Written evidence from Barts Health NHS Trust

Thank you for taking the time to visit Barts Health NHS Trust and members of the North East and North Central London nursing associate test sites last Thursday. We were extremely grateful that you took the time to listen to our feedback about this important new nursing role and we hope you found it useful in the context of your inquiry.

Following our discussion, we thought it would be helpful to outline some of our key feedback as well as the challenges providers are facing with the expansion of the nursing associate workforce.

As you are aware, the nursing associate will bridge the gap between healthcare assistants and registered nurses in England. The role has been designed and developed to meet the specific needs of the nursing workforce and the decision for the Nursing and Midwifery Council to regulate Nursing Associates is based on the specific risk profile of the role. The Nursing Associate is predominately a resource for adult services and the pilot programme is supporting us to define and clarify the scope of the role.

The North East London pilot test site has 124 nursing associate trainees who commenced the two-year training programme in early 2017. The programmes are progressing well with positive outcomes being reported by both trainees and managers. We are committed to continuing to work with Health Education England and our other partners to make sure the expansion of the role is implemented safely and in a way which benefits the broader nursing workforce. If done so we believe there are numerous ways the role could help transform the workforce, offering career development opportunities and flexibility in how providers compliment the care given by registered nurses.

However, the landscape of practice settings across our patch is complex and evolving and this has both benefits and challenges for organisations. With this in mind, it is vital that the right environment and tools are provided to support, develop and embed nursing associates into everyday practice.

We believe there are three main challenges for providers.

1. **The delivery of the nursing associate programme using the apprenticeship pathway.**

   Currently the levy can only be used for education and training and not to support the trainee’s salaries. If the levy were to be able to be utilised in a flexible way, potentially for an introductory period of 2 or 3 years this would enable organisations to test the benefits of this route without sacrificing other priorities.

2. **Providers need to develop a sustainable financial model for the future, training nursing associate is not cost neutral for providers.**

   Trainees are released from their workplace for 2 days a week with no backfill or infrastructure support provided, this model does not allow organisations to provide assurance of sustainability in workforce modelling.

3. **Nursing associates are not included in safe staffing guidance.**
This guidance ensures patient safety and quality of care across different clinical settings by having the right nursing staff with the right skills and knowledge in the right places. Inclusion of the nursing associate in this guidance would allow providers to make the best possible use of this role.

Finally, it is imperative that the nursing associate is regulated to ensure the role is fully utilised. Completion of the consultation on regulation and securing of legislation time should be prioritised. Once this happens we can then be confident in how the nursing associate and registered nurse’s scope of practice aligns.

Once again thank you for both your visit and also for affording me the opportunity to share some of our current challenges in developing the nursing associate role within our workforce profiles. It is certainly a role we need and we support. Please do let me know if you would like any further information about any of these issues, and in the future you would be more than welcome to visit us again and see some of our services in action.

Best Wishes

Caroline Alexander
Chief Nurse