

The Future of Healthcare Education following the Comprehensive Spending Review

Insights and Perspectives from the North West Stakeholder Forum

1. Background

The government's Comprehensive Spending Review (CSR), published on 25th November 2015 and accessible [here](#), outlined major changes for health education in this country, the relevant key statement being "Grants for health students will also be replaced by loans, and the cap on the number of nurses and midwives that can go into training each year will be removed." The policy detail of this still being defined, however it is expected that this will mean that HEE's direct role in commissioning most pre-registration programmes from August 2017 will change and a move to the Student Loans Company for student support away from NHS Student Bursaries.

In anticipation of the Department of Health's (DH's) planned consultation on the changes, HEE (NW) recognised the need to keep open the lines of communication with its stakeholders and provide an opportunity for all North West organisations potentially affected to contribute to shaping the future. For this reason it was decided to utilise one of the popular Stakeholder Forum events to commence engagement on this critical issue aiming to:

- Provide an opportunity for collective discussion on the national consultation to help inform a shared North West response
- Provide a forum to identify opportunities, implications and the risks & mitigations for key stakeholders within the new landscape
- Develop and set out an engagement strategy that key stakeholders believe will be helpful to capitalise on arrangements currently working well but also drive the development of the new system in partnership.

What follows is a summary of the insights and perspectives shared by a significant group of stakeholders who represented the full spectrum of the health and education sector in the North West.

Attempts have been made to capture the summary points raised without applying any interpretation. Based upon the perspectives and observations made, suggestions are given for next steps in how HEE (NW), with the support of local stakeholders, will seek to plan and respond to the implications that the implementation of the CSR reforms may have.

2. Gaining Perspectives

2.1 World Café

The design of the stakeholder programme was planned to enable open and shared discussions. A World Café session gave all in attendance the opportunity to discuss the key areas of risk as identified by HEE's National Education Commissioners' Network. Seven areas were considered, further details of which can be found [here](#). Stakeholders were asked to consider the following questions for each area:

1. What does it mean to you?
2. What are the risks?
3. What are the mitigations against potential risks?
4. What are the potential opportunities?

A summary of key points emerging from the discussion can be found below.

System Leadership:

- The first area was possibly the most diverse in terms of what it meant to those in attendance with the most common interpretations being the need for continued collaborative working across 'the system', co-production and engagement, along with leaders who understand the changes afoot with the skills of transformation and culture change.
- It was felt that there was a risk of not getting the right systems in place in time or that the correct leaders were not yet identified to ensure adequate representation in each locality and sector. At the same time carrying on as before or disguising the status quo as change was also seen as a big risk.
- It was seen as essential to bring leaders from all sectors together to enhance understanding of the system as a whole. The need for collaborative leadership board or one clear leadership centre was identified.
- In view of the above, the changes ahead were seen as an opportunity for better integrated working, for co-production of a leadership system, to embrace change and to identify a new type of leader across all sectors.

Workforce Supply:

- Groups discussed the continuing need for the right people with the right skills in the right place and to anticipate the future need.
- The groups felt the main threat to workforce supply was the move away from a student bursary as it was felt fewer students would apply for education programmes. In the short term they queried whether there would be a dip in the quality of applicants as they applied earlier to try to access the current models of support.

- They were concerned that students as consumers may not want to work nights and weekends leading to pressures at those times and that some smaller, specialist or less popular programmes would cease altogether.
- Again, alternative education was seen as a big mitigator in this area, namely the potential of the apprenticeships reforms.
- Groups felt that diversifying roles and working across multi-professional boundaries was essential for the development of the future workforce.
- The importance early career engagement, particularly in schools, improved marketing of roles, or increasing the role of in-house training in acute trusts would be essential.

Widening participation:

- Almost all who commented agreed that widening participation meant enabling a diverse student and workforce population, increasing access for those who may be from disadvantaged backgrounds, making access to programmes easier and more affordable and employment accessible to all.
- The risks identified to these ideals centred on the belief that certain student populations may no longer be able to afford to study e.g. mature students, those with children, those from poorer backgrounds etc., potentially leading to a less diverse workforce.
- Suggestions for mitigation of these risks included marketing programmes to raise awareness of student loan repayment figures and enabling more flexible delivery of programmes so that students with other commitments could study. The backing of regulators and professional bodies was seen though as a barrier in enabling this.
- Participants saw an opportunity to explore higher level apprenticeships as a way to achieve more flexible delivery, to train their own students (in various ways) and to utilise APEL processes more effectively.
- They saw an opportunity for placement providers working together across health economies to ensure a more locally representative workforce but stressed a need for more action to ensure its diversity.

