

CONFERENCE ABSTRACT

Acute Medicine Nurses facilitating Patient Flow – A National Unscheduled Care Clinical Skills and Competencies Education Programme

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

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Context: Acute medicine nursing is an emerging discipline within unscheduled care. To September 2016 73,175 patients registered in Ireland's acute medicine units, of which 26,830 (36.7%) were admitted to acute medical short stay or specialist wards, or discharged on the same day (n=46,345 / 63.3%). Nursing staff in these units (560) come from a variety of clinical general and specialist backgrounds with few possessing specialist acute medicine nursing qualifications to support patients on unscheduled care pathways inclusive of ambulatory care.

Aim: To provide clinical education programmes to maximise the development Acute Medicine nurses' skills and competence' (H.S.E. 2016, p. 18) to meet identified patient needs. A particular focus being on improving patient access, assessment, care, and management across the patient pathway.

Method: Nationally there are 32 acute hospitals which have either an AMAU or an MAU. To identify gaps in knowledge, skills and competencies:

An education needs assessment to determine baseline knowledge, skills and competencies of nurses in these units a national survey was undertaken.

All 32 hospitals were surveyed.

A similar assessment was conducted amongst ED nurses

The survey instrument was designed based on a Developmental Framework for Nursing Skills and Competencies in AMAUs, MAUs and MSSUs which was co-designed with the Acute Medicine Nurse Interest Group (AMNIG) and which identified the skills and competencies required of acute medicine nurses at core, specialist, enhanced/advanced levels.

Outcome/Results: A 100% response rate was achieved. Hospitals were asked to provide information on numbers of nurses trained in a skill; those currently using the skill; and nurses requiring training in the skill. Demographics were captured in Section 1. Responses to, clinical skills and competencies needs (Section 2), were analysed using six broad categories. Results will be presented.

Results were mapped to patient presentations and age profiles using NQAIS Medicine. Findings from the ED nurse survey were cross referenced to enable common core unscheduled care skills and competencies education needs to be identified.

A Foundation Programme in Unscheduled Care, Acute Medicine Nursing was designed. On-line clinical skills programmes and currently provided in service programmes were excluded from the programme. 5 key skills and competency areas were validated by the Acute Medicine Programme Nurse Interest Group as required for inclusion. Provision of ongoing Level 8 education foundation programmes' of 12 weeks duration with Nursing and Midwifery Board accreditation planned to commence 2017.

Conclusion: A foundation programme will enable nurses to access educational and professional practice pathways in acute medicine at specialist and advanced practice levels.

Having skilled and competent nurses educated to a national standard of skills and competencies in unscheduled acute medicine care inclusive of ambulatory and short stay acute medicine care will improve the patient outcomes, experience create capacity within the system generating greater access and effective efficient use of resource.

Provides opportunities for interdisciplinary and cross clinical programme nurse education to generate a commonality of practice within the themes of rapid access, timely assessment , intervention, diagnosis, treatment plan and discharge.

Keywords: acute medicine nursing; education programme
