

AGENDA ITEM

3.2.6

CTM BOARD

CLINICAL EDUCATION ANNUAL REPORT 2021-22

Date of meeting	24/11/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Janet Gilbertson- Head of Clinical Education
Presented by	Greg Dix (Executive Director of Nursing, Midwifery & Patient Care) Dom Hurford (Executive Medical Director)
Approving Executive Sponsor	Executive Director of Nursing
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
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Committee/Group/Individuals	Date	Outcome
Executive Leadership Group	24/10/2022	NOTED
Quality & Safety Committee	15/11/2022	NOTED

ACRONYMS	
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CTMUHB	Cwm Taf Morgannwg University Health Board
HEIW	Health Education and Improvement Wales
NEWS	National Early Warning Score
RADAR	Recognition of Acute Deterioration and Resuscitation

1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to highlight the activities and performance of Clinical Education for the academic year 2021-22 and to share the Strategic Direction for Clinical Education.
- 1.2 The Clinical Education Annual Report is presented in Appendix 1 for noting

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 That investment in education and training of our workforce underpins the required transformation to the way we work. Underpinning the CTM2030 strategy will be the development of staff including new clinical roles, career development programmes, staff wellbeing and leadership development. Education and support is key and as our workforce is forever changing, this is an ongoing need.
- 2.2 An effective culture of learning at every level enables the workforce to re-frame their knowledge and includes developing a strong workplace learning infrastructure, cultivating a reputation for training and support and excellence in education.
- 2.3 To note the progress that has been made in 21-22 towards the delivery of the Strategic Direction for Clinical Education including;
 - 2.3..1 Raising the profile and identity of our service through a branding and refresh of Clinical Education facilities across all sites.
 - 2.3..2 Commencement, with Finance, of a three year plan to align and standardise Service Increment for Teaching (SIFT) funding, enabling the robust resource support structures of the undergraduate medical education activity, and increasing governance and clarity over the utilisation of SIFT funds.
 - 2.3..3 Development of and appointment to the first Multi-professional Practice Education Facilitator role in Wales. A model supported by HEIW.
 - 2.3..4 Governance processes established and developed;
 - 2.3..4.1 Establishment of the Clinical Education Forum and reporting forums as a robust organisational wide education governance infrastructure to assure high quality education and training meeting the requirements and standards.
 - 2.3..4.2 RADAR committee continues to drive forward quality standards and training in Recognition of Acute Deterioration and Resuscitation including an up-to-date consistent approach

across CTMUHB to NEWS, Sepsis, Rapid Response activity, resuscitation audit & training compliance improvements and equipment standardisation.

- 2.4 Recognition of the organisational contribution of this function through its many education and training activities to safe working practices and patient care.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 Permanent accessible training accommodation continues to be a challenge as the demand for increased clinical space becomes an issue across all sites and services. It is recommended that the creation of a dedicated multi-professional Education and Learning facility is included as part of the strategic site development plan.
- 3.2 Continuing support will be needed from executives for the 3 year plan for the re-alignment and re-allocation of SIFT throughout the organisation.
- 3.3 Continued progress on the delivery of quality standards, training and governance around acute deterioration recognition and Sepsis is at risk as the Acute Deterioration Lead and Clinical Lead for RADAR posts are only funded until 31st March 2023. Recurrent funding of these posts needs to be established.
- 3.4 The establishment of strong strategic workforce planning activity considering the workforce as a whole is needed to better inform education commissioning, in order to support multi-disciplinary service redesign to deliver our Clinical Strategy.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	The quality and investment of education and training of our healthcare workforce is essential for patient safety and improving care.
Related Health and Care standard(s)	Governance, Leadership and Accountability
	Staff and Resources, Safe Care, Effective Care.
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	No policies or services are new or have been withdrawn.

Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Sustaining Our Future

5. RECOMMENDATION

- 5.1 It is recommended that the Board **NOTES** the Clinical Education Annual Report 2021-22 and the contribution quality education and training makes to our services and improving patient care.

Clinical Education

Cwm Taf Morgannwg

University Health Board



Annual Report Academic Year 2021-2022

MAE EIN
GWERTHOEDD
YN EIN HELPU
NI I FOD AR
EIN GORAU

#CTMareingorau

RYDYN NI'N
GWRANDO,
YN DYSGU
AC YN GWELLA



WE LISTEN,
LEARN AND
IMPROVE

RYDYN NI'N
TRIN PAWB
A PHARCH



WE TREAT
EVERYONE
WITH RESPECT

RYDYN NI I GYD
YN CYDWEITHIO
FEL UN TÎM



WE ALL WORK
TOGETHER
AS ONE TEAM

OUR VALUES
HELP US BE AT
OUR BEST

#CTMatourbest

What will this Annual Report tell you?

Our Annual Report provides you with information about the Clinical Education Service within Cwm Taf Morgannwg University Health Board (CTMUHB), what we do and how we work in partnership with external organisations including Universities and Health Education and Improvement Wales (HEIW), and what we plan to do to deliver and continually improve healthcare education, in order to meet changing demands and future challenges.

It provides information about our performance, achievements in 2021/2022 and how we have made progress towards delivery of our strategic ambition to create a CTM Learning Academy, developing and embedding an organisational Learning Culture that enables staff to work flexibly and with agility to respond to the health needs of our population by;

- Encouraging life-long learning
- Generating openness to collaboration and effective co-design
- Developing a greater understanding of human intelligence.
- Promoting multi-professional learning.
- Developing staff to work at the “top of their licence” both registrants and support staff.

It is well recognised that there is a strong causal relationship between targeted and well-designed education and training, service improvement and patient outcomes and that quality healthcare for patients is supported by maintenance and enhancement of clinical, management and personal skills.(1)

Our Annual Report for 2021-22 includes:

- Current health education context in Wales
- Current Education context in CTMUHB
- University Health Board Status
- About us and what we do & activity in 21-22
- Progress with our strategic direction & where we plan to go next.

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Introduction

Health Education Context in Wales.

Health Services in Wales continue to deliver the vision, ambition and approaches that are needed to deliver 'A Healthier Wales' (1). The demand for services, increasing health and wellbeing inequalities, higher public expectations, the additional challenges due to the impact of COVID-19 on health and social care services, as well as the possibilities that new and emerging medical and digital technologies offer, are set against a backdrop of changing demography, recruitment and resource challenges as healthcare services reset and recover.

It is now four years since the creation of Health Education and Improvement Wales (HEIW) and they continue to work to deliver *The Workforce Strategy for Health and Social Care* (2) to deliver 'A Healthier Wales'.

It acknowledges that what we spend on our workforce is not a cost, but an investment. This is critically important when it comes to education and training and establishing a truly learning organisation culture.

The required transformation to the way we work will need to be underpinned by education; expanding existing roles, developing new roles, building skills and capability in areas we have not done so previously and embracing new technology in delivering our services.

The strategy articulates 7 themes



Fig 1 HEIW Strategy Themes

Context in CTMUHB

The Cwm Taf Morgannwg workforce has continued to adapt to new working models and service challenges against the disruption to life in and out of work caused by the pandemic, all the while ensuring that patients and their families receive high-quality care. Quality is at the heart of the Health Board and the aim is to improve outcomes for our people, whoever they are and wherever they live, by providing access to high quality health and care, delivered through a sustainable culture of learning and improvement.

Underpinning the CTM2030 strategy will be the development of staff including new clinical roles, career development programmes, staff wellbeing and leadership development. Education and support is key and as our workforce is forever changing, this is an ongoing need.



Fig 2 – CTMUHB 2030 Strategy

An effective culture of learning at every level enables the workforce to re-frame their knowledge and includes developing a strong workplace learning infrastructure, cultivating a reputation for training and support and excellence in education.



Fig (3) Organisational Benefits of Excellence in Education

University Health Board Status.

Cwm Taf Morgannwg continues to be recognised as a University Health Board, a status first awarded in 2013, due to activity in three pillars; Education & Training, Research & Development, and Innovation.

Welsh Government has recently changed from a Triennial status review to incorporation of the review into the annual Intermediate Medium Term Planning process, requiring consideration and evidence of university health board activity at every level of strategy and delivery. They have also introduced this year, a requirement for a 6 monthly progress update submission. The potential of University Health Board status, is in the manifestation of the symbiotic and synergistic relationship between three priority activities:



Fig 4

A Learning Culture energises all three elements of university health board activity resulting in Innovation and Improvement

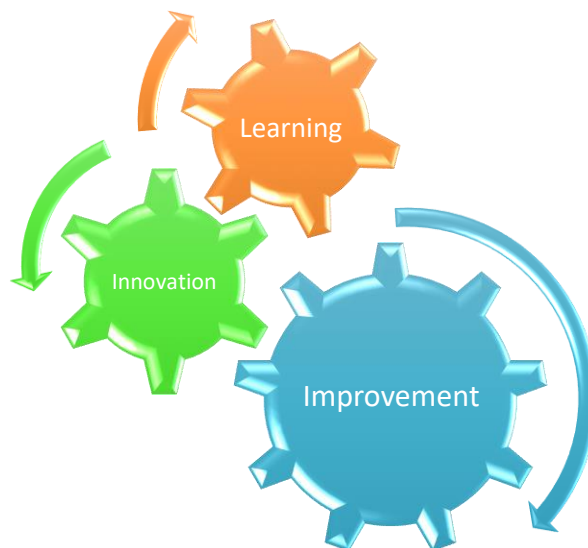


Fig 5

Working in partnership with our Higher Education Institutions (HEI) colleagues in the fields of research, teaching, innovation and evidence based practice, is vital to drive up standards and build momentum for co-creative roles and a collective drive for a better future for our communities.

