



Facing The Future

Action Plan Update Report

TAYSIDE UNIVERSITY SUMMARY
FACING THE FUTURE – REPORT ON ACTIVITIES

(Actions from the Facing the Future Action Plan are in bold.)

Theme – Careers

Identified Actions	Progress to date	Where Action is to be taken- Nationally	Where Action to be taken - Locally
Implement return to practice placements locally in a way that encourages flexible working.	The managed Information Programmes are currently doing this and are being evaluated.	SEHD	Local Trusts
Empowerment of Nursing and role enhancement	FtF are to consider a proposal for a consensus Conference on new nursing roles. This would provide a consultative and engaging approach to the understanding and development of this issue. Currently being pursued, panned and costed with support from, CNO and RCN Scotland	RCN on behalf of SEHD	
Sharing a good practice ‘event’.	To be taken forward locally TUH are running second annual Celebrating Best Practice Event for Nursing staff across Tayside which students can attend free and invitations sent to Local Schools via Guidance teachers.	NMPDU	Directors of Nursing
Undertake survey of nurses and midwives in Glasgow area, no longer in practice	Survey undertaken and report completed.	SEHD	
Implementation of cadet scheme as an example of alternative approaches to T&D	Working group set up	SEHD	
Development of Nurse Consultants and Nurse Consultant networks	Nurse Midwife Consultants Network in place. Network supports the development of nurse/midwife consultants.	SEHD/ NMPDU	
Develop competency based career pathways that fit within a nationally agreed framework	Establishment of Division within SEHD for Learning, Development and Careers.	SEHD	
Effective links required between NHS and HEI’s to	Work ongoing between SEHD and JFU looking at	SEHD	

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ensure development of transferable skills (joint future agenda).	developing a national framework for Health Care Assistants		
Promote the value of nursing knowledge in multi disciplinary teams	Being taken forward by NHS Education for Scotland as part of the wider multi disciplinary agenda	NES	
Eighteen more nurse consultants will be created in Scotland by NHS Boards	<p>Currently 14 consultant nurse midwife posts in place. Two new posts have been approved and we are awaiting date of appointment.</p> <p>8 posts are currently under development</p> <p>6 posts are being considered</p> <p>A number of initiative supporting the development of these posts are underway in partnership with local NHS Trusts.</p> <p>2 new posts recently appointed bringing total to 4 across Tayside</p>		NHS Boards
Directors of Nursing across all NHS organisations will take the lead in enhancing the image of nursing and midwifery in their communities and NHS Board areas, in conjunction with local recruitment campaigns. Progress will be presented in the annual reports of NHS Boards.	Trusts in Tayside adopt a partnership approach with the University of Dundee, in running recruitment events and open days for prospective students and in running a series of roadshows communicating developments in nursing and enhancing the image of nursing to the general public		Directors of Nursing
Every nurse and midwife in training will be guaranteed a year's employment on qualification within NHSScotland from Autumn 2002, if they wish. The aim is to offer a commitment to a life of employment for every nurse and midwife in Scotland, based on their skills and contribution. The effectiveness of the programme will be evaluated.	<p>Guarantee in place as pilot for those exiting training in Autumn 2002 and Spring 2003.</p> <p>TUH has worked hard to ensure all students qualifying and wishing to work in TUH are offered substantive contracts on qualification.</p>	SEHD/NES	NHS Trusts
The Facing the Future Group will oversee the implementation and evaluation of pilot studies into the effectiveness of Return to Practice initiatives created as part of the Scottish Executive's £1.5 million package.	<p>Return to Practice pilot complete. Funds extended to cover all Return to Practice in NHSScotland.</p> <p>Tayside Trusts have worked in partnership with the University of Dundee in recently revising and revalidating the return to practice programme.</p>	SEHD	NHS Trusts

