



Rheumatology Nurse Competency Framework Evaluation Report



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Executive summary

The Royal College of Nursing (RCN) Competency Framework for Rheumatology Nurses (2020) has been well received by rheumatology nurses and the wider rheumatology community. The impact of the COVID-19 pandemic has delayed its full implementation and impacted its dissemination. This evaluation aims to explore rheumatology nurses' view of the competency framework and to identify any recommendations for further work. A survey which utilised a combination of a questionnaire and semi-structured interviews was undertaken. The results of the evaluation demonstrated that the majority of respondents to the survey (77%) were from England and over half (52%) were adult rheumatology nurses and 54% had used the framework.

Due to the impact of the COVID-19 pandemic implementation was mainly described in relation to new or junior staff. The interview cohort was generated via the questionnaire and 14 interviews were conducted in total. The interviews focused on the experience of using the competency framework and sought to identify any strengths, limitations and recommendations. Responses included the need for paediatric and adult education courses and a focus on the development of the management and leadership of rheumatology nurses. The need for a development framework was also raised. The framework was described as “a reliable tool to improve the quality of care and set standards for the education of nurses”.

Introduction

The *RCN Competency Framework for Rheumatology Nurses* was published in March 2020. The framework was designed to support trained nurses in rheumatology from band 5 to band 8 Agenda for Change (NHS, 2018) but can also be used alongside the *Skills for Health Framework* (SFH, 2015) to support people working outside NHS banding structures. As such, it is a novice to expert resource supporting progression throughout the career of a rheumatology specialist nurse. The competency framework aims to support individual personal development plans (PDP), continuing professional development (CPD) and career progression for rheumatology nurses to advanced practice acting as a benchmarking tool. It also aims to provide a framework to support succession planning and service development and act as a nationwide standard for curriculum development and training.

The development of the framework has been welcomed by professional bodies including the British Society for Rheumatology (BSR) generating a high level of interest in its publication. As a result of this, we anticipated a high level of attention.

Following the launch of the competency framework it was felt to be important to evaluate its effectiveness. However, the publication launch coincided with the start of the COVID-19 pandemic and therefore it was felt to be inappropriate to ask nurses for their feedback on the document at that time. Once the UK-wide situation began to improve a phased approach to evaluation was taken.

This evaluation is part of a two-pronged approach, firstly, a quantitative study was completed to review who had accessed the competency framework to assess its reach. This report, *Rheumatology Nurse Competency Framework: Phase 1 Evaluation of Quantitative Data*, was published in February 2021. Secondly a mixed-methods study was completed, consisting of a questionnaire disseminated to rheumatology nurses across the UK and in-depth interviews to assess the impact and value of the competency framework.

Aims

The aims of this second approach to the evaluation project were to explore rheumatology nurses' views of the value of the competency framework, specifically identifying benefits, limitations and recommendations. During this evaluation project, challenges for rheumatology nursing, such as poor succession planning, lack of career development and structure, lack of a centralised national curriculum-based education and variance in roles and banding were also explored.

Methods

This evaluation study utilised an explanatory sequential research design. The evaluation was conducted through a combination of an initial quantitative questionnaire and self-request of qualitative semi-structured interviews for further questioning.

Questionnaire

A peer reviewed and piloted survey was circulated from 13 March to 25 April 2021 via the RCN Rheumatology Nursing Forum member emails and also using a link to the survey disseminated through the Facebook page of the RCN Rheumatology Nursing Forum and the BSR website. The link was also shared via virtual meetings and social media networks. The data was collected centrally by the RCN data team and an electronic report generated.

Interviews

The interview cohort was generated by the inclusion of an opt-in question at the end of the questionnaire. We aimed for a purposive sample to provide for wide representation and to avoid bias. Ideally representatives from different geographical areas, banding and professional backgrounds, for example, managers and paediatric nurses were hoped for, but this data was not specifically collected in the interview process. An interview schedule was developed for use with all interviews.

Nurses who opted to take part in an interview were contacted by email and the interviews were arranged to be carried out by phone or via zoom outside of working hours.

Results

Questionnaire results

106 people responded to the survey, with 99 (93%) working as adult rheumatology nurses. There were 55 (52%) band 7 nurses, which was just over half of the total sample. There was a wide range of job titles which may contribute to difficulties in defining roles. The majority of nurses, 93 (87%) had an academic qualification at either degree or Master's level. Most respondents, 40 (70%) learned of the survey via the RCN Rheumatology Nursing Forum Facebook page or via the BSR website (35%).

England had the highest response rate, with 77 (73%) being based in England. We had one respondent who currently works in Asia. The majority of respondents, 74 (70%), had learnt about the competency framework via the RCN Rheumatology Nursing Forum Facebook page. There was an indication of job stability within teams with 76 (71%) respondents maintaining their present role for five years or more and 103 (50%) nurses had been in their role for more than 10 years.

When asked whether they had used the competency framework in their practice, 57 (54%) said they had. The reasons for using the framework were varied and included:

- to provide a framework for learning
- to provide benchmarking of knowledge and skills
- for continuing professional development
- for teaching
- to demonstrate skills and knowledge
- when managing others
- to show managers ways in which the clinical nurse specialist (CNS) role can develop.