Placement capacity and capability:

- Discussions centred on mentor capacity and quality of support, the future arrangements for funding of placements and how the quality of placements will be monitored.
- The groups were fearful that mentors and staff would be overworked if placements increased in the context of reduced CPD funding and care may be compromised. An excessive use of simulation in place of placement time was, however, also a concern. Some felt that acute trusts may reduce placements in line with their own workforce plans leading to inadequate number of training places to meet wider health economy workforce requirements.
- There were concerns about a placement 'free for all' without a regional overview and unknown funding arrangements. The change to students' expectations, particularly in

respect to choice, was concerning for many, and placements in more rural or less popular places were deemed to be at risk.

- The possibilities of more primary care and community placements, multi-disciplinary placements, placement clusters, practice educators and simulation were discussed as a means of mitigating the risk of increased requirement for placements.
- Collaborative working between placement providers was seen as essential and it was felt that HEE (NW) should manage the transition to a new model to prevent a 'free for all'.
- There were opportunities identified, namely the development of new education delivery models and new ways of working. Some hoped that funding arrangements that reflected the true cost of mentoring students could be ensured. Other opportunities seen included capitalising on the good relationship between education and placement providers, the development of 'nursing schools' and 'grow your own' initiatives, placement providers taking more responsibility for placements, improvements in simulation, innovative placement delivery, e.g. multi-professional or coaching large numbers models, and modernised mentorship training.

Quality and fitness for purpose:

- This area focussed on the standards required to practice and to pick up the demands of the role, the quality of the learning environment as well as the care provided by students and the need for clear outcome measures.
- Reduction in quality in all areas was the main concern, namely quality of care, education due to a wider variation in programmes, not enough mentors to support predicted additional students and an over-emphasis on the academic ability of applicants.
- The groups suggested these could be at least partially mitigated by joint quality assurance frameworks with education and placement providers, joint recruitment to ensure the most suitable starters, curricula which met service demands and, again, clear measurable outcomes.
- There was an opportunity seen for greater partnership working between education and placement providers and a suggestion that clear measurable education outcomes would be helpful as part of the new quality monitoring and assurance frameworks currently being developed... Co-production was cited as an opportunity, as were reformed recruitment practices with the option of localised placement circuits and reformed quality monitoring.

Transformation and Innovation:

- The overwhelming theme of this area was about taking risks, thinking 'outside the box', 'breaking the mould', doing things differently and moving away from tradition. The purpose of this was seen as achieving better outcomes and it was recognised that skills were needed to promote transformation and innovation.
- The risk associated with the above were seen as a failure to achieve transformation due to reduced workforce numbers, leaders not creating a culture in which risks could be taken, opposition to change from staff, students and particularly regulators, and a failure

for the whole system to work together to implement innovations such as new roles, leading to fragmentation across the region.

- It was felt that the best ways to mitigate these risk were to ensure the facility for a whole system overview with the ability to decide what to do at scale, for true collaboration between sectors ensuring joined up planning, to share best practice across the region and across sectors, particularly in STP footprints, to involve professional bodies, regulators and unions in discussion as soon as possible.
- It was felt there were real opportunities to 'release' time and money by fostering innovations, to embed innovation in education and practice, to develop multi-professional competencies and therefore reduce silo working, and to co-produce innovative models of education delivery with a closer relationship between education and placement providers.

Student Support:

- Discussion in this area concentrated on the main areas of financial support available to healthcare students and the support provided to them on placement. The main concerns were that students would not be able to support themselves financially leading to fewer applications, especially from mature students (and potentially a lower quality of starters), or to higher attrition and fewer qualified practitioners available to the NHS workforce. It was noted that, even if students could afford to access the programme, they may not be able to afford to travel to the placements furthest away from the university or their home which would lead to destabilisation of the placement circuit. There was also a concern that there would be altered expectations about working nights and weekends.
- Some of the ideas to mitigate these risks included the development of alternative education delivery models, such as accelerated programmes, earn and learn routes and childcare friendly term and placement times. It was also suggested that the role of the PEF be extended to meet the higher demands of a 'student as consumer' population.
- The groups saw opportunities in this area regarding a redesign of the PEF (or similar) role, refreshing healthcare programmes to ensure they represented best value for money for students, to develop more flexible approaches to education delivery and to maximise use of apprenticeships.