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	<p>Recruitment, practice placements and support through the programme is provided in partnership. 6 students have successfully completed the programme and are employed within TUH.</p>		
<p>Nurse Cadet schemes based on innovative clinical placements and supervision arrangements will be introduced in two pilot areas, in partnership with further and higher education institutions or private sector education providers. The schemes will be supported by pump-priming investment from the Scottish Executive.</p>	<p>Achieved. Sub-group established and has met. Looking to develop Healthcare Students rather than embrace a traditional Nurse Cadet Scheme in Scotland TUH has identified and will support 4 Healthcare students from September 03 in partnership with Dundee College, University of Dundee and TPC</p>	<p>DNS on behalf of SEHD</p>	
<p>The working group on career pathways identified in <i>Caring for Scotland</i> will be set up and will bring forward its report, recommendations and guidance to next year. This will shape a national drive to promote careers in nursing and midwifery from school to retirement, to be launched in 2002.</p>		<p>SEHD SEHD</p>	
<p>The Scottish Executive will fund a recruitment campaign this winter to help reach the care workforce at regional and national level.</p>	<p>Proposal considered but not taken forward at this time.</p>		
<p>The National Workforce Centre will develop a national programme promoting health care professional careers in 2002.</p>	<p>National Workforce Unit now set up. National Workforce committee in place.</p>	<p>SEHD</p>	

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Theme – Flexibility

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken locally
Extend the bank pilot to other staff groups, eg Ancillary staff	Proposals currently being drafted.	Forth Valley Pilot Project Manager	
Consider retention strategies such as use of sabbaticals, career breaks, info from exit interviews and other flexible working arrangements	Project Plan agreed by the Facing the Future Group	SEHD/CCI	
A new development programme – <i>Flexible Ways of Working/Flexible Ways of Thinking</i> will be launched in 2002. The aim is to promote to team leaders across Scotland the skills needed to turn existing good policy and Partnership Information Network (PIN) Guidelines into practice.	“ “	SEHD/CCI	
Evidence of flexible working arrangements for nurses and midwives will be collated by the Scottish Executive in 2002, and will be published.	“ “	SEHD/CCI	
The role of private sector expertise in delivering effective local nurse and midwife temporary cover through partnership agreements will be developed and evaluated in pilot Trusts during 2002.	Pilot project undertaken in Forth Valley Acute Trust to examine the role of private sector in support of the provision of a flexible nursing workforce. Planned expansion to Primary Care trust to create an Area Bank in Forth Valley.	Elaine McRae, Forth Valley on behalf of SEHD	

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Theme - Leadership

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
<p><i>Protected Time:</i></p> <ul style="list-style-type: none"> • Ensure protected time for leadership development <p>Rostered time for development built into plans</p>	<p>RCN Programme has protected time Current cohorts are ensured protected/rostered time</p>		Individual Trusts/Nurse Directors
<p><i>Audit and Evaluation:</i></p> <ul style="list-style-type: none"> • Ongoing audit and evaluation of leadership programmes <p>Plans backed up by effective monitoring</p>	<p>This is being done at local level. Each cohort of the RCN Leadership programme has undergone evaluation which has included participants/managers evaluation of impact as well as behavioural/practice change arising from patient stories and observations of care.</p> <p>LEO programme being evaluated by participants and plans in place to evaluate the application of principles in clinical practice/wards and departments</p>		Individual Trusts/RCN

