

## Screening Programmes

Abdominal Aortic Aneurysm

# Education and training update

## London AAA networking day

### 27 November 2015

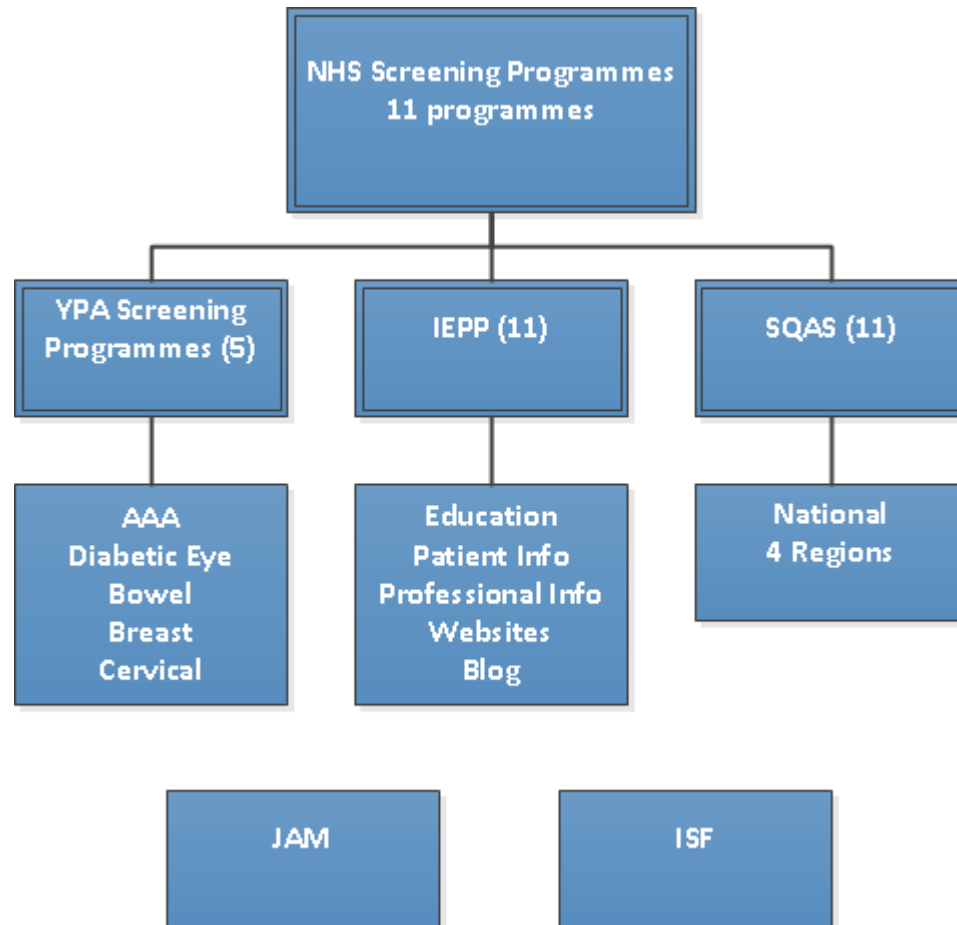
Patrick Rankin, National training and education manager

Public Health England is responsible for the NHS Screening Programmes



# Introduction

- DES and NAAASP National teams combined in 2012
- Now includes cancer programmes too
- Bowel, breast, cervical
- New screening division within PHE
- Quality assurance, ANNB, cancer, non cancer and comms/education
- Education and training manager
  - overarching responsibility for the initial and ongoing training of all staff within the DES and AAA screening programmes
  - includes continuing professional development
  - technician re-accreditation/DES TAT
  - e-learning
  - development of new qualification main work stream this year
  - CPD framework 2016-17
  - busy, busy, busy!