About Us:

The Clinical Education function sits within the portfolio of the Executive Director of Nursing and Midwifery. There are also strong professional leadership accountability lines with the Medical Director and Director of Therapies & Health Care Sciences.

Over 21-22 focussed development work commenced to bring together what was a group of separate departments to create a cross-functional multi-disciplinary Clinical Education Service. This work will continue over 22-23 and will support and enable the delivery of the Strategic Direction for Clinical Education in CTMUHB.



Fig 6 Clinical Education Team.

The Clinical Education Service encompasses the following functionalities:



Fig 7 Clin ED Services

We are a highly-skilled education workforce of both clinical and specialist administration staff. A central management structure ensures overarching CTMUHB wide consistency of service whilst dedicated education teams manage, deliver and support education activity across all 3 acute hospital sites; Prince Charles, Royal Glamorgan and Princess of Wales and at Keir Hardie Academic Centre. Over 21-22 we have also utilised temporary training accommodation in Ysbyty George Thomas.

Clinical Professional Education.

Undergraduate/ Pre-registration Education and Training

CTMUHB as an organisation contributes significantly to the education and training of healthcare professional students in Wales. Each year our organisation delivers undergraduate clinical placement training weeks including:

- > 6000 medical student training weeks
- > 10,000 student nurse weeks
- > 1600 AHP student weeks

Over 2021/22 we have worked in partnership with 5 universities (HEIs) to deliver clinical placements for healthcare professional students:

- University of South Wales including–
 - Nursing & Midwifery. (*Operating Department Personnel and Part time Occupational Therapy, Physiotherapy courses commencing 2022/23*)
- Cardiff University including
 - Medical, Physiotherapy, Occupational Therapy, Health Care Sciences.
- Swansea University including
 - Nursing, Paramedics and Physicians Associates.
- Cardiff Metropolitan University including
 - Speech and Language Therapy, Dietetics, Podiatry.
- Open University (will be Bangor University from 22-23)
 - Nursing.

Focus on Nursing

The following preregistration routes to nursing are supported:

- Full-time 3 year programmes
- Flexible routes in either Adult or Mental Health (Adult and Child Fields)

The Practice Education Facilitators (PEFs) within the Nurse Education Team actively support the clinical placements within the health board and also deliver clinical teaching within the university. The PEF team also support student issues both clinically and pastorally in collaboration with our clinical and HEI partners.

Student training capacity

CTMUHB	2019/20	2020/21	2021/22	2022/23
Nursing first year student numbers	253	311	323	370

Table 1 Student Nurse allocation numbers

In response to ongoing workforce shortages the number of commissioned undergraduate places for all healthcare professional students is rising. The table above shows the intake number of nursing students allocated to CTMUHB over the last 4 academic years. These nursing students stay with us through the whole of their 3 year programme and represent

our future nursing workforce. Practice Education Facilitator Team work closely with the clinical areas and university partners to ensure areas are supported to provide a positive learning environment. Monthly meetings with our partner HEI's help identify areas for development including those out of compliance with educational audits & struggling with student numbers and also those who go over and above to support our students in practice.

Training capacity is a constant challenge and we are continually working to create innovative placement developments. New for this year were the Community Vaccinations Centres and corporate team placements. Following successful pilot results the Collaborative Learning in Practice (CLiP) model is now embedded in a number of areas with further roll out in nursing and across other professions planned. CLiP develops peer supervision capability, third year students support the first year students and are overseen by Practice Assessors/ Supervisors, also resulting in increased training capacity. Feedback has been excellent with 3rd year students reporting that they have been able to develop their teaching, leadership and management skills and 1st year students enjoying having a more experienced student to approach and support them.

Fitness to Practice (FtP)/Cause for concerns

The increase in student numbers is also accompanied by an increase in student issues. These can include pastoral and clinical concerns. The PEF team and Senior Nurse work across university and health board processes, including referral of clinical cause for concern issues to universities attending FtP panels and participating in FtP hearings as 'expert witness'. They also ensure students are supported in practice through the development of bespoke action plans to achieve required proficiencies and ensure safe and knowledgeable practitioners upon registration. Through the Covid 19 pandemic there was a rise in students needing additional support. We are working closely with university partners to monitor this situation. In 2021/22 there were ten Official Cause for Concern referrals following clinical issues with three resulting in discontinuation from the programme.

New Nursing Education Standards.

The new Nursing and Midwifery Council's (NMC) Standards of Proficiency and Education for Registered Nurses were launched in May 2018. The new standards made significant changes to proficiencies for registered nurses, standards for preregistration programmes, and student supervision and assessment. They also introduced a new education framework and standards for prescribing programmes. These reforms are designed to enable nurses to meet the changing health needs of patients, provide them with more clinical autonomy where appropriate, and prepare them for leadership roles in service.

All nursing students on clinical placements require Practice Assessors (PA) and Supervisors (PS). The PEFs have planned and delivered a programme of preparation for the supervisors and assessors addressing the need to upskill our current staff to support and assess students with aspects of the requirements. There are currently 2233 PA/PS that have received this training on the database (NMC requirement) for CTMUHB.

As the changes to preregistration nursing training become apparent there is also the need to upskill our current workforce to similar levels if not already achieved. The Practice Development Nurses (PDN's) work closely with the PEF's to ensure existing staff will be upskilled and up-to-date.

Internationally Educated Nurses (IEN's)

After a 10 month gap the International Nurse Recruitment project recommenced with a plan to recruit 97 Internationally Educated Nurses (IEN's) by the end of 2023.

A dedicated education team was appointed to support the recruitment and education of IEN's. Previously, with the first cohort, first time pass rate was 90% however this fell to 25% for the 2nd cohort with 4 candidates needing to sit a third and final attempt. Whilst the first time pass rate across Wales seems to be lower throughout all test centres for this phase, an immediate review was carried out. Potential reasons identified within CTMUHB included a newly established exam centre, a required curriculum increase from 10 to 33 skills and an increase in test stations from 6 to 10, and also changes in the timing of training programme delivery.

To improve future exam results the following mitigating actions have been put in place;

- Focussed OSCE training time increased from 20 to 25 days immediately prior to OSCE exams.
- Re-establishment of a Mock OSCE
- 10 days following exam for other relevant and mandatory training.
- Concerns escalated nationally and with NMC.

We will continue to monitor progress closely with the expectation of improved results with cohort 4. (Training for cohort 3 had been completed by the time results for cohort 2 were received)

As a continuing support to the development in practice of the IENs and in response to feedback from the previous project from the IEN's and Ward Managers, a 'Post OSCE' programme has been developed.

Focus on Medical Undergraduate Training

During Academic Year 21/22 we delivered teaching/placements across the 5 year medical undergraduate (UG) programme–

Year of course	Student weeks	Number of students
1	180	113
2	266	222
3	2312	289
4	1952	262
5	1120	140

Table 2 Medical student numbers across 5 year course in 21-22

Focus this year has been the re-establishment and allocation of SIFT funding. Part of the transitional funding was identified to support the development of a new UG faculty with various appointments to be made to support the comprehensive support, coordination and delivery of UG education. As with all the health care professional students these individuals are our future workforce and it is essential that their education, training develops safe, competent and confident clinicians and their experience with our organisation is of one they want to come back to work for in the future.

Clinical Fellows

There are now 6 Clinical Fellows in Medical Education across CTMUHB, 2 based at each of our acute sites. These appointments are one year tenure and include a level 7 education

qualification. The continuous availability of dedicated teaching clinicians has significantly underpinned the robustness of training delivery and has received fantastic feedback from students.



Fig 8 Clinical Fellow student feedback

Underpinning Administration and Co-ordination.

We have also made significant progress in strengthening the underpinning education administrative function. Feedback from students clearly shows the impact of the administration team.



Fig 9 Admin team student feedback

We have additional plans for the use of the development funds in terms of simulation and widening access activity e.g. the creation of simulation scenarios at the USW Simulation suite and various new widening access initiatives.

Undergraduate (UG) Faculty Structure

The following diagram illustrates the progress that we have made so far in strengthening the UG Faculty structure.

We are currently in the process of appointing Module Leads and supporting Honorary Lecturers to the final tier in the organisation chart.