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<p><i>Competency and Core elements:</i></p> <ul style="list-style-type: none"> • National Competency Framework • Foster leadership skills pre registration • Develop Action Learning Sets locally • Facilitated Action Learning groups across organisations • Robust appraisal systems that aid development 	<ul style="list-style-type: none"> • Will consider for future developments • Would be integral to competency based frameworks. • Developed locally, eg RCN Leadership Programme • <i>As above</i> • Leadership competencies will assist in appraising against leadership qualities <p>Generic Job Descriptions developed around core competencies required for all staff at different grades includes nurse leaders – F & G grade.</p> <p>Practice development Nurses have facilitated groups of Senior Charge Nurse and Charge Nurse in developing core objectives addressing professional/leadership goals/outcomes.</p>	<ul style="list-style-type: none"> • SEHD/NES • NES/SEHD 	<ul style="list-style-type: none"> • Local HR/Nursing Directorates • <i>As above</i> • <i>As above</i> Individual Trusts
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<p><i>Leadership Development:</i></p> <ul style="list-style-type: none"> • Rotational posts to encourage leadership • Other specifics to build leadership and capacity • Role models in clinical areas • More creative opportunities to shadow • Ability to ‘fast track’ people who demonstrate leadership potential • Senior staff more visible and ‘walk the job’ 	<p>Work needs to be done on developing ‘Core Elements’. Opportunities to then be identified.</p>	<p>NES</p>	
<p>NHS Trusts and Boards will be expected to support the continuing development of clinical leaders through the RCN programme and other evaluated development programmes as a signal of commitment to generic leadership development in NHSScotland. An audit of development needs over a three-year period, including integration into development programmes for other health care leaders, will form part of local health plans.</p>	<p>Working towards 1000 clinical leaders in Scotland. As at Nov. 2001, 240 attended RCN Leadership Development programme. TUH is now supporting 3rd cohort of clinical leaders through RCN Leadership programme bringing total to 51</p> <p>(200 staff at various grades have been supported in undertaking the Leading an Empowered Organisation programme with a target of supporting all nursing staff across TUH having undertaken the programme over the next 5 years.</p> <p>30 staff completed Institute of leadership and management.</p>		<p>NHS Trusts and Boards</p>
<p>NHS Boards will be required to give clear public commitment to the importance of good quality nursing advice, and will set out how they will ensure this is available to them. The Chief Nursing Officer will implement a review of these working arrangements in April 2002.</p>	<p>This has been achieved through the appointment of Employee Directors as well as Directors of Nursing to NHS Boards following the restructuring of NHS Boards. Existing and proposed new committee/group structures are currently being reviewed to ensure nursing across Tayside maintains effective communication to and from NHS Tayside Board via</p>	<p>CNO</p>	<p>NHS Boards</p>

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	the Director of Nursing.		
Directors of Nursing will produce annually a career development action plan containing commitments to identified initiatives in each of their NHS Board and Trust areas. The plans will include action on implementation of best employment practice and career development for staff who provide nursing and midwifery care. They will also be reviewed by the <i>Facing the Future</i> Group in 2002.	TUH/TPC in partnership with Dundee University developing proposal to develop a career development pathway from unqualified to senior clinical practice positions (ie nurse consultant, Researcher, Education, Management).	SEHD	Directors of Nursing in Boards and Trusts
The Scottish Executive has committed to creating a group of 1000 clinical leaders. Part of the commitment includes a further investment in the Royal College of Nursing (RCN) Clinical Leadership Programme, funded as part of the £1.5 million package announced at the Convention.	Mapping exercise undertaken. Progressing towards 1000 clinical leaders by December 2003	SEHD	
The Chief Nursing Officer will review national nursing and midwifery advisory machinery by April 2002.	Agreed to retain the status quo at present pending the outcome of the White Paper	SEHD	

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Theme – Education & Training

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
Mechanisms that prepare and provide continuing support for mentors, including e-based resources	Via Practice placement Project Sub group of Dundee University Education Partnership Committee representing Tayside and Fife Trusts addressing strategic and local implementation of Practice Placement Standards	NES	
Establish a framework that ensures all those registering are fit for purpose		NES	
Establish Clinical/Educational liaison posts (clinically based)		NES	
Recognition & Investment in Preceptorship and develop programme as part of the One Year Guarantee.	Many trusts already doing this. Will be followed up as part of the One Year Guarantee. Identified as key priority for TUH in the CPD plan – 2002/3. 137 staff completed Partnerships in Learning preceptorship programme – 2003/4. 145 staff planned	SEHD	Trusts
More co-ordinated approaches to placements/allocation of students in final year.	New Programme features this. Look to evaluate. All placements now planned/co-ordinated through Practice Placement unit at Dundee University	SEHD/NES	Trusts
Training to reduce defensive practice.	Taken forward locally Rolling programme of handling complaints For all staff across the organisation . Included in induction programme for Nurses, medics and undergraduate student nurses.		Individual Trusts
More lateral & vertical career development made available through secondment opportunities, rotation/exchange posts etc	Taken forward Locally Supported rotation/development programme underpinned by Professional modules at University of Dundee piloted across Medical and Surgical clinical groupings.		Individual Trusts

