurse Education project invited older service users to contribute to pre- and post-registration education of health and social care professionals by narrating their experiences of illness and care; discussing their participation in a wellbeing initiative; and participating in standardised patient simulation where they role-play patients, offering learners the chance to practice patient assessment skills in an authentic way and setting. A student evaluation survey (n=322) and interviews with both students and older people showed that this approach enhanced student understanding of older people's integrated care needs and improved the quality of life for the older people participating in the initiative. This project is unique as previous studies of service user involvement in education have not focused specifically on older people [R4, R5].

In 2016 Thompson, Proud and Tiplady developed and incorporated a third-year integrated health and social care student internship for caring for older people with complex needs into the Northumbria programme, with learning objectives aligned with the WCF. This was developed in collaboration between the university, care home and NHS primary care staff, and uniquely provides students with a cross-organisational, cross-sector experience. The evaluation showed an improved ability to care for older people and was a catalyst for closer working relationships between health and social care sectors and organisations [R6].

### 3. References to the research (indicative maximum of six references)

**R1. Glenda Cook, Anne McNall, Juliana Thompson, Philip Hodgson, Shaw, L., and Cowie, D. (2017)** 'Integrated working for enhanced healthcare in English nursing homes' *Journal of Nursing Scholarship* **49** (1): 15-23 <https://doi.org/10.1111/jnu.12261>

**R2. Juliana Thompson, Sue Tiplady, Anne McNall, Jane Murray, Glenda Cook, Philip Hodgson, and Bainbridge, L. (2018)** 'A workforce competency framework for enhanced health' *Nursing and Residential Care* **20** (4): 153-157 <https://doi.org/10.12968/nrec.2018.20.4.153>

**R3. Juliana Thompson, Sue Tiplady, Anne McNall, Glenda Cook, and Courtney, L. (2018)** 'An integrated system based approach to workforce development for Enhanced Care for Older People with Complex Needs' Report to the NHS Newcastle Gateshead Clinical Commissioning Group <http://frailtyicare.org.uk/making-it-happen/workforce/enhanced-care-of-older-people-with-complex-needs-encop-competency-framework/>

**R4. Juliana Thompson, Sue Tiplady, Anne Hutchinson, Glenda Cook, and Harrington, B. (2017)** 'Older people's views and experiences of engagement in standardised patient simulation' *BMJ Simulation and Technology Enhanced Learning* **3**: 154-158 <http://nrl.northumbria.ac.uk/id/eprint/30475/1/BMJacceptedcopy.pdf>

**R5. Juliana Thompson, Sue Tiplady, and Glenda Cook (2020)** 'Older people's involvement in healthcare education: views and experiences of older experts by experience' *Working with Older People* <https://doi.org/10.1108/WWOP-01-2020-0003>

**R6. Sue Tiplady, Juliana Thompson, and Carole Proud (2018)** 'A collaborative approach to developing student placements in care homes' *Nursing Older People* **30** (1): 20-25 <https://doi.org/10.7748/nop.2018.e1007>

### Research Funding

G1. Newcastle Gateshead Clinical Commissioning Group, 2015-16, GBP14,574

G2. Newcastle Gateshead Clinical Commissioning Group, 2016-17, GBP14,866

G3. Newcastle Gateshead Clinical Commissioning Group, 2017-18, GBP35,562

### 4. Details of the impact (indicative maximum 750 words)

The development of the Enhanced Care of Older People (EnCOP) Workforce Competency Framework (WCF) for caring for older people by Thompson and Tiplady has led to (i) improved competency of the workforce (ii) improved competency of the future workforce, stimulating interest in nursing careers in this sector, and (iii) improved outcomes for older people.

#### 4.1 Improved competency of the current workforce

As a direct result of the research recommendations, two full-time (FTE: 2) EnCOP Strategic Workforce Development Leads for Older People have been employed to deliver the research recommendations regarding workforce capabilities across the North East and North Cumbria. The posts, funded by the North East and North Cumbria Workforce Transformation and Strategy Board [E1, E2], were recruited by NGCCG in partnership with the Academic Health Science Network (which hosts the Ageing Well regional group, tasked with scaling the EHCH programme). Other partners include six NHS Trusts, a home care provider, and a local authority. The posts were recruited to in April 2020, with appointments postponed to September 2020 as a consequence of the coronavirus pandemic. The Strategic Leads drive the implementation of the WCF and facilitate EnCOP workforce development. For example, they ensure EnCOP is delivered effectively through the development of appropriate policies and monitoring of

outcomes. In addition, two Clinical Quality Care Home Lead Nurses have been employed by NGCCG to develop the care home workforce along EnCOP lines (headcount: 2, FTE: 2) [E1].

The identification of priority areas for workforce development has also informed and helped to shape masterclasses (funded by Health Education England) for health and social care staff who work with older people. To date, six have taken place, with 90 participants comprising care home managers, care home staff, and NHS staff from elderly care wards. Written feedback from participants demonstrated that these masterclasses have had a direct impact on the healthcare practice of attendees. For example, a regional manager from a care home provider company confirmed: *'those attending [from our company] felt they had a much greater understanding of sepsis / delirium which would benefit clinical decisions on the front line'* [E3]. As a result of the masterclass, key changes to communication, baseline observations, and frailty policy and practice are being implemented by this company [E3].

