

Nursing and Midwifery Task Group

Next Steps Framework – A Three Phased Approach

2020 - 2026

1.0 IMPLEMENTATION CONTEXT:

This plan sets out the key actions required to deliver the recommendations of the NMTG and reflect a new vision / ambition to maximise the contribution of nursing and midwifery, which can be used to guide decision making and measure progress. The recommendations of the task group aim to create the conditions for nursing and midwifery services, to develop and be co-designed to deliver the right evidence based care, with the right numbers, at the right time, in the right place, by the right person, with the right knowledge, and of course most importantly delivering the right outcome and experience for people, families and their communities.

The actions in this plan have been prioritised and modelled on the NMTG 'SAFE' principle;-

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Stabilising

the nursing and midwifery workforce, therefore ensuring safe and effective care. A

Assuring

the public, the Minister, the Department of Health (DoH) of the effectiveness and impact of person centred nursing and midwifery care. B

Facilitating

the adoption
of a population
health approach
across nursing
and midwifery
practice, resulting
in improved
outcomes for
people across the
lifespan.

B

Enabling

the
transformation
of HSC service
through
enhancing the
roles of nurses
and midwives
within and across
a wide range of
MDTs/services.

Whilst the primary aim of the NMTG was to develop a ten to fifteen year road map, this plan adopts a three phased approach aligned with strategic themes outlined in the NMTG report.

STRATEGIC THEME 1:

The adoption of a population health approach, through putting public health, prevention and early intervention at the heart of nursing and midwifery practice.



Stabilisation of nursing and midwifery workforce therefore ensuring safe and effective care.

STRATEGIC THEME 3:

Transformation of Health and Social Care Service through enhancing the roles that nurses and midwives will play within and across multi-disciplinary teams.



In line with the Minister's commitment, the plan has also been fully costed and a number of the recommendations have been identified for funding as set out in the 'New Decade, New Approach' Framework and Executive Commitment. These commitments will form part of phase one of the implementation of this plan. It is important to note the pace of implementation will be determined by the budget outcome for DoH, and all subsequent phases will require further strategic prioritisation and resource planning, this will also include the release of resources through efficiencies and transformation.

It is proposed that in 2026 this plan will be refreshed with a new five year strategic action plan, which at that stage, reflects population health needs, new political and policy mandates as well as new ways of working. The NMTG implementation plan and the development of a new Nursing and Midwifery Strategy will be overseen by the Chief Nursing Officer (CNO) in partnership with Central Nursing and Midwifery Advisory Committee (CNMAC) and in partnership with trade unions. Please note the actions outlined are indicative and may be subject to revision. In addition costs quoted in the following tables should be noted as indicative and accumulative.

2.0 STRATEGIC THEME 1

Maximising the contribution of nursing and midwifery to deliver population health and wellbeing outcomes.

(*Recommendations identified for funding under 'New Decade, New Approach' and Executive Commitment)

			WHAT IT WILL COST AND BY WHEN						
			Phase 1		Phase 2		Phas	se 3	
NMTG RECOMMENDATIONS	WHAT WE WILL DO	WHAT THIS WILL MEAN	20/21	21/22	22/23	23/24	24/25	25/26	
Put in place a new population health management programme for nursing and midwifery.	Develop a new public / population nursing & midwifery framework & develop a population health practice development programme.	Annually 1,000 nurses / midwives trained in Public Health Care.		£60K	£61K	£63K	£64K	£65K	
2. The creation of dedicated Population/Public Health Advanced Nurse and Consultants	* Recruit a Regional Public/ Population Health Nurse /Midwife Consultant lead.	16 WTE Public Health Practitioners resulting in improved public health outcomes.	£70K	£102K	£104K	£106k	£108K	£110K	
				£426K	£434K	£443K	£452K	£461K	
			£55K	£110K	£749K	£761K			
3. Increase the number of school nurses, health visitors and expand	Recruit additional Schools Nurses.	157 WTE Early Years nursing resulting in better	£289K	£799K	£1.2M	£1.6M	£2.0M	£2.5M	
the Family Nurse Partnership programme across all of NI.	* Implement Delivering Care Phase 4 Health Visiting.	outcomes for children young people & families.		£520K	£1.0M	£1.6M	£2.1M	£2.6M	
	Roll out Family Nurse Partnership.		£295K	£784K	£1.1M	£1.4M	£1.8M	£2.2M	
4. Recognising the demographic trends, nursing should co - lead the development, planning and	Recruit Older Persons Nurse Consultant Leads in each HSC Trust.	30 WTE Older people nurses – resulting in improved health care		£360K	£367K	£374K	£382K	£389K	
management of older people services including nursing care commissioned in the independent sectors.	Enhance Community District & Specialist Nursing Home In-reach Services.	across older people services.	£248K	£505K	£773K	£1.1M	£1.3M	£1.4M	
Total – Strategic Theme 1			£902K	£3.6M	£5.1M	£6.8M	£9M	£10.5M	