August 22 Update UG MEDICAL EDUCATION STRUCTURE

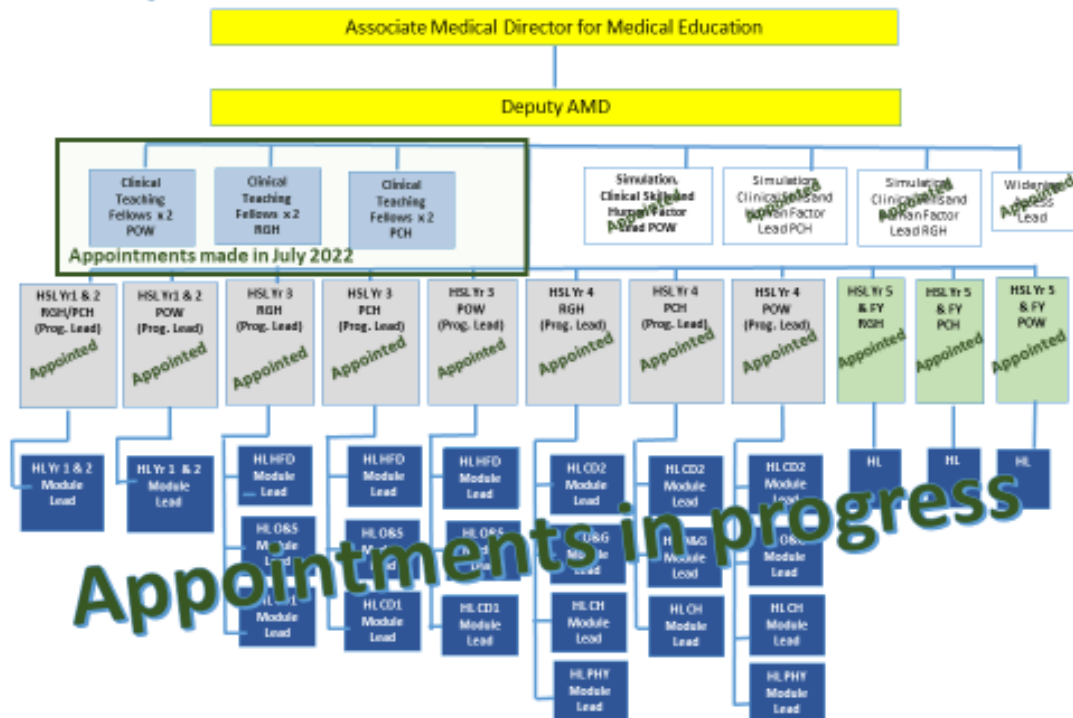


Fig 10 UG Medical Education Faculty Structure

Post Graduate/ Post registration Education and Training.

The Clinical Education Service manages the education, training and development of registered clinical healthcare professionals including:

- Design and delivery of bespoke in-house education programmes to meet training needs e.g. New Nurse Graduate development programme, education packages in response to Clinical Incidents e.g. Nasogastric training, International Nurses training.
- Delivery, Management and co-ordination of Education pathways for Foundation Medical Trainees.
- Management of Health Education Improvement Wales Advanced Practice & Non-Medical Prescribing funding streams.
- Management of HEIW (HEIW) Nursing CPD allocation via University of South Wales.
- Library and Knowledge Management services.
- Recognition of Acute Deterioration & Resuscitation and Clinical Skills including advanced programmes accredited by the Resuscitation Council and Royal College of Surgeons.
- Action Learning Set methodology to support participants to understand organisational context to better apply and embed learning from e.g. MSc in Digital Skills for Health Care Professionals (University of Wales Trinity St David)

Focus on Nursing post registration

The Nurse Education Team have developed and implemented a New Registrant Nurse Induction Programme for all graduate nurses employed within the organisation across all fields of nursing. The structure of the programme is based on research which recommended that, novice nurses are best supported by structuring their experiences in clinical practice while supporting and enabling them to achieve their goals through the learning continuum and their career progression. The aim and structure of the programme was to aid recruitment and retention of newly qualified nurses (or within 6 months of qualifying). The staggered structure of the course allows the graduates to transition into their new role and acquire new skills gradually before they progress to the next level, preventing overwhelm in their new role. The impact of this programme is continually evaluated and amended to ensure clinical need is met. In 2021-22 126 Newly Registered Nurses attended the programme.

The Professional Development and Innovation Programme, targeted for nurses in band 6 roles, focusses on developing their experience of management, leadership and innovation roles to consolidate preparation for the next phase of their careers. The programme is a valuable resource in supporting our Band 6 Nursing workforce, to date 38 Registrants have attended the programme with more dates planned for 2022-23. Leadership and communication themes are at the core of this programme including:

- Demonstrating the role & responsibility of Junior Sister.
- Demonstrating the ability to manage performance.
- Demonstrating their role in relation to managing people.
- Demonstrating their responsibility in relation to managing resources.
- Demonstrating their responsibility in relation to empowering others.

What is clear from the impact of this programme is the agency and self-authorisation shown by the participants to in offering their leadership through their roles and really making a difference, for colleagues, patients and their care.

Focus on Medical post grad

In Academic Year 2021/22 CTM UHB had a total of 72 Foundation Year 1 (FY1) doctors and 59 Foundation Year 2 (FY2) doctors starting their rotations across the three acute hospital sites. In addition, throughout the academic year, we held induction for 281 junior doctors as they started with the UHB. This induction covers corporate/legal requirements and site-specific information.

Foundation training for FY1 and FY2 took place weekly on specific, regular times on each acute site. In addition we held frequent, speciality-related teaching and journal clubs through the year. We also trialled four simulation afternoons for the FYs which proved to be very beneficial for the new curriculum.

For junior doctors we facilitated weekly teaching as well as ad hoc events and "Grand Rounds" for all trainees and consultants.

Performance

Performance is monitored via the HEIW Quality Unit. The HEIW CTM UHB "Risk register", maintained by the Quality Unit, records areas of concern through a number of different data sources, most notably the General Medical Council (GMC) National Trainee Survey.

The sources of concern can range from anecdotal evidence, to formally recorded results on GMC surveys, and the scope of the "risk" from a single point of contact, to covering the whole health board.

HEIW formally review risk position with the health board 3 times a year, operating on a traditional traffic light system. The current version of the risk register (August 22) has 24 risks (23 in September 2021). The Associate Medical Director (Education) and the Clinical Education Manager continue to tackle each individual risk, liaising with trainees and trainers as required, collecting and collating feedback and assisting with the development of action plans. The matrix below shows the risks from September 2021 to August 2022. Medical Education has developed a process for continual monitoring of risks, further detail can be found on p 31 and appendix 1

Acute site Matrix August 22

		Aug 2022	Sept 2021
RED RISK High Risk	RTE	0	0
	MC	3	1
	BRIDGEND	0	0
	ALL	0	1
ORANGE RISK Medium Risk	RTE	5	4
	MC	6	3
	BRIDGEND	4	4
	ALL	2	1
YELLOW RISK Low Risk	RTE	1	4
	MC	1	1
	BRIDGEND	1	4
	ALL	1	0
TOTAL		24	23

Table 3

Bespoke Education and Training activities

The Teaching skills for Doctors Course is an in-house development which has been so successful that an additional course was commissioned by HEIW. We expect this course to run at least twice a year in the future.

In Prince Charles Hospital we ran the Neonatal Boot camp in August 21, December 21 and April 22, with exceptional feedback and intend to continue this activity.

Likewise we intend to continue development of hybrid study days after a successful Cardiac Study day in Princess of Wales, with a screen of online delegates, and separate cameras and microphones for attending delegates, to ensure interactivity.

The annual Teaching and Educators Development Conference (TED) was held in POW on the 1st of July and was themed "Future Proofing Medical Education." 70 delegates attended and talks and workshops were given with members of CTM UHB clinical staff, as well as contributors from HEIW and Cardiff University.

Continuing Professional Development Education

It is absolutely essential that continuing education for all staff is aligned to and centred on patient care and service developments.

Focus on Nursing

CTMUHB and the University of South Wales (USW) continue to have an excellent partnership and team approach ensuring that the educational requirements of practice are met with the academic infrastructure of the University.

Clinical Education manages utilisation of the contract with USW for continuing post-registration education for nursing and midwifery. The equivalent of approx. 350 module places per annum are available via an internal application and allocation process. Clinical Education continue to work with the USW to develop modules and educational courses which are tailored to support specific service change across the organisation. e.g. Education day on Clinical Supervision.

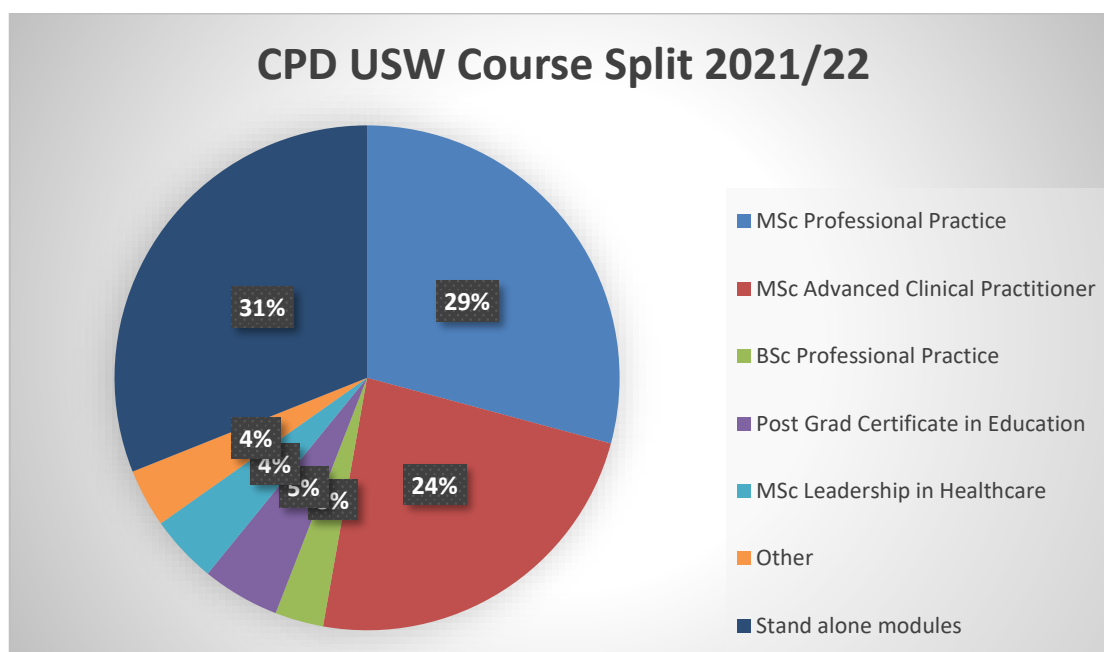


Fig 11 CPD USW Course Split 21-22

Focus on Multi-Professional Advanced Practice

Welsh Government via HEIW continue to invest in health professional education by providing annual funding for *Advanced Practice & Extended Clinical Skills*.

