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Shared roles can have a big impact

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The value of a shared practice educator role: Using collaborative practice to improve clinical staff development.

Background

A 2015 report by Health Education England on future education and training of registered nurses and care assistants in England emphasised the importance of assuring predictable and sustainable access to ongoing learning and development[1].

Collaboration in hospices has been effective in research[2], joint mandatory and management learning programmes[3] and delivering external education[4]. Building on previous collaborative practice, three hospices developed a shared practice educator role focused on clinical practice development.

Aims

The objectives for the role were to agree a standardised matrix of clinical skills for clinical staff, share best practice and resources and collaborate in the development of shared learning opportunities across three hospices within one region in England.

Methods

The shared Practice Educator adopted the following framework:

- Identify and agree required skills for clinical staff delivering End-of-Life Care (EOLC)
- Develop positive working relationships across hospices
- Benchmark and gather baseline information across hospices using needs analysis[5]
- Summarise individual and shared training needs and priorities
- Develop strategic plan for delivering training programmes.

Scan the QR code for the poster narrative

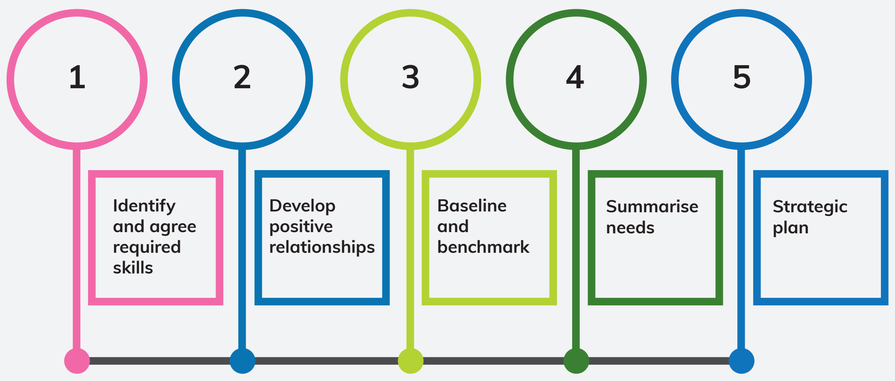

Figure 1.
Approach to achieving the objectives of the role.