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	This will be extended to other clinical groupings 2003/4		
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<p>HEI's and Trusts to take a collaborative approach to developing educational programmes, providing expertise and reassurance to the NHS regarding quality. (multi agency/ multi professional)</p>	<p>Tayside has a proven record of collaborative development and delivery of educational programmes. 15 "Fitness for Practice" Modules have been jointly developed in response to identified needs. Clinical staff contribute 50% of delivery towards these programmes.</p> <p>Education partnership Committee provides forum through which Trusts/HEI's can debate and discuss educational/professional issues.</p> <p>A multi-professional teaching and learning group with wide representation has been established to identify areas for increased multi-agency/multi-professional approaches</p>		<p>NES/Individual Trusts</p>
<p>CPD - Resourcing required to allow equal access to & dedicated time for Continuing Professional Development</p>	<p>£1.75 Million investment</p> <p>Additional CPD funding allocated through Facing the Future utilised in supporting newly qualified staff undertake degree/professional modules underpinning rotation/development programme.</p> <p>Enrolled nurses supported in accessing/undertaking Conversion programme through University of Dundee.</p>		<p>Trusts</p>
<p>Education providers, Trusts and NHSScotland employers will work together to develop and manage lecturer-practitioner posts. Lecturer-practitioner posts will support nurses and midwives in training in practical situations, bridging the gap between theory and practice.</p>	<p>Joint roles group established with representation from TUH TPC, Fife Trusts and Dundee University to manage and ensure development of staff in joint/secondment posts</p>		<p>Trusts and HEI's</p>
<p>The National Workforce Centre will review the processes for determining the number of students required for entry to the profession as part of its remit to work through the impact of multi-disciplinary service provision.</p>	<p>The SNIP Project Group currently reviewing the process for identifying Student Nurse Intake numbers.</p>	<p>SEHD</p>	
<p>The new Special Health Board for Education will</p>		<p>NES</p>	

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<p>work closely with the Scottish Executive, The United Kingdom Central Council for Nursing and Midwifery (UKCC) and its successor body in monitoring:</p> <ul style="list-style-type: none"> - <i>quality and appropriateness of clinical placements</i> - <i>relevance of the curriculum to modern health care</i> - <i>fitness for purpose of newly qualified cohorts</i> - <i>new preceptorship and mentoring arrangements for newly qualified nurses and midwives</i> 			
<p>The Chief Nursing Officer will set a revised deadline for the creation of satisfactory mentorship training schemes.</p>	<p>This is being taken forward via the contract review meetings and will be discussed in Feb/March 2003</p>	<p>SEHD</p>	
<p>Further work will be done to ensure practice placements allow students nurses and midwives to gain realistic experience. Opportunities for alternative placements in prisons, the independent sector, with agencies and nurses banks will be maximised thorough arrangements with partnership organisations.</p>		<p>SEHD</p>	
<p>The best means of providing learning opportunities for nurses and midwives will be evaluated. Initiatives such as learning directories, videos and portfolios will be considered, with evidence on best practice being drawn from within and outside the public sector.</p>		<p>SEHD</p>	