The funding provided by HEIW is to supplement our local investment to ensure that the appropriate staff can access the educational requirements as identified in our Integrated Medium Term Plan (IMTP), in terms of advanced practice/extended skills education requirements and Non-Medical Prescribing programmes. This funding is utilised across our organisation and is inclusive of nursing, therapies & healthcare scientists. There is a separate funding stream for Pharmacy advanced practice and prescribing.

The allocation is informed by an annual CTMUHB Education Commissioning return including undergraduate and advanced practice education requests. HEIW notifies the UHB of its Advanced Practice and Non-Medical Prescribing allocation between April and May each year the allocation is split across primary and priority areas in acute care settings.

Advanced Practice allocation is agreed via a Multi-professional Allocation Group and managed via Clinical Education. All applications must describe the intended service impact to be achieved as a result of the educational request. We meet requests flexibly across both Advanced Practice and Nursing CPD funding streams where appropriate to maximise access to funding for all health care professions and to enable optimal use of resources.

HEIW also funded 40 places for Independent Prescribing Programmes in 21-22 (30UoSW and 10 Swansea). All funded places are available to a range of professions across the organisation.

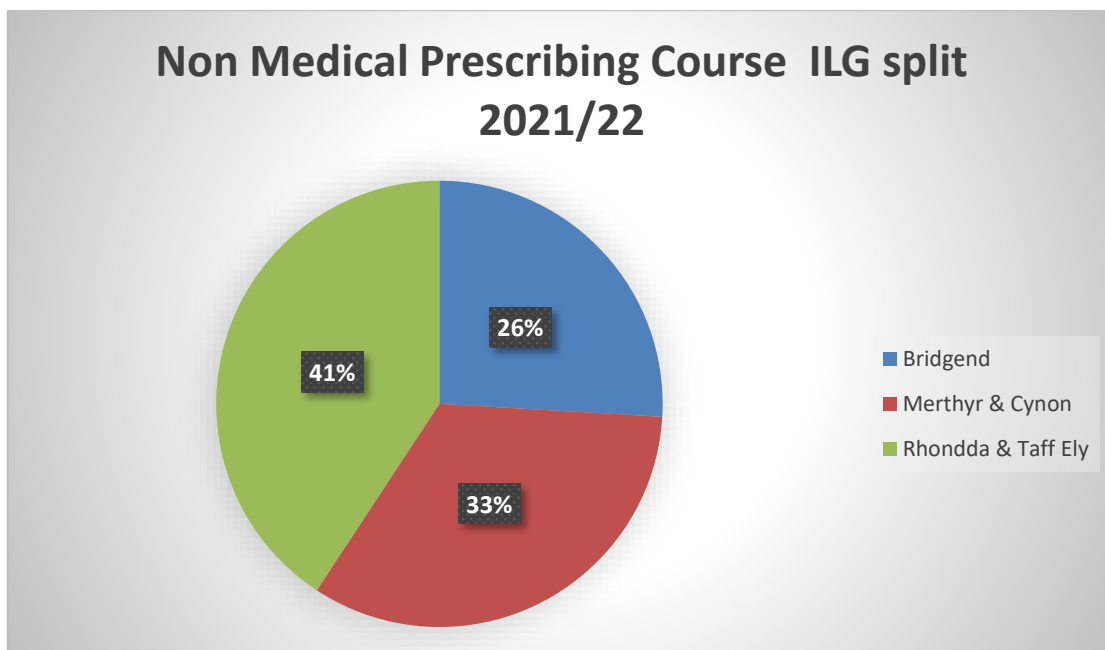


Fig 12 NMP ILG split

New for 2022-23 are Practice Specific Funded training places, these include Child and Adolescent Mental Health, Critical Care, Medical Ultrasound and Reporting Radiology.

Health Care Support Worker (HCSW) Education

Clinical Education supports the skills and career development education pathways for health care support workers across CTMUHB as defined in the HCSW Framework, including clinical and non-clinical roles in primary and secondary care settings.

HEIW continues to allocate funding to CTMUHB for HCSW Education and Development in line with compliance with the All Wales HCSW Framework, with £258,377 being allocated 2021/2022.

21 Clinical HCSW Inductions (5 Day Programme) with 214 staff trained and 16 Consolidation days covering 235 staff were delivered over 21/22. The consolidation days were developed and delivered to the HCSW's that were recruited during the Covid recruitment phase as they had received a shortened, non-accredited Induction, this ensured that any of the HCSW's still in employment worked towards the accreditation in line with other clinical HCSW's.

There were 14 NEWS and Physiological Measurements Agored accredited training days scheduled, due to requests from service and in response to the Acute Deterioration Lead's request. Only 5 days were delivered to 22 HCSW's due to challenges with staff release because of service pressures during the latter part of the year, again due to increase in staff sickness because of another small wave of Covid at the end of 2021. This Covid wave also meant that members of the HCSW Team were redeployed to Community Vaccination Centres for a period of a month to assist with the delivery of immunisations.

The numbers of HCSW's progressing through the framework during this period via Credit and Qualifications Framework Wales (CQF) Level 2&3 Apprenticeships saw a rise as service pressures eased slightly pre-winter and the expansion of the HCSW Team. This has enabled the Clinical Trainers to identify HCSW's that are out of compliance with the framework and aim to enrol them onto health related apprenticeships, with support from the Apprenticeship's Lead and Coordinator from the Learning & Development team.

There was a healthy interest in the Certificate of Higher Education delivered at USW for September 2022 intake. 29 HCSW's have enrolled on year 1 and 15 enrolled onto year 2 (3 resitting) and 11 graduated and 4 are going directly onto the 2nd year of preregistration nursing via the flexible route at USW. The increased appetite for the Cert HE has been fuelled by the development of Band 4 roles within the community and the need for Level 4 education to underpin these roles.

Reports for compliance with the All Wales HCSW framework are submitted along with an annual detailed bid for ongoing funding to HEIW and this year has seen HEIW request quarterly updates on the progress of the funding spend.

Acute Deterioration, Resuscitation and Clinical Skills

Organisational governance around resuscitation and acute deterioration has been further developed and aligned. The overarching CTMUHB RADAR Committee (Recognition of Acute Deterioration and Resuscitation) is responsible for the strategic management of all Recognition of Acute Deterioration and Resuscitation related issues within the Organisation, supporting the provision of appropriate and effective patient care through implementing operational policies governing the prevention of cardiac arrest and those governing cardiopulmonary resuscitation, practice and training. This approach brought together a number of work streams in order to reduce avoidable mortality and morbidity by improving the function of health board systems that enable early recognition and treatment of deteriorating patients, and cardiopulmonary resuscitation.

It chaired by the AMD for Quality and Effectiveness on behalf of the Medical Director with a Consultant appointed as the Clinical Lead. There is a Lead post for Acute Deterioration which commenced in January 2021 (based within Clinical Education) with a plan to have a structured and unified approach across Cwm Taf Morgannwg University Health board (CTUHB) in the identification, escalation and response to the acutely unwell patient.

This group reports directly to the Executive Leadership Group, via the Medical Director with links to the Quality & Safety Committee

The work of this governance structure is directly supported by the Head of Clinical Education, the Lead Nurse for Education and the Resuscitation & Clinical Skills team.

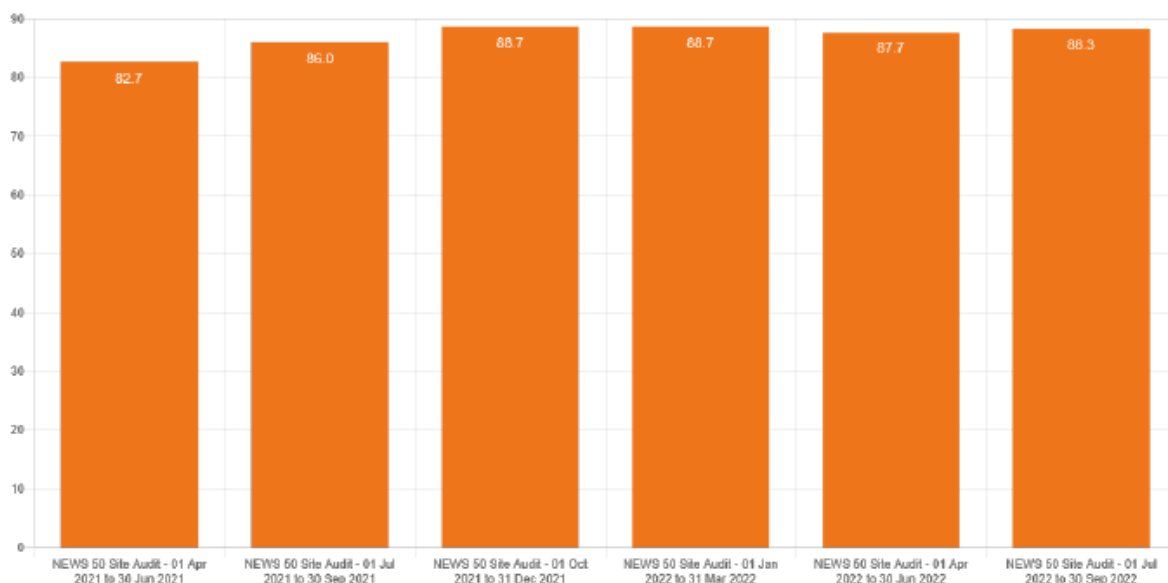
Acute Deterioration

National Early Warning Score (NEWS)

To provide a consistent approach across CTMUHB the National Early Warning Score (NEWS) chart has been updated to include NEWS 2 principles and standardised across CTMUHB wards. NEWS is based on a simple aggregate system in which a score is allocated to physiological measurements already recorded at the patient's bedside, the aggregated score then generates a clinical response. NEWS aids the identification of the deteriorating patient. In addition to differentiate the escalation procedure within the community hospital environment a tailored escalation procedure has been developed for the community hospital sites.