#### 4.2 Improved competency of the future workforce

To date, 21 senior (third year) nursing students have completed the internship devised by Northumbria [R4; E4, p7]. Students are based in a care home but work with the NHS at strategic and frontline levels. The internship model has since been adopted by the five NHS Trusts and four CCGs providing placements for Northumbria University students (Northumberland, Newcastle, Gateshead, Sunderland, and South Tyneside), as well as East Lancashire and Leeds North CCGs [E4, p7]. Evaluation showed students had enhanced their knowledge and understanding of multimorbidity, frailty, and dementia, and the complexity of care needed to manage people with these conditions; and developed skills and confidence in autonomous working, leading and managing care delivery, as well as enhanced understanding of the complexities of the integrated health and social care sector [E5, p3]. It also showed improved inter-organisational working and learning for staff, as well as students. The internship programme was awarded a Cavell Nurse Star Award in 2019 for services to older people's care [E6]. One Northumbria student was shortlisted for the Royal College of Nursing's student nurse of the year award for 2019 because of her engagement with the internship [E6], going on to join the steering committee of the Royal College of Nursing (RCN) Older People's Nursing Forum. As a result of this success, care home placements are now also offered to first and second year nursing students on the course. To date, 90 care homes have provided placements for 1,009 students, and 107 GP practices have provided placements for 1,125 students who would not have otherwise worked in this sector [E4]. The Clinical Quality Lead for North Tyneside Clinical Commissioning Group has confirmed that the internship and subsequent placements have helped care home nurses *'raise standards of care and increase the number of mentors available within the care home setting'* while the internships have *'helped with staff recruitment and retention into this area of nursing practice'* [E7, p1]. This led to the decision to employ a Practice Supervisor to support learners in their placements [E7, p2].

Student nursing in this sector has also been enhanced by the SUPER project, which has advanced student understanding of person-centred integrated care for older people. To date, 2,000 students have used the SUPER model and been exposed to the health, social, and transition care needs of older people [E8, p1]. A study exploring the experiences of older service-users and students of SUPER and a testimony from Equal Arts, which supports the wellbeing initiative of SUPER, reported that it has been effective and had a lasting impact on students' attitudes to caring for older people, leading to positive change to their practice, and impacting on career choices [E8]. Feedback from past students regarding the wellbeing initiative aspect of the SUPER project includes: *'[This is] the reason I became interested in caring for older people and why I do the job I do now [older people's nurse]'* and *'[Older people] came to Northumbria Uni when I was in my second year of nursing. It's a lecture I'll never forget, and I've been a qualified nurse for four and a half years now'* [E8, p8].

#### 4.3 Improved outcomes for older people

The study explored the experiences of service-users as well as students participating in SUPER [E8, E9]. SUPER enhanced quality of life for older service-users as it provided them with opportunities to contribute to improved care practices, a sense of purpose, and promoted their

feelings of being included and being valued by society. One SUPER service-user participant said: *'[It gives] the chance to try and influence the way that students are taught and put things right ... When I was 65, I didn't want to stop working. I had to. It's nice that I don't have to stop working. I can get up and come and do things. It's the fact that you're putting something back, you know. And you are acknowledged as doing that, and people appreciate what you do'* [E9, p4-5].

In addition to these direct benefits, NGCCG has confirmed that research provided by Northumbria University during the evaluation of the EHCH programme *'massively supported our approach and influenced the development of the care pathways without doubt'* [E10]. The implementation of these new care pathways and local systems have led to improvements in key metrics regarding the care of older people living in care homes, including decreases in 999 calls, decrease in A&E attendance, fewer non-elective admissions (34.7% for urinary infections and 16.6% for chest infections), and a reduction of GBP41,000 in spending on low-dose antipsychotics [E10].

#### 5. Sources to corroborate the impact (indicative maximum of 10 references)

Ref.	External Corroboration	Link to Impact
E1	Testimonial - L. Bainbridge Clinical Lead 'Care Closer to Home' programme (North Cumbria, North East, Richmondshire, Hambleton & Whitby)	Confirms the impact of studies on policy, practice and outcomes, regionally and nationally; on influencing sustained change, and development of senior roles/structures to implement change
E2	Job description for Strategic Lead Workforce Development Officer: Older People	Confirms that recommendations in the research led to new senior roles created to deliver EnCOP competency support
E3	Testimonial – D. Winter, Area Support Manager, Gainford Care Homes	Confirms changes to company practice/policy resulting from attendance at masterclasses
E4	Numbers of care homes and GP practices offering student placements and internships; numbers of students placed; locations of internships	Demonstrates the reach of the care home internship and care home and GP practice placement initiative
E5	S. Tiplady et.al. (2018) 'A collaborative approach to developing student placements in care homes' Nursing Older People 30 (1): 20-25	Reports findings from an evaluation of the student internship, demonstrating positive impact on integrated care practice. Also R6
E6	'Nursing Student Internship Programme Wins Award' (Oct 2019, Northumbria University)	Corroborates Cavell Nurse Star Award for services to older people's care; student intern shortlisted for the Royal College of Nursing 'Student nurse of the year' award
E7	Testimonial - Clinical Quality Lead Nurse, North Tyneside CCG; Practice educator role job description	Confirms the student internship is raising standards of care, led to the development of practice educator roles, and is supporting the recruitment of staff
E8	Student numbers accessing SUPER, and student evaluation of SUPER	Reports findings and testimonials from SUPER evaluation, demonstrates impact on student outcomes
E9	J. Thompson et.al. (2020) 'Older people's involvement in healthcare education: views and experiences of older experts by experience' Working with Older People	Reports findings and testimonials from the SUPER evaluation, demonstrating impact on QoL of older people involved. Also R5
E10	a) Testimonial - Lead Nurse Frailty and Integration, NG CCG b) Statistics extracted by NG CCG from NHS England's metrics dashboard	Confirms research contributed to the improvement of care pathways and local systems, which led to improvements in care of older people living in care homes