ORGANISATIONAL MODULES 2024

MUCKAMORE ABBEY HOSPITAL INQUIRY WITNESS STATEMENT

Statement of Professor Neal Cook Dated 14 June 2024

I, Professor Neal Cook, make the following statement for the purpose of the Muckamore Abbey Hospital (MAH) Inquiry. This is my second statement to the Inquiry having previously provided a statement to the Inquiry dated 08 April 2024 (MAHI – STM - 221 - 1).

The statement is made on behalf of Ulster University, School of Nursing and Paramedic Science in response to a request for evidence by the Inquiry Panel. This statement has been prepared in partnership with Professor Owen Barr as the lead for Learning Disabilities in the School.

There are no documents to exhibit with this second statement.

1. I have been asked to address a number of further questions for the purpose of my second statement. I will address those questions in turn.

Q1. Did the Universities provide education that was specific to the changing needs of MAH patients, and if so, how would they know what new education was required?

 Ulster University School of Nursing and Paramedic Science provided education as requested by the Education Commissioning Group. No specific education about the changing abilities and needs of people at Muckamore Abbey Hospital was commissioned or provided.

Q2. How did the Belfast Trust commission education from the University?

3. Belfast Health and Social Care Trust largely commission education from Ulster University through the Education Commissioning Group. The Belfast Health and Social Care Trust can request additional educational provision by the HSC Trust requesting this directly from the university. No specific education about changing abilities and needs of people at Muckamore Abbey Hospital was commissioned by Belfast Health and Social Care Trust.

Q3. Was there a difference between BHSCT and other Trusts in the post registration education they requested/commissioned?

4. We have not analysed the specific requests for commissioning across the HSC Trusts and do not have all the data necessary to do this robustly. It may be this question is best answered by the Education Commissioning Group who receive all the requests for education directly from the Trusts. It is the Education Commissioning Group who then collate these requests into a commissioning plan.

Q4. Does the learning needs assessment conducted by each Trust have a section for learning disabilities?

5. The learning needs assessment within the HSC Trusts covers all areas of the HSC Trust provision, including services to people with learning disabilities. I am not sure if it has a specific section on learning disabilities as I have not used this process at HSC Trust level and therefore this question would be better answered by a member of the Education Commissioning Group or HSC Trust staff member who is involved in the learning needs analysis.

Q5. Can the Universities identify a gap in education provision and suggest it to the Education Commissioning Group?

 Yes, the universities can develop educational opportunities outside of those requested by the Education Commissioning Group and make the Educational Commissioning Group aware of these educational opportunities.

Q6. Would it have been possible to commission the module on Learning Disability and Mental Health problems in 2017 after the CCTV came to light?

a. Was there any reason why the module was not commissioned between 2015 and 2021 (paragraph 11 of first statement)?

b. Has it been commissioned since 2021?

- 7. Yes, it was possible to commission this module.
 - a. I am not aware of why the module was not commissioned. It may have been requested by the BHSCT via the Education Commissioning Group but not commissioned by them. It may be this question is best answered by the Education Commissioning Group or directly by the BHSCT.
 - b. This module has been commissioned once in 2021 and was delivered in Semester Two (January – May 2022) of the 2021 – 2022 academic year. It has not been commissioned since then. Four places were commissioned by BHSCT (of the ten students in the module), three people took up these places and two withdrew before completing the module (i.e. one completed).

Q7. How many places did BHSCT commission on the specialist qualification for inpatient nursing?

- a) Is the learning disability aspect of this qualification no longer offered?
- 8. These are the commissioned numbers over the years from BHSCT:

2013/14	Specialist Practice – Community Learning Disability - 5
2016/17	Specialist Practice – Community Learning Disability – 4
	Specialist Practice – Learning Disability (Hospital) – 2
2020/21	Specialist Practice – Community Learning Disability - 3
2022/23	Specialist Practice – Community Learning Disability - 2

a) Between 2001 and 2023 the Nursing and Midwifery Council had two specialist nursing practice qualification relating to nursing of people with learning disabilities, Specialist Practice – Community Learning Disability Nursing and Specialist Practice – Learning Disabilities. Both of courses could be undertaken by Registered Nurse Learning Disability from hospital or community services and were related to their future role rather than their place of work. Since 2023, the Nursing and Midwifery Council only have Specialist Practice regulatory standards for Community Nursing (across all fields of practice) and no longer provide regulatory standards for non-community specialist practice roles.