3.0 STRATEGIC THEME 2

Maximising the contribution of nursing and midwifery to deliver safe and effective person and family centred care.

(*Recommendation identified for funding under 'New Decade, New Approach' and Executive Commitment)

			WHAT IT WILL COST AND BY WHEN						
		1	Pha		Phas	se 2	Pha	se 3	
NMTG RECOMMENDATIONS	WHAT WE WILL DO	WHAT THIS WILL MEAN	20/21	21/22	22/23	23/24	24/25	25/26	
Develop a person centred policy framework for all nursing & midwifery	Commission the development of Person Centred Digitalised Pathway.	6 WTE leads & new digitised person centred app.		£260K	£319K	£326K	£332K	£338K	
Sustaining a minimum of 1000 undergraduate nurse & midwife placements for next five years until a position of oversupply is reached.	* Maintain the undergraduate nursing and midwifery places at 1,000 per year and increase by 300 training places each year for next three years (additional 900 students between 2020 and 2023)	1,300 student training places per year over the next three years cumulatively increasing to 3,900 students in training by 2023.	*£6.0M	*£11.4M	*£15.8M	£18.1M Review	£18.1M Review	£18.1M Review	
3. Invest recurrently in nursing & midwifery post graduate education at a level commensurate with both the size of the workforce and the transformation agenda.	* Increase post graduate nursing and midwifery education and training.	Enable growth in specialist nurse training in line with HSC Transformation rising from £7.3M to £11.3M	£2.7M	£4.0M	£4.1M	£4.2M	£4.3M	£4.3M	
4. Build & resource a new career framework so that within ten years there are Consultant Midwives & Advanced Nurses across all branches & across nursing specialities.	Commission the development of Person Centred Digitalised Pathway. * Maintain the undergraduate nursing and midwifery places at 1,000 per year and increase by 300 training places each year for next three years (additional 900 students between 2020 and 2023) * Increase post graduate nursing and midwifery education and training. Develop strategic plan which will systemically increase the number of Advance Nurse Practitioners, Consultant Nurses & Midwifes and Clinical Academic nurse/midwife roles.	120 WTE ANP in primary & community / secondary care 25 WTE Nurse/Midwifery Consultants.		£1.9M	£4.6M	£7.2M	£10M	£12.9M	
5. Increase the number of clinical academic roles in midwifery & all branches of nursing.		posts.							
6. Put Delivering Care Policy (normative (safe staffing) on a statutory footing.	5, & 7 and commission systems dynamic	Additional 908 WTE nurses (phase, 2, 3, 5, & 7).	£9.93M £100K	£19.4M £100K	£33.9M	£48.3M	£57.8M	£58.9M Review	
(Please note Delivering Care Phase 4 costs			210010	21001				neview	
covered by recommendation 3 above)	•								
7. Develop arrangements for band 5-6 pay progression similar to other professions.	of the cost and benefits of full	To be agreed.							
Strategic Theme 2 Totals			£18.8M	£37M	£58.7M	£78.1M	£91M	£94.7M	

4.0 STRATEGIC THEME 3

Doing the right things in the most effective way – working in partnership. Transformation of Health and Social Care Service through enhancing the roles that nurses and midwives play within and across multi-disciplinary teams.