In order to provide assurance within the health board that the NEWS charts are completed accurately and appropriately escalated an audit pro forma has been developed based upon NICE CG50. Data is entered monthly onto the Audit Management and Tracking (AMaT) system. Results are disseminated to all ward managers, senior and head of nursing for review. Any compliance issues are also discussed within the ILG Recognition of Acute Deterioration and Resuscitation RADAR meetings. NEWS audits are used to provide evidence of learning in Learning from events reports (LFER).

The plan for 22-23 is to perform a health board wide audit of all NEWS charts within a 24hr period within secondary sites to identify the burden of acute illness and evaluate the response to acute illness.



Audit: NEWS 50 Site Audit | **Grouping:** Audit | **Date range:** 01/04/2021 to 30/09/2022
NEWS 50 Site Audit - 01 Apr 2021 to 30 Jun 2021: NEWS 50 Site Audit | **NEWS 50 Site Audit - 01 Jul 2021 to 30 Sep 2021:** NEWS 50 Site Audit | **NEWS 50 Site Audit - 01 Oct 2021 to 31 Dec 2021:** NEWS 50 Site Audit | **NEWS 50 Site Audit - 01 Jan 2022 to 31 Mar 2022:** NEWS 50 Site Audit | **NEWS 50 Site Audit - 01 Apr 2022 to 30 Jun 2022:** NEWS 50 Site Audit | **NEWS 50 Site Audit - 01 Jul 2022 to 30 Sep 2022:** NEWS 50 Site Audit

Fig 13. CTMUHB NEWS audits (quarterly view) April 21-Sept 22

The Critical Care Outreach Teams (CCOT) undertake the NEWS training within the secondary sites. NEWS training is also provided by the health care support worker programme and the resuscitation practitioners during Immediate Life Support and Advanced Life Support.

To complement the Immediate Life Support (ILS) course provided by the resuscitation team, the Acute Life Threatening Events-Recognition and Treatment (ALERT) course has been introduced across CTMUHB for all registered nursing staff. This ensures a unified approach to education to manage an acutely unwell patient within a ward environment. The plan for 22-23 is to extend the provision of the course and develop a multi-professional faculty to facilitate, this would provide best learning environment for the candidates on the course.

Rapid Response

To standardise the response to deteriorating patient within CTMUHB a rapid response call has been added to the 2222 emergency call list within Prince Charles and Royal Glamorgan Hospitals. A rapid response call is already established within Princess of Wales Hospital.

The Rapid response call aims to prevent cardiac arrest, initiate treatment decisions, and initiate timely specialist reviews by earlier escalation of the deteriorating patient. To audit the number, timeliness of response and the outcomes of the rapid response calls, a Rapid response and cardiac arrest audit pro-forma has been developed. This together with the emergency call data from switchboard provides information of the effectiveness of the escalation system within CTM.

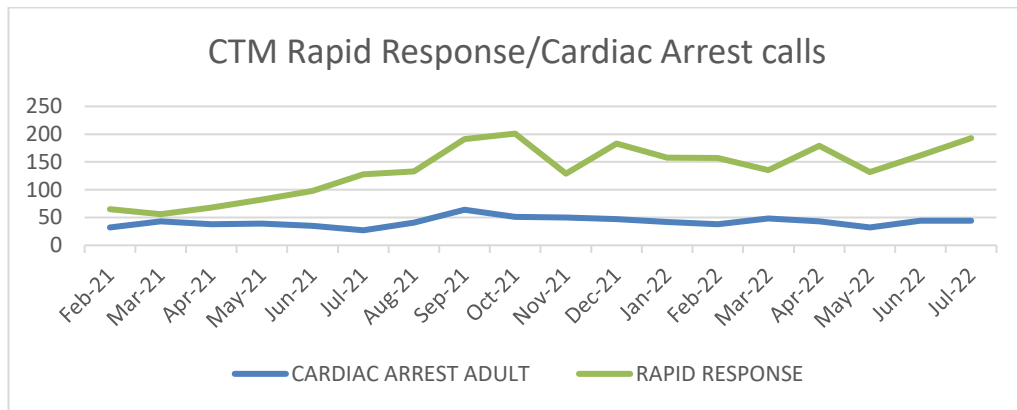


Fig 14. Number of Rapid Response/Cardiac Arrest calls CTM April21-July 22

To further review the escalation system an audit of Cardiac arrests occurring in wards is being developed. This would enable any gaps in escalation to be identified and facilitate training

Fig 4. Rapid Response Outcomes

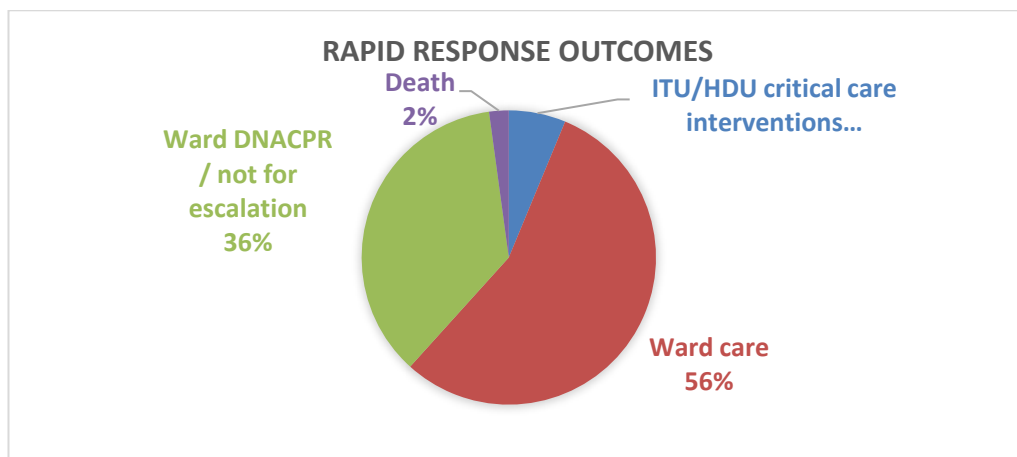


Fig 15 Rapid Response outcomes

Results from data entered into AMaT indicate that over 50% of the rapid response calls result in patients remaining on the ward. This could be due to improving condition following interventions by the Rapid response team. Also 36% of the calls result in timely decision making which can prevent inappropriate admissions to Intensive care and prevent cardiac arrests. It is intended that with the introduction of Treatment Escalation Plans (TEP) that timely decisions around escalation and DNACPR would lead to a reduction in these decisions made at a rapid response call leading to an appropriate outcome for the patient.

Sepsis.

Sepsis can be one of the causes of deterioration within a patient and if not identified and treated timely can lead to multi organ failure and increased admission to Intensive Care and deaths. Within CTMUHB there were several sepsis screening tools in use. Therefore to ensure consistency in the identification of sepsis within the hospital setting a new sepsis tool has been developed using a collaborative approach between pharmacy, medical and

nursing leads. The new sepsis tool focuses on risk stratifying patients into categories to ensure those at most risk receive timely care.

To support the timely administration of antibiotics the first line antibiotics for use within Emergency departments was unified and the addition of a QR code helps to reduce the time to prescription and administration in the patient with probable sepsis.

The sepsis tool was trialled within the three Emergency departments for a period of three months, initial results indicated an increase in the use of screening from 7 screening forms to 90 forms per month and increase in compliance from 34% to 63% with timely treatment.