Q8. Is there a shorter post-registration course in Learning Disability nursing akin to the Adult Intensive Care nursing course?

- a) Since 2016, was the only full-time programme the Specialist nursing practice qualification referred to in paragraph 12 of your first statement?
- b) In practical terms, what is difference between full-time and part- time?
 Does it take longer to complete?
- 9. I am unclear about the reference to the Adult Intensive Care nursing programme. The NMC approved specialist practice programmes in 'Adult intensive care nursing' are at the same level as the Specialist Practice – Community Learning Disability and Specialist Practice Learning Disability nursing programmes. They are of the same duration at Ulster University, including if they are taken part time or full time.
 - a) No, between 2016 and 2022, both the Specialist Practice Community Learning Disability and Specialist Practice Learning Disability nursing programmes remained available as part time and full-time programmes. The Specialist Practice – Community Learning Disability continues to be available as a full time and part time programme. Since 2016, these programmes have only been commissioned on a part time basis.
 - b) The full-time programme can be complete in one calendar year, the part time option takes two calendar years to complete. As far as I am aware, when a student is commissioned on to the programme as a full-time student, the HSCT receives 'backfill' funding from the Department of Health, this is not provided for full time students. Due to the provision of backfill funding for full time students, the students could undertake their practice-based learning in a different team within the HSCT or across HSCTs and were full time supernumerary students with no expectation they would provide services to the HSCT as a member of staff had five days a week. However, part time students appear to be largely expected to remain within their existing team, attending university for classes one or two times a week, and work with people from their existing caseloads. Part time and full-time students both must undertake 75

days practice-based learning, the full-time students do not normally work in their previous team and therefore have the opportunity to gain a wider range of experience. However, part-time students can at times have their practice-based learning day interrupted if an issue arises with another person with learning disabilities on their caseload that the HSCT wishes them to respond to.

Q9. Why do you think there was a gap in commissioning learning disabilities post-registration courses from 2016?

10. From discussions with colleagues in the HSC Trusts, I know some places on these programmes were requested in years the programme was not commissioned. The decision not to commission these places was a decision of the Education Commissioning Group. I suspect the decision may have been related to small numbers of places requested by the HSC Trusts and the prioritisation of other areas of nursing practice.

Q10. Why do you think that the Specialist practice nursing – Learning Disability programme on knowledge, skills and expertise in working with people with learning disabilities who are distressed and presented behaviours that challenge service was not commissioned by the Trusts?

- a) Why was a similar module from 2004-2009 not commissioned?
- b) Was anything requested in place of this?
- c) Is the content included in this programme being taught through any other programme? Please provide further details as applicable.
- d) Was it a requirement to for nurses working in learning disabilities to engage in modules relating to this area?
- 11. This was a decision of the HSC Trusts and the Education Commissioning Group. I do not have a clear explanation for why this was not commissioned.
 - a) This was a decision of the HSC Trusts and the Education Commissioning Group. I do not have a clear explanation for why this was not commissioned.
 - b) No
 - c) No

d) No, the Specialist practice nursing qualifications are post registration qualifications and provide additional knowledge and skills to people who are already Registered Nurse Learning Disability. The completion of this programme is not a requirement of NMC registration as a Registered Nurse Learning Disability.

Q11. Are you surprised that no concerns about MAH were raised with the University?

- a) Did any post-registration students raise concerns about the staff culture at MAH?
- 12. a) No concerns were raised about staff culture were raised by the few students who undertook the Specialist Practice Nursing programmes whilst working at Muckamore Abbey Hospital.

Q12. What teaching was there at university or throughout these courses on the issue of whistleblowing or reporting safeguarding allegations?

- a) Were practical examples given?
- b) Was this taught with specific reference to patients with learning disabilities?
- c) Was there any teaching in relation to restrictive practices, de-escalation techniques or PRN medication?
- 13. All students studying Specialist practice nursing are already RNLDs and will have covered this content within the pre-registration nursing programme that they undertook. These areas were addressed again from the expectations of a Specialist within the specialist practice nursing learning disability leadership module. It is also reflected in the portfolio that the student must complete.
 - a) It outlined the current processes for whistleblowing and raising safeguarding on concerns, including reference to current requirements to escalate concerns within the NMC Code, the Safeguarding policy in Northern Ireland and RQIA policy on whistleblowing. The Francis report

on Mid Staffordshire Hospital and the O'Hara report on the Hyponatraemia Inquiry were used as examples.

