

The Development of Unregistered Staff Portfolio for Specialist Community Forensic Team

NHS
Health Education England

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Aim

To complete a portfolio of knowledge and competencies which support unregistered staff development, confidence and efficiency for the Community Learning Disability Community Forensic Team

1. Background

In light of the Francis Report and Cavendish Report (2013), Winterbourne and the Transforming Care Agenda, Southern Health Learning Disability Division commenced a review of community unregistered staff training and documenting of learning. From this a new portfolio of learning was developed to ensure that Learning Disabilities, as a specialist service, could ensure that all staff had a level of knowledge, competency and learning that could be captured and reviewed. This has been part of the induction and ongoing support for new staff since its launch in September 2015 and reviewed in September 2016.

Early 2017, as part of the Transforming Care agenda, a forensic ward was closed, service users moved into the community and a review of the role of a Community Forensic Team undertaken. From this a new Community Forensic Learning Disability Team was developed, with roles for unregistered staff.

Our unregistered staff are an important, essential element of the workforce and support the delivery of the service. Therefore consideration needs to be given to what specialist skills, knowledge and competencies they will need and this has led to the development of a Forensic Portfolio.

As part of this work NHSI has been contacted to ensure that what was being considered matched the values at national level. Helped identify
learning and working
together to complete
competencies helped
build trust

3. Content page

Southern Health NHS

CONTENTS

- 1. Introduction
- 2. The Wider Context
- 3. Aims and Objectives of Service4. Case Study paperwork for portfolio
- 5. Generic competencies
 - a) Capacity, consent and decision making
 - b) Communication
- c) Function of Offending Behaviourd) Deprivation of Liberty Safeguards,
- safeguarding and Care Act

 e) Dysphagia
- f) Epilepsyg) Legal Frameworks and restrictions
- h) Lone working and risk assessmenth) Medication
- i) Observation skillsj) Partnerships
- I) Record keepingm) Restraint and human rights

Quality care, when and where you need it

4. Results

The following 5 questions were explored with each group
The 5 questions were:

- 1. What do we currently use?
- 2. Does this fulfil our expectations?
- 3. What would be good to include?
- 4. How would you use this?5. Anything else?

From these the following themes emerged:

- 1. Nothing structured but unregistered staff have induction and on the job training.
- 2. To enable unregistered and registered staff to feel confident that the forensic element of the job is understood and developing then it does not support supervision/development/ expectations
- 3. Something about sections, professional boundaries, understanding forensic behaviours
- 4. Could be used with different clinical professional groups and must support all clinical professional groups (truly generic for forensics). Used in supervision and as part of tracking personal development.
- 5. Must be easy/not overly clinical/must be accessible/relevant

Real results

Completion of the portfolio which has now been delivered to the forensic team for review and feedback.

Feel more valued and helps clarify roles

Made me realise how much we expect of our unregistered staff

2. Methodology

To scope the current situation three facilitated focus groups were organised with the senior lead, clinical profession staff and unregistered staff.

Met with the Lead Clinician for Forensic Services to gain an understanding of her view of what is required. Shared the previous work undertaken with the Learning Disability Community Teams. Discussed what would be required to make this a "specialist portfolio" for the Forensic Service.

Met with the Forensic registered clinical team to discuss what we currently had developed and what they felt would be required to support forensic unregistered staff. A Task and Finish Group, lead by the Occupational Therapist with the team was formed. The meeting used a semi structured format with 5 key questions (on results page). The Task and Finish Group met in June, July and August and worked to complete the specialist framework and reviewed the Generic Community portfolio to share the knowledge which would be of use to unregistered staff starting with the service.

I met with a group of unregistered staff to understand their views, using the same 5 questions and again used this to review the themes.

I then had the opportunity to discuss this work with the Head of HR with the Learning Disability Division who has taken this work to the Executive Board for consideration to be developed throughout the Trust.

Once written the portfolio was presented to the Forensic Team for comment and review and this is on going.

Helped identify expectations of unregistered staff

5. Lessons Learnt and Next Steps

Lessons Learnt

Everything takes longer than you think!

Focus Groups are a good way of getting views and planning what is needed (otherwise it is only your views)

You need other expertise to support you

Your project can grow — you need to remain focussed on what you want and need to achieve

So what next.

Complete review by forensic team — facilitated by Margaret Martins

Plan another review in 9 months time once they are being used — organised by Margaret Martins

Link in with NHSI who are also developing forensic competencies for staff working in inpatient forensic setting and ensure that we continue to develop best practice in line with National indicators — to be completed by Margaret Martins over next year.