

Unit Six

Quality improvement and evaluating practice from an education provider's perspective

Key messages

Once you have read this Unit, you should have an understanding of:

- *the role of education providers in enhancing quality of care provided by general practice nurses (GPNs) to meet clinical governance standards*
- *the importance of using benchmark standards to create parity across practices*
- *how to evaluate education provision.*

Higher education institutions (HEIs) will be familiar with the need to demonstrate quality within their service provision through the HEI quality-assurance assessment process. Helping GPNs to demonstrate the quality of their care must be an integral part of any course. Establishing a culture of quality should include the need for evaluation of care, in order to ensure standards are met. Part of the role of education is to advise on how this process can be introduced in a simple, yet effective, format.

Although the concept of clinical governance is conventional within larger health care organisations, it may be less familiar within small general practices. There is still a need for education and training on the various aspects of clinical governance and how the information can be used to improve quality. A selection of courses on clinical governance can be found at www.wisdomnet.co.uk/default.asp. For advice on possible curriculums, see www.rcgp.org.uk/corporate/responses/curriculum/pdfs/ClinicalGovernance.pdf.

Tool – Examples of quality-related training provides examples of the type of courses that may be useful for GPNs – particularly for those with a management component to their role, and those interested in the quality agenda.

GPNs are in a position where they can take on new services with relative ease, in comparison to their community nursing colleagues, who may have to face the rigours of strategic management or professional executive committees if they want to work in innovative ways. However, this means that the quality of care they provide may initially be scrutinised less intensively. Motivation to maintain the highest quality standards is therefore vital and education has a role to play in emphasising this.

The concept of quality can be a rather dry topic. To make this meaningful to GPNs, it must be applied to their practice area to demonstrate its importance. No new initiative in practice should be implemented without evaluation; similarly, no education that promotes clinical change should take place without emphasis on evaluation alongside.

Education for GPNs is most popular when it is linked to patient management of clinical conditions, because practices can then see the overt value of the education very easily. Where this is the case, assessment that includes evidence of clinical competence and means of evaluation should be encouraged, as this will make the education more meaningful to both the GPN and the practice.

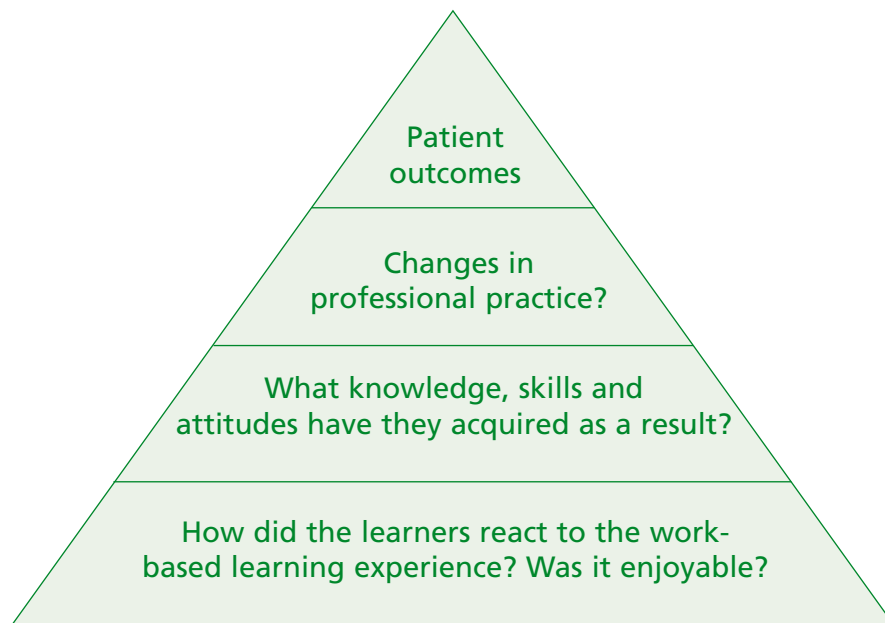
As a provider of education to GPNs working in general practice, you will want to know the extent to which:

- *there are resources to fund GPN student places for your current or future awards*
- *the format and delivery of education suits the GPN's circumstances working in general practice – ie the right balance between work-based and off-site learning and self-directed study*
- *local training is relevant and appropriate to GPNs working in general practice as opposed to other health care settings*
- *GPNs take up education*
- *GPNs register for external awards with education providers (and drop-out rates).*

In order to define what particular aspects of work-based learning need to be evaluated, focus on the level of information required. You should consider whether you are evaluating the outcome or product of the student's learning experiences, or the quality of the teaching activities, ie the process. Kirkpatrick's hierarchical model¹ of four levels of evaluation (reaction, learning, behaviour and results) has been adapted for evaluating what can be gained by work-based learning (See figure below).²

As the role of GPNs becomes more prominent and nurse-led services are established within practices, it is vital that evaluation of the role is considered to ensure patient safety. Similarly, evaluation of the way in which GPNs are prepared for more-advanced roles is required. This will help to protect not only patients, but also the GPNs themselves, who should not be taking on delegated tasks that they do not feel competent to perform.³

Kirkpatrick's hierarchy application to work-based learning¹



Some of this information could feed into an evaluation you undertake to assess the current situation while you are planning what education and training for GPNs is needed. You should also consider what you can viably supply and whether or not you will need to link to other sources

(eg deaneries or PCT training departments). You could focus your evaluation on the structure, process and outcome of education provided, ie:

- *what actually happened – such as the content of your awards deemed suitable for GPNs working in general practice and/or the nature of any training-needs assessment of GPNs (structure)*
- *how it worked out – how well the courses and awards ran – numbers who registered compared with those who dropped out or arranged to intermit; the content and satisfaction level of feedback from GPN students and their employers (process)*
- *what was achieved as a result of your education provision – the skills and qualifications gained by what proportion of GPNs, and evidence of their ability to apply their learning in practice (outcome).*

The evaluation of outcome would be most effective if done in conjunction with the GPN's employers to assess subsequent competence. **Tool – Education provision for GPNs – evaluation by education provider**

Standards of care

The new *General Medical Services (nGMS) contract*⁴ has placed emphasis on the quality of care for patients with long-term conditions. Much of the care for these patients will be delivered and planned by GPNs who run nurse-led services. It is therefore vital that any education to equip GPNs with the requisite skills places emphasis on achieving high-quality care. One way of encouraging this and instilling quality into ongoing practice is to promote the creation or use of guidelines and protocols. These should be evidence based and used across the PCT to optimise consistency of care. See

Tool – Using protocols, standards, protocols and guidelines to enhance confidence and career development

You may also find the following website useful – this provides examples of over 100 protocols for use in general practice – www.equip.ac.uk. Another way of encouraging best practice is to use the benchmarking process outlined in *Essence of Care*⁵ – www.dh.gov.uk/assetRoot/04/12/79/15/04127915.pdf. **Tool – Essence of Care benchmarking**

In order to prove that their care is effective, GPNs need to be able to audit their practice. Audit information forms the basis of the *Quality and Outcomes Framework*, yet some GPNs remain fearful of auditing. Education providers can therefore play a teaching and supportive role to show that it need not be either complex or time-consuming.

The following tools may be useful to guide GPNs undertaking audit.

Tool – How to undertake an audit

Tool – Judge how well you have performed an audit

Another way of encouraging optimal practice is to support the adoption of peer review. GPNs will undergo assessment while they are students, and some elements of this may be within clinical practice. However, the subsequent performance of their duties may not be assessed. Encouraging a practice of regular critique will serve to improve standards and patient safety. Education providers could be useful in helping to establish this process, and by teaching the skills of effective feedback. **Tool – Using peer review to improve practice**

References

1. Kirkpatrick DL. *Evaluating Training Programmes – the Four Levels* (2e). London: Berrett-Koehler Publishers; 1998.
2. Carter K, Edwards J, Mohammad I et al. Evaluate work-based learning. *Education for Primary Care* 2005; 16: 726–728.
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4. Department of Health. *Investing in General Practice: the New General Medical Services Contract*. London: Department of Health; 2003. Available at: <http://www.nhsemployers.org/primary>.
5. Modernisation Agency. *Essence of Care Toolkit*. London: Department of Health; 2003. Available at: http://www.cgsupport.nhs.uk/PDFs/articles/Essence_of_Care_2003.pdf.