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Theme – New Roles

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
<ul style="list-style-type: none"> • Hold debate on development and redefinition of current roles • The need to consider the continuum of nursing and midwifery care encompassing support staff through to Consultant staff. Examine the implications for new roles associated with the step on step off points of pre registration education. • Need to integrate specialist roles with equally valued expert generalists in remote and rural areas 	<p>FtF are to consider a proposal for a consensus Conference on new nursing roles. This would provide a consultative and engaging approach to the understanding and development of this issue. Currently being pursued, planned and costed with support from, CNO and RCN Scotland</p>	<p>RCN and SEHD</p>	
<p>Develop roles that can support pre and post course registration education as well as ongoing needs of staff associated with a workforce that was fully committed to lifelong learning</p>	<p>Via practice placement Project RCN developing ‘Toolkit’ for Student Placements?</p>	<p>NES</p>	
<p>Interim recommendations on new roles arising from the work of the Nursing and Midwifery Practice Development Unit (NMPDU) and the Nursing Research Initiative for Scotland (NRIS) will be reviewed by Directors of Nursing and, if appropriate, implemented into service by September 2002</p>	<p>This action relates to the role development actions taken forward by Pat Dawson. Need to consider whether we need both or an integration of the two.</p>	<p>NMPDU/SEHD /NRIS</p>	
<p>Pilots for non traditional roles will be promoted across all care settings, with an expectation that the Remote and Rural Areas Resource Initiative (RARARI) will bring forward specific initiatives for rural areas in early 2002</p>	<p>Linked to Consensus Conference on Nursing Roles due in late 2003</p>	<p>RCN and SEHD</p>	

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Theme – Working Conditions and Tools for the Job

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
Admin support available to clinical leaders.	To be taken forward locally.		Individual Trusts
Communication. Think more innovatively about communication strategies and more inclusive ways of communicating with Nurses. Eg information about development plans, use of payslips, internet, via locally identified personnel etc...	To be developed locally – (in partnership) Professional Nursing forums providing support and ensuring effective two-way communication have been established across all clinical groupings of the Trust. Nursing “Framework” document has been written to raise awareness of nursing key objectives and achievements within the organisation.		Trusts– HR/Nurse Directorate
Access to Information Technology and training should be component parts of the plan, eg video conferencing, internet access, e-mail etc...	IM&T Strategy. Local implementation of IM&T Strategy European Driving license and basic IT programmes widely available/accessible through local learning centre on site. IT components now integrated into existing education programmes where required. Access to University librarians in providing tutorials for staff in accessing databases and conducting literature/information reviews. Local learning WEB site created and launched across Tayside	SEHD	Individual Trusts

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Explore ways of demonstrably valuing expertise at every level – the need to feel valued.	To be taken forward locally. Significant ground work associated with implementing a shared governance structure for nursing staff across TUH ensuring clinical staff at all levels actively contribute and have responsibility for decision making on key nursing/professional issues.		Individual Trusts
Supportive work packages to realistically achieve PIN Guidelines in rural and remote areas, eg Child care facilities with transport costs being considered.	To be taken forward locally. Executive to consider systems that would support individual trusts.	SEHD	Individual Trusts
Treatment of students within placement areas in relation to bullying & harassment.	Via Practice Placement Project. RCN working with Napier University and Students on Bullying & Harassment issues	RCN, Napier University/ NES	

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Theme – Working Conditions and Tools for the Job – continued

Identified Actions (continued)	Progress to Date (contd)	Action to be taken Nationally (contd)	Action to be taken Locally (contd)
Options for a national nursing and Midwifery agency and databank will be examined. The aim will be to maintain contact with nurses and midwives throughout their career span, including those having career breaks, those pursuing alternative careers and those who have recently retired. NHSScotland will work with private sector partners on a co-ordinated approach to nurse and midwifery temporary cover, bank and agency arrangements	National 'Skills' Bank Bids received for a Nurse Bank pilot in Forth Valley NHS Board	SEHD SEHD	
NHS Trust Chief Executives will be asked to confirm to the Chief Nursing Officer that all nurses have access to information technology and the internet in accordance with national policy during 2002	Executive visited all NHS Boards in Scotland. 'Budgetscan' being piloted in 17 NHS Trusts in Scotland. 5000 European Computer Driving Licences (ECDL's) made available across Scotland with a further 5000 to follow. Executive to increase funding for investment in IM&T	SEHD	Individual Trusts
Proposals for leaders in clinical areas (Sisters/nurses) to be provided with an unallocated budget for their discretionary use within their clinical area will be considered.	It was agreed that there would be better value for money in providing resource for CPD purposes. This has been actioned	SEHD/NES	
Joint Initiatives with public and private partners to increase flexibility around school hours and childcare provision to support staff working in public services will be examined, with a view to inclusion in local Health Plans from 2003.		SEHD	