Issues related to redeployment due to COVID-19 and resulting workforce issues were reported as the main reason why the respondents had not used or implemented it fully into their clinical practice. However, despite not being able to fully implement it, using it with new and junior staff was still cited as beneficial.

There were many free text comments provided when respondents were asked what worked well with the framework. General themes were often about identifying and supporting learning needs. See below for examples of what worked well.

The detail within each competency is very good and allowed me to demonstrate the breadth and depth of my role to my manager. This meant I am able to identify time required for extra learning.

Helps to reflect on what knowledge and skills one might already have and what needs addressing to improve knowledge and practice.

A good understanding for underpinning knowledge to start and develop from. I used this in putting together an educational development pack.

Respondents were also asked what didn't work well. Comments were mainly themed around role development, advanced practice and current knowledge. See below for comments.

I would like to have a framework for development outlining what I need to do and how long this should take to move from band to band.

For advanced level practice there needs to be clearer definition of academic requirements. Minimum being masters level requirement, as per Health Education England (HEE) requirement for advanced level practice.

Some staff when assessed came out as lower banding! I think this is a reflection on how we have been taught and because it hasn't been structured everyone is doing something different.

Interview results

There were 15 nurses who responded that they would be happy to take part in an interview. One of these did not respond to interview requests via emails, so 14 were conducted in total. They were conducted from May 2021 until August 21. The longest interview was 31.4 minutes, with an average of 12 minutes for each interview, in total the interviews lasted 171 minutes.

The results from the interviews described individuals' experience of using the framework. Specific questioning included:

- enquiring why individuals used the competency framework
- any potential strengths or limitations
- how much time it took to use
- whether they would use the document again
- suggesting any potential improvements to the document
- if they would they recommend it to others.

They were also asked whether it was easy to locate the competency document.

The interviewees were asked if they had any ideas of any other resources they would like to be developed to help with their rheumatology nursing role. Suggestions included a paediatric rheumatology educational module, a specialist validated educational course easily accessed for all and a further focus on the development of the management and leadership of experienced rheumatology nurses.

The interviewees were asked to summarise the competency document in five words which proved a little difficult for some. Therefore, these responses ranged from three to 15 words and illustrated powerfully how the respondents viewed the document, such as "comprehensive, useful document, great grounding framework" and "a reliable tool to improve quality care and set standards for the education of nurses".

Potential future opportunities

It is encouraging to report that the competency framework has been well received and recognised as a strengthening resource for rheumatology nurses across the UK. Given that we had a respondent from Asia, and that we have had some interest from people working abroad, the competencies may have an international reach. It is recommended that these competencies are universally adopted to help progress and support the role of nurses in the rheumatology specialty. However, in order to achieve this, further analysis of both the questionnaire and interview data will be ongoing, and results will be expected by the spring of 2022.

Further to this, the competency framework is due to be reviewed in 2023. This review will consider the results of this evaluation, specifically responding to any ideas of improvement suggested by respondents to both the survey and to the interviews.

Already the framework has been improved by the provision of electronic evaluation templates, as suggested by the rheumatology nursing community and feedback from those in practice is so far promising. The evaluation templates are available at: [rcn.org.uk/professional-development/publications/rcn-rheumatology-competency-framework-registered-practitioner-uk-pub-009240](https://www.rcn.org.uk/professional-development/publications/rcn-rheumatology-competency-framework-registered-practitioner-uk-pub-009240)

The forum's aim is to disseminate the framework and templates further, including additional support in the use of the framework, for example, publishing examples and producing a training programme and video to help people use the document. Table 1 below summarises these forum recommendations further.

Education needs were repeatedly outlined. The design of a paediatric rheumatology educational module, specialist accessible and validated educational opportunities, and a focus on the development of management and leadership skills will all require stakeholder collaboration.

The design of a developmental framework as a separate piece of work appears to be an unmet need. This would need to start at a junior level to ensure that the framework is adopted from the beginning of a rheumatology career.

Key documents and resources

British Society for Rheumatology (2021) Rheumatology Workforce: a crisis in numbers. Available at: rheumatology.org.uk/Portals/0/Documents/Policy/Reports/BSR-workforce-report-crisis-numbers.pdf?ver=2021-06-16-165001-470

British Society for Rheumatology (2019) Specialist Nursing in Rheumatology: the state of play. Available at: rheumatology.org.uk/news/details/Specialist-nursing-in-rheumatology-the-State-of-Play

NHS Knowledge and Skills Framework (2015). Available at: advancedpractice.scot.nhs.uk/education/nhs-knowledge-and-skills-framework.aspx

RCN Rheumatology Subject Guide (2021). Available at: rcn.org.uk/library/subject-guides/rheumatology

RCN Standards for Advanced Level Nursing Practice Subject Guide (2021). Available at: rcn.org.uk/library/subject-guides/advanced-nursing-practice

RCN Competency Framework for Rheumatology Nurses (2020). Available at: rcn.org.uk/professional-development/publications/pub-009004

RCN Rheumatology Nurse Competency Evaluation Templates (2020). Available at: rcn.org.uk/professional-development/publications/rcn-rheumatology-competency-framework-registered-practitioner-uk-pub-009240

RCN Rheumatology Nurse Competency Framework: Phase 1 Evaluation of Quantitative Data Report (2021). Available at: rcn.org.uk/professional-development/publications/rcn-rheumatology-report-uk-pub-009550

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