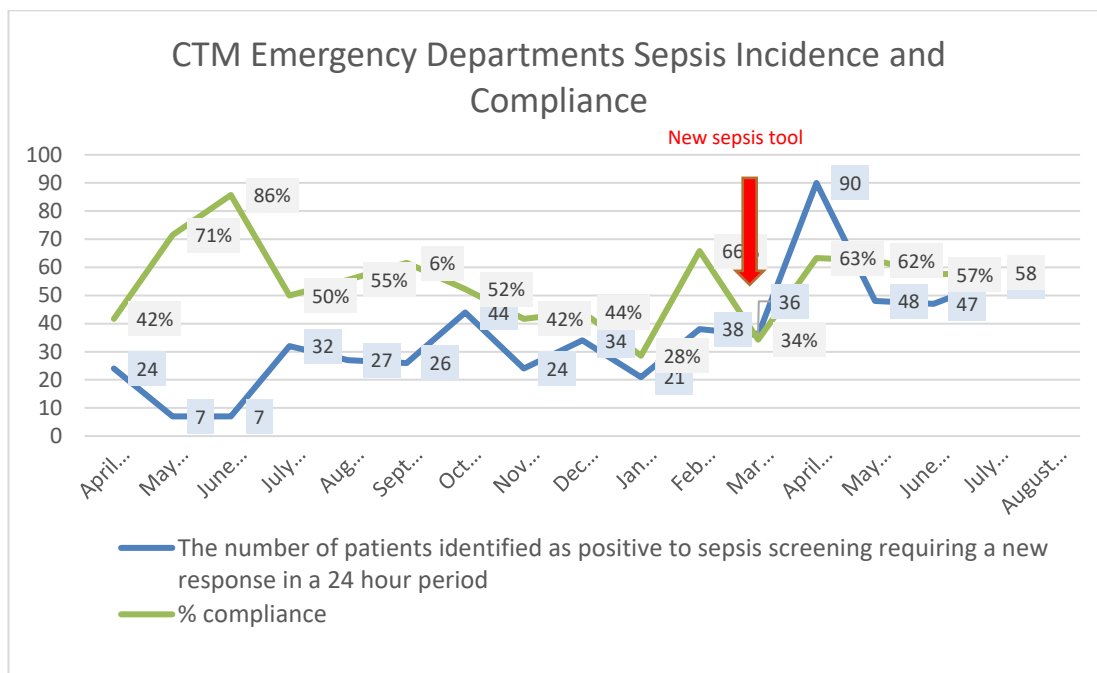


Fig 16 CTM ED Sepsis compliance

Ongoing work continues with the roll out of the sepsis tool to the wards within both secondary and community hospitals and this would formulate the plan moving into 2023. Plans are in place to collaborate with our CTMUHB communities to raise awareness of sepsis and signpost to the relevant areas for support which aligns with **Our Health, Our Future, CTM: 2030**

Resuscitation and Clinical Skills

Throughout 21-22, there was a focus on standardisation of Resuscitation Standards CTMUHB. This included a complete review of the CTMUHB resuscitation policy, and a renewed resuscitation training compliance matrix for the organisation. Additionally, the resuscitation equipment was standardised across the health board, with a major change to equipment taking place in Princess of Wales Hospital with the rollout of new resuscitation trolleys across what was then the Bridgend locality group. The standardisation of equipment, along with the rollout of the Rapid Response Calls, has not only improved patient safety, but has also rationalised equipment with a significant reduction in equipment utilised.

During 21-22 the Royal Glamorgan Hospital and Prince Charles Hospital, received a roll out of 40 new defibrillators along with the relevant training of staff to ensure competence and safe use.

The service also provided support and training for staff to rollout a new standard operating procedure in Ty Llidiard, as part of the response to a Welsh Government investigation into a recent incident. This included working closely with Welsh Health Specialised Services (WHISSC) Committee and Welsh Ambulance Service NHS Trust (WAST) to create a hybrid 2222/999 response to emergency calls.

The Resuscitation Service continues to deliver mandatory life support training from Level 1-3 (graph 1 and 2), for CTMUHB, Powys HB and all local GP's and Dentists. The department is also a leading National provider in the delivery of Level 4 Advanced Resuscitation Courses, for Adults, Paediatrics, Newborns and Trauma. These courses are delivered on an income generation basis, with internal and external faculty engagement required to deliver. The number of staff trained is outlined below.

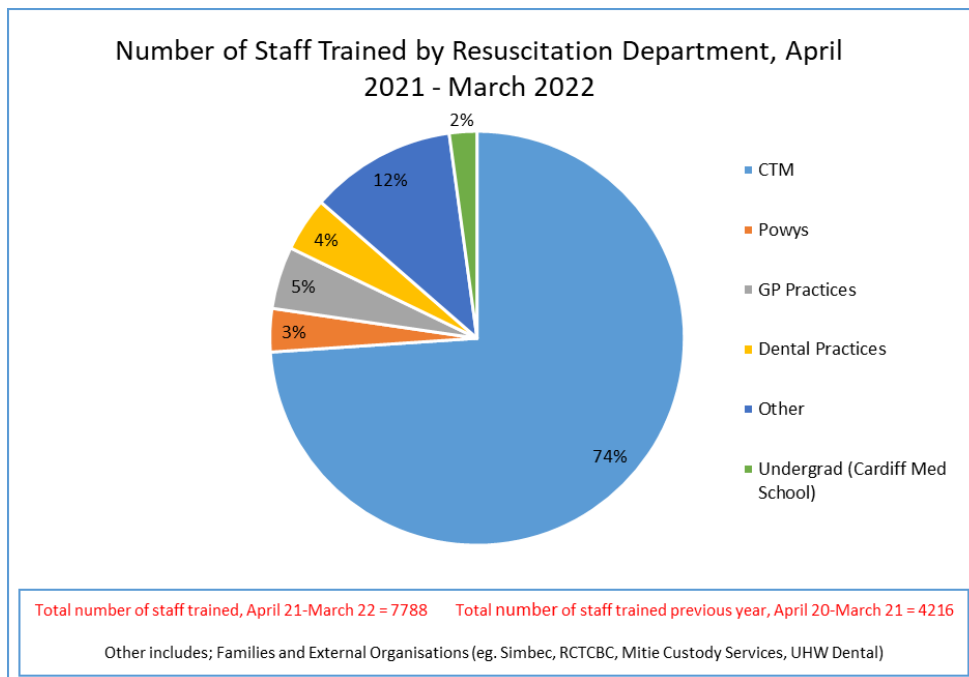


Fig 17 Staff trained, April 2021 to March 2022

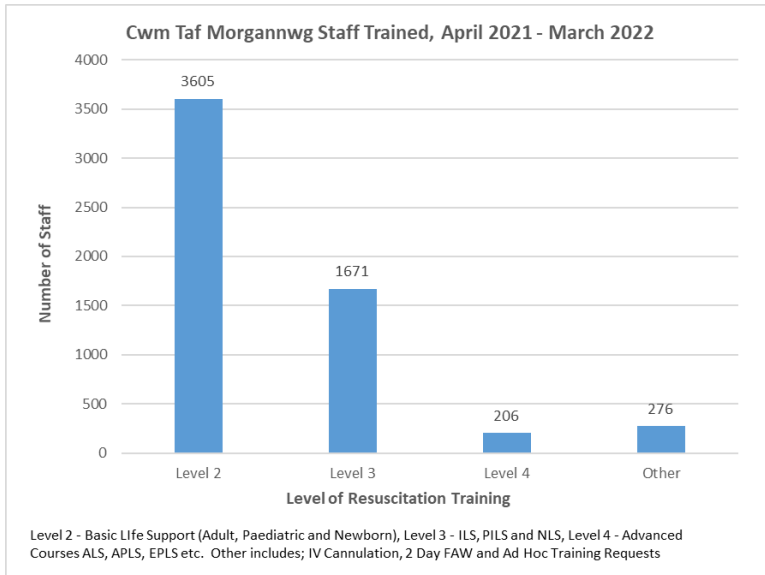


Fig 18 Level of training numbers.

Vaccination Teams across the UHB have been supported with training to enable them meet the urgent demand throughout the Covid-19 pandemic. We have also assisted in the upskilling 44 ITU staff and 52 Paediatric staff with level 3 Paediatric Immediate Life Support (PILs) in response to the Respiratory Syncytial Virus (RSV) risk.

Over the past year, the Resuscitation Team worked collaboratively with the Practice Development Nurses and Midwives (PDN & PDM) to deliver 'Train The Trainer' (TTT) 'in house' training programmes for Level 2 Basic Life Support, increasing flexibility and opportunity to offer further training places and therefore increasing compliance. This in turn releases time for the Resuscitation Practitioners and Training Officers to focus on the delivery of Level 3 training, organising and facilitating debriefing sessions following arrest calls, investigating and preparing evidence for Rapid Reviews and scrutiny panels, attending 2222 calls, cardiac arrest audits, and Datix queries. Through this activity areas for improvement are identified and training needs incorporated into future training programmes. E.g. redesign of the cardiac arrest audit form. The revised audit enables identification of areas needing improvement in training and provides a trail of decision making.

Libraries and Knowledge Management.

There are dedicated Libraries on each of the acute sites operating 24/7 access for our staff and students, to our literature collections; journals and books, both electronic and physical, quite study space with IT access & printing. Our specialist librarians are also available for help and support including literature searching, reference sourcing and critical analysis skills. Our libraries are an important part of our health board activity.

Library Usage	Footfall	Loans	Literature Searches	Current Awareness	Articles via Library
PCH	34917	1054	24	n/a individually	259
POW	21427	3405	163	"	870
RGH	26828	1774	26	"	248
Totals	83172	6233	213	130	1377

Table 4 Library Usage Stats

Updated Facilities

The Library at PCH has been moved into a new modular building for the next five years as part of Phase 2 redevelopment of PCH.

The library team at PCH worked hard organising the move and ensuring there was as little disruption as possible. The new accommodation is a great improvement on the old facilities and is a bright, welcoming area for users to work and study. Library facilities at RGH and POW have also had a refresh with new furniture and printing facilities.



Fig 19 Updated facilities PCH/ increased study space POW

CLA Submissions

The team at RGH have been working on a new methods of data collection for the Copyright Licensing Agency via the Library Management System which involved working closely with the Systems Librarian at Cardiff University. This is now up and running and is being used across NHS Wales Libraries as the main data collection method for this submission. From 2023 this data is being collected annually rather than 3 yearly and will make the process much quicker and simpler.