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Theme – Employment Packages

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
Acknowledgement of skills and competencies via financial incentives & reward.	Via <i>Agenda for Change</i> .	SEHD	
Current Grading system is a barrier to career progression, particularly in rural areas. The ability to remunerate nurses and midwives for their competency and contribution would allow greater utilisation of experienced practitioners not presently achievable within the grading system	The Scottish Executive recognises that the current grading system does not meet the needs for today's NHS and this is being addressed in the National negotiations on Agenda for Change – Modernising the NHS Pay System. A key part of the system will be a new job evaluation system, which has been developed in partnership with representatives of all 4 UK Health Departments, NHS Management and Staff representatives. These negotiations have been successfully concluded. Details of what the new package will mean for individual staff groups should emerge in the next few weeks. The package will then go forward for consultation and, if agreed, will be implemented from October 2004 in Scotland.	SEHD	
Active and supported redeployment of staff from retracting Primary Care facilities	To be developed locally in partnership with staff side, local authority, voluntary agencies etc..		Primary Care Trusts
The Scottish Executive will set up a process through national partnership arrangements to examine priority employment issues before full implementation of <i>Agenda for Change</i>.		SEHD	
Ways of protecting time for clinical professional development will be developed and piloted in 2002	RCN Leadership Development programme ensures protected time for leadership development		Trusts/Nurse Directors

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	Work being planned to Evaluate of the level of identified versus actual CPD activity in relation to monitoring of time out/study leave		
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Theme – Research & Evaluation

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
More use of exit interviews to ascertain why nurses are leaving.	To be taken forward locally.		Trusts–HR/Nurse Directors
<p>The Scottish Executive will commission:</p> <ul style="list-style-type: none"> ➤ Integrated research to give better core information on workforce numbers, workload and the working experiences of nurses and midwives ➤ Research on the appropriate qualities for entry to nursing and midwifery training, to form part of student entry assessment and recruitment of nurses and midwives ➤ Research into the activity of nurses at different levels within NHSScotland, to inform the Workforce Centres’ research on future patterns of working ➤ Research into factors that would entice non-practising nurses and midwives back into practice. ➤ Research into the effectiveness of nurse consultants, to inform decisions about further expansion and their role in the career pathway <p>Evaluation of the flexible ways of working/flexible ways of thinking training programme and the pilots of nurse and midwife temporary cover schemes</p>	<p>Research paper undertaken on Scotland’s nursing workforce. ‘Shortages and Solutions’ looks at current national and international issues of nurse supply and demand as well as offering possible solutions.</p> <p>Via Nurse Cadet paper</p> <p>Undertaken via Facing the Future Group</p> <p>Return to Practice</p>	<p>Professor Jim Buchan on behalf of SEHD</p> <p>DNS on behalf of SEHD</p> <p>CEO on behalf of SEHD</p> <p>SEHD</p> <p>SEHD</p> <p>SEHD</p>	
Impact of Joint Futures Agenda			
Impact of Local Authority Recruitment Strategies			

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Sub-Theme – Workload

Identified Actions	Progress to Date	Action to be taken Nationally	Action to be taken Locally
<p>The Scottish Executive will commission:</p> <p>➤ Integrated research to give better core information on workforce numbers, workload and the working experiences of nurses and midwives</p>	<p>To be lead by Gerry Marr (previously Maggie Boyle).</p> <p>A number of Trusts are using ‘Simulate’ which models work flow through the work system, eg that within Grampian. Medical Receiving acknowledged as area of priority.</p>	<p>CEO/DNS on behalf of SEHD</p>	

*** Note, all actions noted at National Convention(19/11/01) in bold.**