(*Recommendations identified for funding under 'New Decade, New Approach' and Executive Commitment)

NMTG RECOMMENDATIONS			WHAT IT WILL COST AND BY WHEN						
	WHAT WE WILL DO WHAT THIS WILL		Phase 1		Phase 2		Pha	se 3	
		WHAT THIS WILL MEAN	20/21	21/22	22/23	23/24	24/25	25/26	
1. Develop and prepare nurses and midwives for leadership positions. This will require investment in the development of a new nurse leadership framework and investment in leadership training for nurses and midwives	Standardise Nursing & Midwifery Leadership Infrastructure. Strengthen senior clinical nurse & midwife leadership posts. Invest in an Aspiring Nurse and Midwife Leadership Training Programme.	36 WTE clinical leadership posts in midwifery & all branches of nursing. 48 Trainees.	£418K £852K £160K		£1.3M	£1.3M £1.8M £160K		£2.8M £160K	
Invest in improvement science training and increase role of nursing and midwifery leadership in quality improvement initiatives.	Invest in Nurse and Midwife QI and Implementation Science Leads.	5 WTE Qi Leads.	£353K	£360K	£367K	£374K	£382K	£389K	
3. Develop a new statutory assurance framework for nursing and midwifery in order to underpin quality, safety, and effectiveness	Put in place a new nursing and midwifery quality assurance framework, and prepare a submission for minister on statutory requirements to underpin the framework.	Provides assurance and evidence of the impact of nursing and midwifery at policy and board levels	Develop framework by 2022						
4. Increase the role of nursing and midwifery in digital transformation through the creation (at senior level) of a new digital nurse and midwife leadership role in all HSC bodies.	Establish a digital/innovation nurse/midwife network and appoint a regional digital and innovation nurse/midwife Lead and HSC digital nurse/midwife HSC Trust Leads.	6 WTE nurse / midwifery leads.	£438K	£447K	£456K	£465K	£474K	£484K	
Strategic Theme 3 Totals			£1.2M	£1.8M	£2.1M	£2.8M	£3.2M	£3.8M	

	WHAT IT WILL COST AND BY WHEN								
	Phase 1		Phase 2		Phase 3				
5.0 SUMMARY OF STRATEGIC THEME COSTS	20/21	21/22	22/23	23/24	24/25	25/26			
Strategic Theme 1 Totals	£902K	£3.6M	£5.1M	£6.8M	£9M	£10.5N			
Strategic Theme 2 Totals	£18.8M	£37M	£58.7M	£78.1M	£91M	£94.7N			
Strategic Theme 3 Totals	£1.2M	£1.8M	£2.1M	£2.8M	£3.2M	£3.8M			
Grand Total	£20.9M	£42.2M	£65.9M	£87.7M	£103.2M	£109N			
NEW APPROACH AGREEMENT AND EXECUTIVE COMMITMENT Delivering Care Phase 4 Health Visiting & Public Health Nursing	20/21 £70K	21/22 £622K	22/23 £1.1M	23/24 £1.7M	24/25 £2.2M	25/2 0			
RECOMMENDATIONS IDENTIFIED FOR FUNDING NEW DECADE NEW APPROACH AGREEMENT AND EXECUTIVE COMMITMENT Delivering Care Phase 4 Health Visiting & Public Health Nursing						25/26			
ncreasing undergraduate places	£6.0M	£11.4M	£15.8M	£18.1M	£18.1M	£18.1N			
Post Graduate Education	£2.7M	£4.0M	£4.1M	£4.2M	£4.3M	£4.3M			
Implementing Delivering Care 2, 3, 5, & 7.	£9.93M	£20.1M	£33.9M	£48.3M	£57.8M	£58.9N			
Recommendations Identified For Funding New Decade New Approach and Executive Commitment	£18.7M	£36.1M	£54.9M	£72.3M	£82.4M	£84M			

HOW GAP MIGHT BE FUNDED:

Between 2020 and 2026, in addition to those recommendation identified for funding under the 'New Decade New Approach' Agreement it is estimated that approximately an additional £25Millon would be required to fund the remaining NMTG recommendations over the next five years. The current nursing and midwifery agency spend is £51M (18/19), and assuming this could be incrementally converted into savings, then a proportion of this funding could be reinvested to cover the costs of the remaining recommendations.

MOVING AHEAD:

Our Ambition, Our Commitment:

Nursing and midwifery services dedicated to delivering person centred, evidenced based health and wellbeing care outcomes.