NHS Wales Library & Knowledge Services (NHSWLKS) & UpToDate Survey

The NHSWLKS survey was launched on the 10th May until the 4th June 2021. Feedback was excellent with 84% of respondents saying they were very satisfied with the Library & Knowledge Service at CTM.

"The library provide an excellent service and I am truly grateful for all the support they have provided to me. It would not be possible to provide patient care which is in keeping with the latest evidence without their support. They are an essential part of any health board team." [AHP]

Fig 20 Library feedback

UpToDate

To aid the renewal of UpToDate a User Survey was sent to Medical Staff across CTM. The response rate was very good with 96 responses, all recommending that UpToDate is renewed. This information enabled us to repurchase the resource on a 3 year contract (with the option to opt out at the end of each year). Some of the user comments are below:

"I often use up to date to refresh my clinical knowledge of conditions I do not encounter very often. It has also been useful in the wards in reading the latest research on rarer conditions providing better care for those patients."

"Easy point of reference for clinical conditions. Helps to avoid delay in care, unnecessary investigations and offers better patient care. By having one single point of reference it is more efficient to visit one site that searching for multiple."

Staff Development & User Training

A number of online training courses have been made available to Library staff by the NHS Wales Library network. These have ensured that as a service we remain up-to-date with changes and new technologies. Some of the topic covered include:

Advanced literature searching, Artificial Intelligence, Accessing e-Books, Presenting searches to the end user, Using Scopus, Critical appraisal

The Specialist Librarian (POW), received her Chartership from CILIP, the library and information association.

Several online webinars have been provided nationally on how to search databases etc. effectively with support from CTM LKS staff. New short online videos to support library users

have been developed e.g. Accessing e-resources from the NHS Wales network. In person inductions, teaching and training has increased as pandemic restrictions have eased.

Wellbeing

The LKS continues to support the HB wellbeing agenda with a range of books and resources and this year managed the distribution of Chillo pillows to staff.

Bilingual Leaflets

All of the CTM Library guides and leaflets have now been translated into Welsh.

Strategic Direction Progress

This report reflects the progress made over academic year 21/22 to a more integrated Clinical Education Service from departments that have historically functioned separately.

The Strategic Direction for Clinical Education in CTMUHB is to become a Learning Academy meeting the individual education needs of each profession whilst also taking a multi-disciplinary education and inter-professional learning approach, encompassing and enabling benefits from diversity of thought and skill set, contributing to improving patient care and population health and wellbeing.

Creating, sustaining and growing a Learning Culture in Clinical Education

Our Clinical Education Strategy follows a hierarchy of needs model to build and ensure motivation of the individual and therefore supporting and nurturing the development of a Learning Culture in CTMUHB.

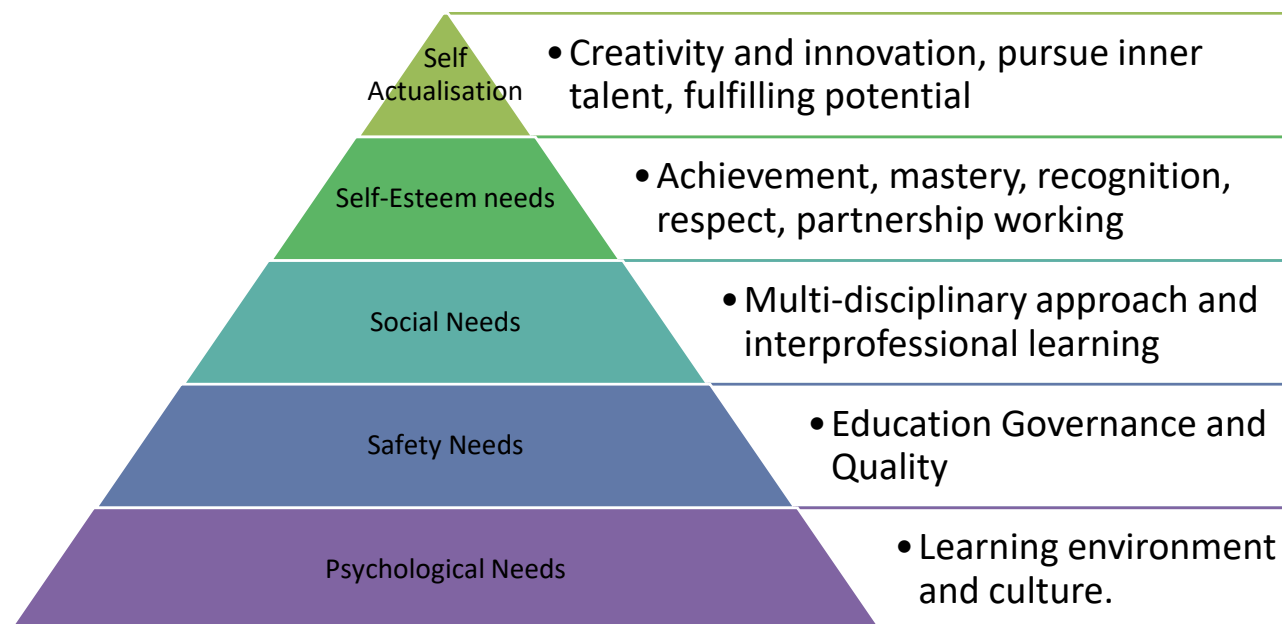


Fig 21 Hierarchy of Needs

Learning Environment and Culture: Resource investment and utilisation

Direction:

- *Quality and excellence in Education and Training is an established and valued part of organisational culture.*
- *CTMUHB is a Centre of Excellence for multi-professional learning.*
- *There are clearly defined, recognisable, flexible, accessible, up-to-date Clinical Education facilities that meet the learning needs of learners from all professional groups.*

Progress over 21-22

Our Facilities

Over 21/22 inspired by work with University of South Wales, we have raised the profile and identity of our service through a branding and refresh of Clinical Education facilities across all sites.



Additional study areas have been added which have been popular with our HCP students and staff using our libraries facilities.

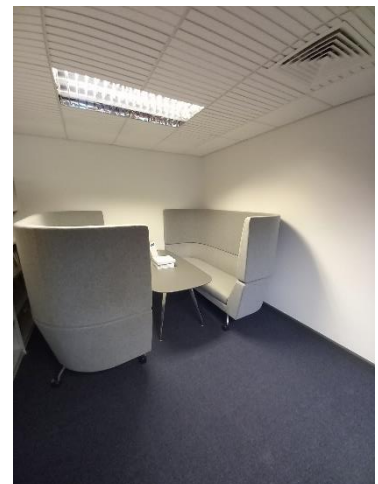


Fig 22 RGH Refresh

During January 2022, the Clinical Education function in PCH moved to its new interim accommodation as part of the PCH rebuild. This has enabled the co-location of some historically separate elements of Clinical Education resulting in beneficial integration of services, efficient sharing of resources, updated facilities and improved layout.



Fig 23 PCH Clinical Education Centre

Learning from this move has also highlighted the need when planning commences for the final location of Clinical Education in PCH, to include libraries and nursing education in the co-located provision.

We are also, with financial investment through IT, coming to the end of a comprehensive Audio Visual (AV) equipment refresh, to ensure that all the rooms available for Clinical Education, have consistent and functional AV capability.

Much work has been done to align and standardise Service Increment for Teaching (SIFT), funding that the organisation receives to deliver medical student education and training as per Cardiff University C21 curriculum requirements.

Significantly, following extensive discussion and evidence gathering, Clinical Education and Finance agreed a two/three year plan with the purpose of better identifying the flow of SIFT funds to services and directorate budgets. This will enable the robust resource support of the undergraduate medical education activity, alongside increasing governance and clarity over the utilisation of SIFT funds.

Permanent training accommodation continues to be a challenge as the demand for increased clinical space becomes an issue across all sites and services.

It has been recommended that the creation of a dedicated multi-professional Education and Learning facility should be included as part of the strategic site development plan.

Strong workplace infrastructure - Education Governance and quality infrastructure.

Direction:

CTMUHB has established effective systems of educational governance and leadership

- 1. A robust and established Clinical Education Governance infrastructure providing confidence and assurance for individuals and the organisation of excellence in Clinical Education and Learning activity.*
- 2. A clear and well developed understanding of Clinical Education, Training and Learning activity and risk management across the organisation.*
- 3. Maturing organisational processes around clinical education commissioning, informed and aligned with service delivery priorities and training needs analysis,*

supporting the development of new models of care, innovative service redesign and workforce modernisation.

Progress towards these aims in 21-22

1. Significant progress has been made over 21/22 to develop and establish robust organisational wide education governance infrastructure to assure high quality education and training meeting the requirements and standards determined for the NHS in Wales, with oversight of undergraduate and postgraduate education and continuing professional development for all registered health care professions and clinical healthcare support workers.

The purpose of the Clinical Education Forum is to provide effective systems of educational governance and leadership that ensure optimal investment and resource utilisation in education activity to support and underpin the capability, capacity and confidence of our clinical workforce.