# Staff and responsibilities in NAAASP

- clinical director
- programme co-ordinator
- screening technicians
- clinical skills trainer/QA lead
- programme administrator
- nurse specialist

# Clinical Director (0.2 WTE)

- Consultant vascular surgeon
- strategic lead for the programme
- ultimately responsibility for programme
  - QA, IQA, funding, data submission
- advise on clinical matters and patients in pathway
- support co-ordinator and wider team (approachable and involved)
- act on reports and data provided by NAAASP
- ensure diagnostic and treatment services meet demand of programme
- ensure tracking of patients referred for treatment and final outcomes

# Programme co-ordinator (1.0 wte)

- Responsible to the clinical director
- Day to day operational management of the programme
- Management, recruitment, overseeing training, development, tracking referrals, stakeholder communication, ensuring screening is fit for patch, protocol adherence, failsafe monitoring, quality assurance, equipment QA and procurement, performance management etc etc.
- Needs to know everything that's going on; 'NAAASP crystal ball'
- No specific requirement for training/qualification
- Understanding of screening is helpful

# Programme administrator (1.0 wte)

- Absolutely key to a well ran service
- Provides primary contact with the public
- Letters and booking clinics
- Audits
- Required to give correct and factual information to members of the public
- No specific qualification required but admin experience is essential
- Quite often trained to be technicians!

# Screening technicians

- Qualifications required;
  - Good standard of education
  - Determined locally
- Must complete the NAAASP required qualification
  - Currently Salford university course
  - Due to change in April 2016
- Undertake accurate imaging and measuring of the aorta within NAAASP
- Ensure men attending are fully informed about the process and the potential harms from screening
- Informed consent
- Provide results to patients (bad news and potential emergency referral)
- Update and understand SMaRT
- Must maintain their accreditation
- Programme and technician responsibility to ensure trained and accredited



# Nurse specialist

- Counselling and providing healthcare advice to men who are diagnosed as having an aneurysm via the screening programme
- Currently within 12 months
- Updated SOP's to be released in next 6 months
  - Within 12 weeks
  - Face to face appointments
- Additional emphasis to be placed on this role over the next 18 months
- Potential to become involved with screening technician training
- Huge under utilised resource within the programme

# Clinical skills trainer/QA lead (0.1&0.1 WTE)

- responsible for the clinical training and supervision of new and existing staff, ensuring they are familiar with scanning techniques and the screening programme procedures and high standards of work are maintained
- Senior sonographer or vascular scientist
- PgCert minimum/ SVT accreditation
- First line supervisor of the screening technicians
- Major role in e-learning package for new technicians
- On-going quality and quality assurance (QA lead)
- Reducing potential risk
- Regular feedback to techs
- Part of a National Screening Programme with National Protocols
- Small part of their role
- Large part of the screening programme
- Improved integration in last 12-18 months

# Internal quality assurance requirements

- Robust internal QA framework has been in place since role-out
- Ensures that technicians are safe to work within programme
- Utilises SMaRT and documents online to aid programmes
- CST and co-ordinators must be aware of requirements for IQA
- Detailed during CST training
- All screening technicians and nurses undertaking screening must participate in IQA
- Feedback needs to be given ideally by the CST
- Acceptable for the co-ordinator (currently)

# Internal QA framework

- successful completion of the NAAASP approved training course for screening technicians within 9 months from initial registration, a maximum of two assessments is allowed
- a minimum of 200 scans per year, this must be spread over the 12 month period and include at least one clinic session per month
- 24 of their scans reviewed by the local lead ultrasound clinician at least every six months. This is the minimum requirement and more can be selected if required
- to have all abnormal scans reviewed by the QA lead/CST within 7 days
- each screener should have be clinically observed during one clinic by the CST at least once every four months (a minimum of five subjects needs to be observed)
- undertake and successfully complete the NAAASP approved screening technician re-accreditation every 24 months.
- It is the responsibility of the local screening programme to ensure that staff are fully trained and accredited

# Websites and communication

- Blog and emails
  - Primary method of communication
- Helpdesk
  - Send all queries
  - Log queries
- Websites
  - Gov.uk, NHS choices, CPD
  - Extranet

- **GOV.uk**
  - All professional related information
  - Policy, procedures, standards
  - All screening programmes and QA
- **NHS choices**
  - All patient centred information
  - Easy to read and understand
  - accessible
- **CPD website**
  - All education, training and eLearning
  - Updates regarding the new qualification
  - Generic eLearning modules/QA/induction
- **Extranet**
  - Legacy site
  - Has all old content, not updated

Screening Helpdesk [phe.screeninghelpdesk@nhs.net](mailto:phe.screeninghelpdesk@nhs.net)

Professional information on [gov.uk](http://gov.uk)

<https://www.gov.uk/topic/population-screening-programmes>

Patient information on NHS Choices:

<http://www.nhs.uk/conditions>

CPD: <http://cpd.screening.nhs.uk/>

Blog: <https://phescreeing.blog.gov.uk/>

Twitter: @PHE\_Screening

Extranet archive:

<http://abdominalaorticaneurysm.screening.nhs.uk>

# Documentation

- Quality assurance framework and resources for training in NAAASP
  - <http://cpd.screening.nhs.uk/cms.php?folder=5196>
- Clinical guidance and scope of practice
  - <http://cpd.screening.nhs.uk/cms.php?folder=5196>
- Clinical Skills Trainer Handbook
  - <http://cpd.screening.nhs.uk/cms.php?folder=5196>
- Standard operating procedures
  - <https://www.gov.uk/government/publications/aaa-screening-standard-operating-procedures>
- Scope of practice
  - <https://www.gov.uk/government/publications/aaa-screening-clinical-guidance-and-scope-of-practice>
- Pathway standards (quality standards)
  - <https://www.gov.uk/government/publications/aaa-screening-quality-standards-and-service-objectives>
- Screening technician handbook
  - <http://cpd.screening.nhs.uk/cms.php?folder=5195>
- Gov.uk supporting docs
  - <https://www.gov.uk/government/collections/aaa-screening-supporting-documents>



# Education from April 2016

- PHE, HEE and Skills for Health are introducing an exciting new screener qualification in 2016
- Clinical Healthcare Support Diploma in Healthcare (AAA Screening)
- Level 3 on QCF
- Provides the non-professionally regulated staff within screening a nationally recognised qualification
- Will enable staff to have a huge number of opportunities and career progression
  - Other screening programmes
  - Maternity support workers, healthcare support workers
  - Nursing, paramedics, emergency medical technicians
  - Foundation and undergraduate degrees
- Will be a big change to the existing qualification

# Structure

- Core modules that cover competencies for underpinning of basic healthcare
  - Communication skills
  - Consent
  - Infection control
  - Health and safety in healthcare settings/safeguarding etc.
- Generic screening module
  - To provide all staff in screening programmes a basic understanding of screening and its importance in a healthcare setting
- Screening programme specific modules
  - Different modules for different roles
  - Screener, grader, admin etc.
  - Certain staff groups will have exemption for prior learning

# Assessment

- Change in structure to the current qualification
  - Local assessors/internal and external quality assessors
  - More local oversight
  - CST's/nurses/co-ordinators to become assessors to sign off techs
- Will take between 9-12 months to complete
- Clinical 'sign off' to enable semi independent scanning
- Work based assessment of competence
- Core modules competencies are demonstrated utilising their roles within their departments
  - Portfolio of experience (including minimum scans of AAA and non AAA)
  - Clinical assessments
  - E-learning
  - On-line tests
  - Assignments
  - Case-studies/reflective practice
  - Short notes
  - Professional discussions

# Assessors

- As this is a Nationally recognised qualification assessors of competence will now need to have appropriate qualifications in vocational assessing
- Skills for health requirement

## **Clinical skills trainers**

- CST's still required for scanning assessment and will need to undertake this qualification in vocational assessing
- Exemption for prior learning/block training of CST's in new role

## **Accredited screening technicians**

- Will allow role development for accredited screening technicians
- Can be officially involved in the training and assessing of new technicians
- Won't be able to sign off clinical scanning competency (CST's only)
- Will need to undertake the vocational assessors course locally

# Costs

- Costs are determined by the individual awarding organisations
  - Local centres will determine the costs based on the administration and quality assurance requirements
- NAAASP can no longer subsidise the qualification
  - £1000-2000/ registrant
- Funding may be available from the local education and training board within Health Education England
- Local programmes need to contact wider workforce development team within their LETB
- Dependent on local budgets and circumstances
- PHE are in discussion with senior management from HEE to obtain further clarification regarding funding from a National perspective

# Next steps

- NAAASP to;
  - Produce website providing local programmes with updates
  - Provide contact details of AO
  - Facilitate programmes with administration process
  - Produce new e-learning and assessment packages
  - Produce full guidance and portfolio of experience for programmes
- Local programmes to;
  - Contact and negotiate with LETB's regarding funding
  - Contact awarding organisations to determine locality of awarding centres
  - Determine which AO is best suited to provide the qualification
  - Register as awarding centre if required
  - Liaise with awarding centre to determine process for registering learners
  - Register internal assessors with awarding organisation

# Questions?