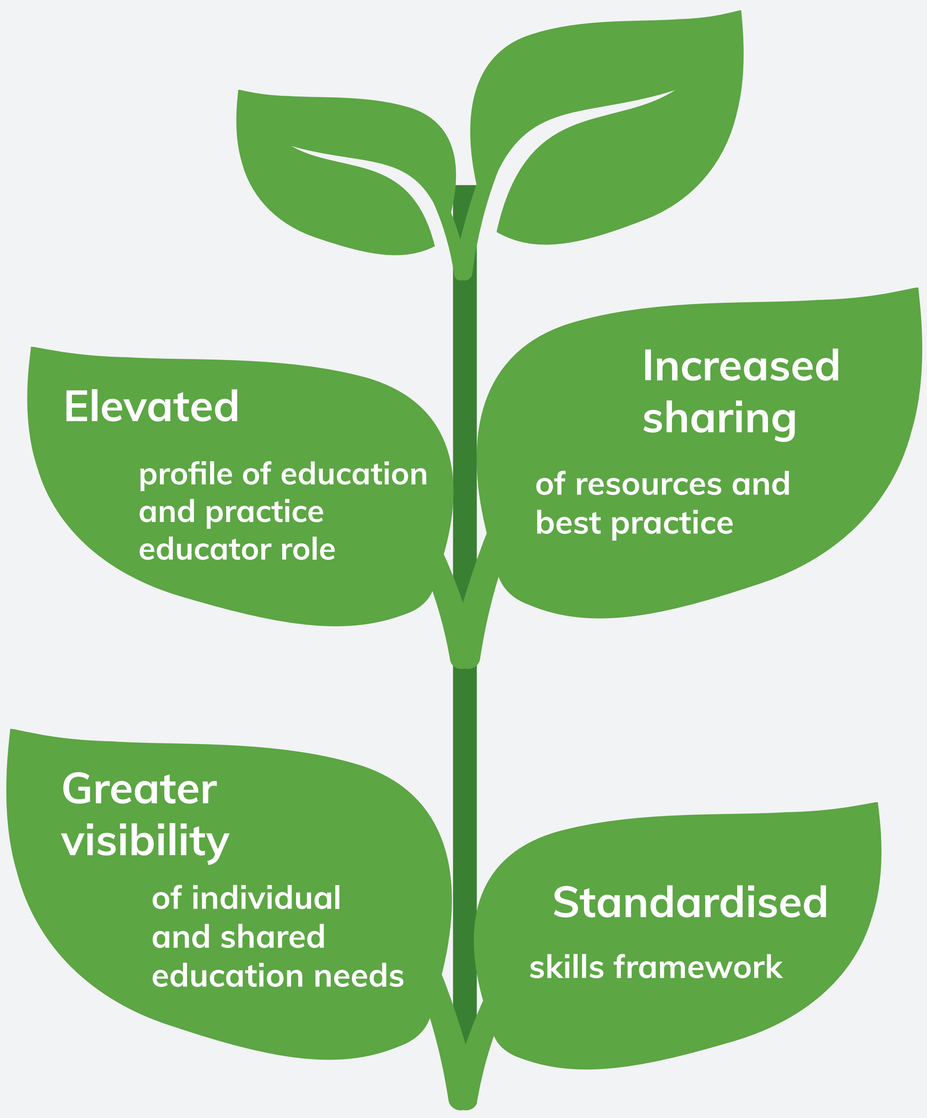

Figure 2.
Key achievements of the role in the first 12 months.

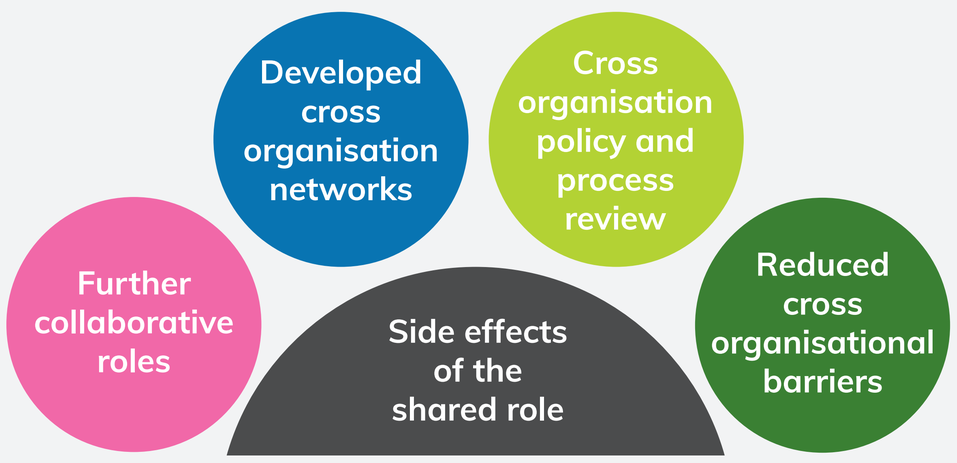

Figure 3.
Unexpected outcomes of the role.

Results

The impact of the role has reached beyond agreeing a standardised skills framework and identifying the learning needs of the hospices. It has provided an effective link for communicating as well as sharing information and best practice and elevated the profile of practice education. Through sharing resources and experience it has also accelerated the development of individual hospice projects related to competence frameworks, an EOLC passport and preceptorship programme.

Conclusion

Effective sharing of best practice and standardisation of education across hospices can help streamline processes and reduce repetition of tasks. This shared role has offered the hospices the opportunity to increase the impact of clinical education in a cost-effective way; information and experience has been shared effectively and it has enabled the hospices and the practice educator to begin to influence the learning culture of the organisations.

Lessons learned and moving forward

- The role holder needs to be empowered to be honest about capacity and learn to manage expectations especially their own; excellent communication is crucial
- Time management is key, organisations need to focus on the bigger picture, be flexible with hours and acknowledge that it may take longer to meet individual hospice deadlines; in the long term this may be offset by the reduction in repetition
- There are several barriers to cross organisation working, particularly related to IT; it would be easier for the role holder to have a single email address and calendar
- Protecting the remit of the role is important to meet the aims of the role and prevent the role holder being drawn into other areas of demand, thereby maintaining focus on the goals that have been set
- The role can grow very quickly, identifying other staff with an interest in education and succession planning will be an important part of making the role sustainable
- The scope of the role may have crossover into head of education roles or similar if this role does not exist within organisations and opportunities for more collaborative positions could develop alongside the growth of learning cultures

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