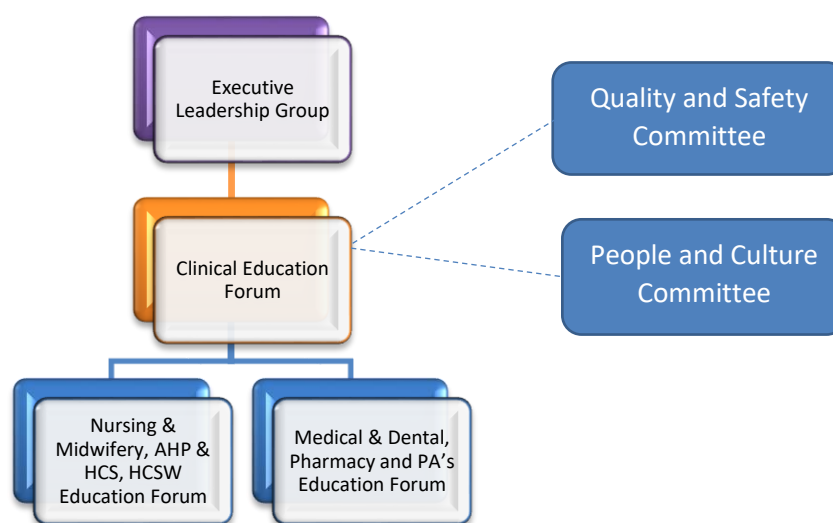


Fig 25 Clinical Education Governance Structure

2. Our risk management processes are maturing and example of this is the approach developed for managing postgraduate medical education risk register as maintained by Quality Unit HEIW.
 - a. Medical Education have now developed a process for continual monitoring of the register and formally request updates from Faculty members, seeking continuing consideration of the issues by acute site. The risk register is addressed and updated formally within the internal Medical Education function (AMD Education and Clinical Education Manager). Alongside this process, HEIW undertake a series of targeted visits, meeting with trainees and trainers to assess issues and monitor progress.
An example of a monthly monitoring report can be seen in Appendix 1
3. Over 21-22 the Head of Clinical Education worked in close partnership with the Deputy Director of Workforce and OD to develop a more robust process for collating annual Education Commissioning numbers return for HEIW. Heads of Workforce and OD worked with locality directors and profession leads to identify requirements at a locality level and these were collated into an overarching CTMUHB wide commission.

Regular sense check meetings were held to review submission status, compare to previous years, identify any outstanding gaps in information and to develop an accompanying service development and workforce position narrative. Further refinement of this process and consideration of the new organisational structure will be reflected in activity for 2022-23.

Multi-disciplinary Learning and Inter-professional Development.

Direction:

*There is a high quality multi-professional education model that delivers equitably for **ALL** healthcare professionals and their support staff. Meaningful inter-professional learning and development is evident throughout the education model.*

As part of a Review of Health Care Professional Education in Wales, HEIW has given a clear direction to education providers that, in addition to meeting professional regulatory standards there must be delivery of meaningful inter-professional learning opportunities through clinical placement activity and beyond into post grad/ post registration career pathways.

Progress in 21-22

We are making good progress in establishing more meaningful interprofessional learning within the health board.

- As a result of learning from a joint project with Swansea University; Working in Partnership to develop a Learning Outcomes approach to Clinical Placements for Paramedics and Nurses' (3) CTMUHB developed and appointed the first Multi-Professional Practice Education Facilitator (MPEF) role in Wales who works across all clinical professions and HEI's with a focus on learning activity opportunities to meet the HEIW requirement of 150hrs of interprofessional learning on clinical placements.
- Informed by the recommendations from the project above, over 22-23 HEIW are looking to provide targeted funding for further MPEF roles across health boards in Wales.
- The staff on the MSc for Digital Skills for Health and Care professions were supported through the first year of their programme with regular multi-disciplinary Action Learning Sets (ALS) to enable their learning through orientation to the landscape of CTMUHB digital context and building of key networks to sustain application of learning directly back into the organisation at pace. Inter-professional learning was enabled by dedicated time and space for reflection, knowledge sharing and sense making. Key digital organisational contacts linked into the group included Director of Digital and Chief Information Officer who were able to share vision, strategy and approaches to governance that enable wider benefits from digital transformation.

Example feedback from digital ALS.

"Listening to other peoples experiences can make you reflect on your own journey. Having come from a clinical background with some management experience, it can be difficult to have a wider understanding of other department's roles, expectations and how they manage their journey to ensure policies and guidance is met. Organisational structure is not something I have thought about and how it affects integration for other departments. Therefore this as certainly made me consider my approach and the

realisation of the wider picture for health board's structure and the difficulties and challenges it can pose."

Multi-Agency Training Event (MATE)

At the end of July, we held the first refreshed multi-agency training event (MATE) at Tonypandy Fire station, with the Welsh Ambulance Service and South Wales Fire and Rescue Service. This enabled FYs and Junior Doctors and nurses to be involved in realistic Road Traffic Accident scenarios alongside the agencies with whom they would be working.

We are developing this scenario work further and will also be holding an event for junior doctors in conjunction with USW in the New Year.



Fig 26 MATE Event July 2022

In 22-23 further progress will be made towards establishing an Inter-professional Learning (IPL) Faculty. The early work for this faculty will be focussed on establishing undergraduate IPL opportunities including:

- Consulting with professional leads and Higher Education Institutes regarding common themes, learning outcomes, and barriers to IPL placements and possible solutions.
- Scoping out opportunities across the health board and developing structured IPL opportunities/ placement models/ simulation / student learning sessions in practice for students.

Innovative models for training capacity will continue to be explored including a project to create an education infrastructure to support the newly introduced undergraduate pharmacy clinical placements as part of a central Clinical Education Service which will also enable more interprofessional education and learning opportunities.

Partnership, Achievement, Recognition and Mastery

Direction:

Our workforce are our most significant asset. There will be clear educational frameworks to support career development pathways in CTMUHB.

Learning and development frameworks establishing levels of practice from foundation through to consultant are being taken forward nationally with profession / speciality and

multi-professional scope. Career development pathways must be supported through multi-professional development frameworks defining our educational offer for:

- Early / foundation years
- Extended/ Specialist/Advanced Practice – including Clinical fellowships; practice, education, research, leadership, clinical informatics
- Consultant.

Over 21-22 Clinical Education staff have been directly involved in National work including;

- Phase 1 of the HEIW strategic review of commissioning of Healthcare Professionals education tender process.
- Development of Multi-professional Learning and Development Frameworks, Advanced and Consultant level frameworks.
- Simulation strategy consultations
- Interprofessional Clinical Placements Principles development.

Pathways for medical staff are relatively well developed however the rest of the health care professional workforce needs further work.

Over 2021-22 work commenced to create a CTMUHB Nurse Education Strategy. This work has been delayed due to workplace pressures however will be completed in 2022-23 and will also be carried out with other professions including AHPs and Pharmacy. This will develop education strategies recognising individual professional requirements built around a common Clinical Education quality infrastructure framework.

These frameworks will also enable timely, agile service redesign and responsive workforce modernisation with more robustly informed Education Commissioning.

In 2022/23 another focus of work will be on developing clinical supervision and preceptorship in alignment with the Chief Nursing Officer priorities.

Widening access

To aid recruitment to the Health Board, both Pre and Post Registration nurse teams along with our corporate nursing colleagues have visited a number of schools across Rhondda Cynon Taf and Merthyr to speak to both Primary and Secondary school children about Nursing as a career. The team will develop this work stream further in the next academic year.

As has taken place in previous years, we ran a Medical Work Observation Scheme for pupils of Year 12+ from 4 July to 22 July 2022. The content included a mix of virtual and on-site opportunities, to use work experience as a crucial tool in helping pupils decide whether to pursue a career in Medicine or Dentistry.

One hundred school pupils were enrolled on this scheme in 2022 and the feedback was overwhelmingly positive.

Opportunity, Vision and Innovation.

Direction:

Cwm Taf Morgannwg Learning Academy.

A space where people could feel inspired to think, create and dream, build relationships and collaborate and learn together to improve practice and health.

A living manifestation of University Health Board Status, networked with multiple HEI partners, and HEIW creating a virtuous cycle of learning, innovation and improvement.

- *Innovation ideas supported e.g. Bevan fellowship/ exemplars, Environmental Impact.*
- *Challenge exchange*
- *Systems Design Thinking*
- *Collaborative work e.g. Product Designers 3D personalised healthcare innovation*

Progress and plans.

We have continued to deepen relationships with our partner universities and research and innovation colleagues.

With a focus on advances in simulation Clinical Education was successful in obtaining Levelling Up Funding from WIDI (Wales Institute for Digital Informatics) to release staff time to develop a Digital Simulation Education Strategy (Multi-professional) and a pilot education package. This work commenced in April 2022 and is on track to deliver December 2022 and is being supported by colleagues in Cardiff Metropolitan University and University of South Wales.

In partnership with University of South Wales we will be progressing the development of educational packages utilising their Hydra facility. An area of early focus will be on the Recognition of the Deteriorating Patient.

Over 2022-23 we will be involved in project work with Health and Care Research Wales to embed research into health professional careers.

Refs:

1. A Healthier Wales: <https://gov.wales/sites/default/files/publications/2019-04/in-brief-a-healthier-wales-our-plan-for-health-and-social-care.pdf>. Accessed 10.10.2019
2. Workforce Strategy for Health and Social Care. <https://heiw.nhs.wales/files/workforce-strategy-for-health-and-social-care1/>
3. Final report of a project delivered by CTMUHB for HEIW, mentioned in the paper, is available upon request. It is for interest and gives a written example of the work Clinical Education are undertaking.