- b) Within the specialist practice nursing, specific examples were given from a range of services in the UK and Republic of Ireland. This covered a historical perspective dating from Normansfield hospital, more recent community-based services within England and Northern Ireland (e.g. Ralph's Close). The presentation also provided more update examples of inquiries such as Winterbourne View, Aras Attracta and most recently Muckamore Abbey Hospital. The question discussed with the students was why does organisational abuse keep happening after so many reports.
- c) Prior to the publication of the DoH Regional policy on restrictive practices (2023), this topic was addressed in relation to consent, mental capacity, best interests decision making processes and deprivation of liberty safeguards. Since 2023 the DoH Regional policy on restrictive practices (2023) is now included within this module and this includes discussion on the regional definitions of restrictive practices including PRN medication. As RNLDs all students undertaking this programme will have had previous education on de-escalation, this was built on within the Specialist practice nursing programme to consider skills in negotiation, influencing and change management, which incorporated information on effective communication and de-escalation. These areas are also reflected in the portfolio that the student must complete.

Q13. In relation to specialist nursing practice programmes specific to caring for people with learning disabilities that are available:

- a) To be a Registered Nurse in Learning Disability do nurses have to complete one (or more) of these specific programmes?
- b) How many places are available per year on these specialist programmes?
- c) Is this limited? If so, why?
- d) Did the number of places increase at any time in particular once it became apparent that there staff shortages in relation to Registered Nurses in Learning Disability?

e) Did these programmes involve any placement work?

f) How long did the programmes/training last for?

14.

- a) No. However, you do have to be a RNLD to complete a specialist practice nursing programme in Community Nursing Leaning Disability or the previous Specialist practice learning disability programme.
- b) The number of places on this programme is not capped and we have never refused a place to a student on the programme due to no places being available.
- c) The number of places on this programme is not capped.
- d) No. I would not have expected it to increase as this programme is for RNLDs and is a post registration programme. Indeed, the difficulty of recruiting RNLDs into the HSC Trusts may have had a downward impact on places commissioned by the HSC Trusts as it may become more difficult to release staff to attend the programme.
- e) Yes, Specialist Practice Nursing programmes at Ulster University have been developed based on 50% university-based hours and 50% practice-based learning. The amount of practice-based learning has increased since 2024 due to the revalidation of the programme against the NMC (2022) standards for community specialty practice nursing and the university decision to integrate Independent and Supplementary prescribing into the programme.
- f) Full time programme is one calendar year, the part time programme is two calendar years.

Q14. Paragraph 18 of your first statement refers to a need to be able to demonstrate "a critical understanding of the health and social care commissioning, policymaking and change management processes and the opportunities to influence these." How was this taught?

15. This was a learning outcome within the Delivering New Perspectives in Specialist Learning Disability Practice module. The teaching of this involved providing an understanding of the roles of Department of Health, Public Health Agency, Health and Social Care Board (no longer in place) and Health and Social Care Trusts in the process of commissioning health and social care within Northern Ireland. It explored the potential drivers that may influence decision making about the commissioning of services and the challenges in competing demands and expectations. Students were made aware of opportunities to respond to ongoing consultation documents relating to policies being developed within Northern Ireland and the Nursing and Midwifery Council and encourage to participate in these consultation exercises. The management of change was taught within this module and the core Leadership module within the Specialist practice nursing programme. Within the module on Delivering new perspectives in Specialist Learning Disability Practice, possible change models were critiqued and practical examples of developments such as the introduction of the Hospital Passport for people with learning disabilities in Northern Ireland and the development of the RQIA guidelines on caring for people with learning disabilities in general hospital were explored. As noted in 13 c) above this module also addressed skills in negotiation and influencing change. These areas are also reflected in the portfolio that the student must complete.

Declaration of Truth

The contents of this witness statement are true to the best of my knowledge and belief. I have produced all the documents which I have access to and which I believe are necessary to address the matters on which the Inquiry Panel has requested me to give evidence.

Signed:

PROFESSOR NEAL COOK

Date: 14 June 2024