



# Introduction

The RCN is providing a range of

- A significant proportion of newly qualified nurses never practice or only practice for a brief period
- The structure and “specialisms” in nursing do not reflect modern requirements for nursing care.

Q. So what should a modernised nursing profession look like?

A. We can no longer pretend that the supply of well qualified registered nurses will keep pace with future demands for nursing care. Therefore the shape of the profession needs to change with:

- A steady, stable and possibly smaller supply of graduate nurses providing leadership and supervision in nursing care delivery
- A robust cadre well prepared associate/assistant nurse (with access to skills escalator career routes)

Q. So who will actually deliver essential nursing care?

A. Increasingly - as is already happening - care will be delivered by



Q. What else does the profession need to address?

- We need to proactively shape the profession for the future
- We need to take professional ownership of the key domains of care delivery where the nursing leadership and co-ordinating role is central
- We need to create professional nursing career pathways with unambiguous job titles, progression points and streamlined role definitions (see Appendix 1 for an example of a hypothetical career pathway)
- We need to ensure that a comprehensive workforce modelling exercise needs to take place to establish estimated requirements for different nursing grades and roles, linked to future demand for nursing care
- We need to ensure that **secure** funding streams are identified and made available to support post qualification career pathways (as in medicine).

## Appendix 1

### A Hypothetical Career Trajectory in Long-Term Conditions Nursing.

Title and level	Minimum Skills and Competencies	Location of Learning	Career Pathways and Minimum Academic and Professional Benchmark
<p>Level 1: Entry to profession (? with Provisional Registration/licence)</p> <p>Foundation Year as Provisional Registered Nurse (PRN)</p>	<p>Generic nursing skills and knowledge</p> <p>Consolidate care delivery skills and knowledge and demonstrate competence in range of core LTC and other skills</p>	<p>A range of exposures to key nursing domains</p> <p>LTC setting e.g. care home, community, Intermediate care, general medical care or care of elderly linked to RN Mentor</p>	<p>BN/BSc/BA</p>

## A Hypothetical Career Trajectory in Long-Term Conditions Nursing.

Title and Level	Minimum Skills and Competencies	Location of Learning	Career Pathway and Minimum Academic and Professional Benchmark
<p>Level 2:</p> <p>Registered Nurse (RN) Minimum 2 years</p>	<p>Develop higher order skills and knowledge in LTC (care delivery, supervision and management)</p>	<p>LTC settings e.g. care home, community, intermediate care, general medical care or care of elderly linked to an ARN mentor</p>	<p>Compete for career training posts and embark on MSc advanced practice studies in LTC or MSc Policy and Management</p>
<p>Level 3:</p> <p>Advanced Registered Nurse (ARN) in LTC or Advanced Nurse Practitioner in LTC</p>	<p>Demonstrate higher order nursing skills and evidence based practice knowledge (care leadership, co-ordination and expert advice)</p>	<p>As above but in elected location linked to nurse consultant level mentor</p>	<p>MSc</p> <p>Compete for career training posts and studies in LTC or DNA/DClin/MBA in Policy and Management</p>

## A Hypothetical Career Trajectory in Long-Term Conditions Nursing.

<b>Title and Level</b>	<b>Minimum Skills and Competencies</b>	<b>Location of Learning</b>	<b>Career Pathway and Minimum Academic and Professional Benchmark</b>
Level 4:  Nurse Consultant in LTC or Community Matron	Demonstrate highest level of leadership at pinnacle of clinical nursing expertise, carrying caseload and heading a team of nurses at different career levels	LTC setting e.g. care home, community, intermediate care, general medical care or care of elderly	PhD/DClin Develop Research/Teaching/Policy/Management Skills

NB The pathway above suggests two potential career end points:-

1. The practice expert and potential nursing team leader
2. The management/policy expert and potential board level leader

The pathway above also implies changing the way in which nursing work and nursing teams are organised and particularly in acute sector.