2.2 Panel Discussion

The Stakeholder Forum Event included time for a selected panel of participants representing education, commissioning, service and professional leads to be asked questions by the attendees. Questions and key responses included:

- What keep you awake at night?
 - High turnover of staff
 - Widening participation post-2017
 - Scale and complexity of challenges faced

- Introduction of a free market
- Recruitment to small, specialist or less popular programmes
- What do you feel are the biggest opportunities and how can HEE support you?
 - Higher apprenticeships
 - Transformation and Innovation especially regarding regulations
 - Transformation especially new care models
 - To work more collaboratively
 - Capitalise on good relationships between HEIs and HEE (NW)
- Several members of the audience felt a better understanding of the aims and purpose of new structures such as the implications of the Sustainability and Transformation Plans (STP) was required. (Please use this link to access guidance about [STPs](#))

At the end of the panel there was common agreement that learning the lessons of previous restructures was essential and also the need for greater and higher quality evaluation in all developments so that we had a better sense of the evidence and impact of developments.

2.3 Table Top Discussion

Table top discussions were conducted with the aim of addressing four questions, a summary of the key points emerging from the discussions can be found below:

- From what you have heard today who are you going to speak to and why?
- How do you see HEE (NW) best supporting development and delivery of a new system?
 - New roles especially in relation to Practice Nursing and other Community Specialist Practitioner roles
 - Enabling North West use of the existing placement circuit
 - Help to maximise the apprenticeship levy
 - Working with stakeholders to develop vocational training routes through apprenticeships
 - Protecting the small professions and harder to recruit geographies
- What should be the top of our 'to do list'?
 - Ongoing regular communication with stakeholders on the national and local developments including the career engagement hubs

- Provide ongoing information and engagement on the apprenticeship levy and facilitation of the development of vocational routes within health economies (STPs)
- A central repository enabling useful papers to be shared
- Improve the sharing of learning for successful workforce solutions
- Co-ordinate the marketing of programmes and geographies, considering the attraction of widening participation students
- Moving forward with the Transforming Learning Environment project
- Use the LWEG/LWAB structures to facilitate joined up local solutions within health economies, with PPI
- Provide oversight to try and maintain stability of provision
- Work nationally with regulators to support those delivering new models of care to be registered
- Finally any challenges that we haven't covered anywhere else today?
 - Still a lot of answers needed re CSR and concerned at the pace of change required
 - The risk of a free market
 - Challenges on the funding on offer for post grad pre-registration
 - Continued uncertainty for non bursaried courses such as Clinical Psychology
 - Urgent shortages in Primary Care, of paramedics and in Learning Disabilities
 - New funding mechanisms will favour continued bias to acute setting as Trusts forge relationships with HEIs

3. Summary

The major themes emerging from the event and to be incorporated as part of any influencing and planning included:

- Importance of a multi-professional approach
- Need for active and shared collaboration
- Open, active and transparent communications across the system
- Innovative education delivery models

- Increase in the co-production of education programmes by education and placement providers
- Planning and responding to the consequences of change in students' expectations

4. Next Steps

On the basis of the perspectives shared, the following next steps have been identified.

- Align HEE(NW) focus with the outcomes from the DH Consultation 'Reforming healthcare education funding: creating a sustainable future workforce'
- Influence up and across so the local and North West perspectives, and concerns are known and appreciated.
- Utilise Local Workforce Action Boards as hubs for future engagement
- Firm up the new Education Commissioning Offer and circulate to all stakeholders
- Develop continuing support for the transition to non-commissioned healthcare training and the development of apprenticeships
- Dissemination and active engagement in promoting the roll out of the new Quality Assurance Framework
- Utilise HEE NWs current 'Transforming Learning Environments' review of the learner support networks (PEFs, Placement Development Network and WBEFs) to maximise the coordination, management and leadership of placement capacity, capability and quality aligned to emerging strategic contexts and priorities.
- Ensure awareness of developments already in progress, maximising current support infrastructures, Getting ready for the Apprenticeship Levy, promotion of the local Career Engagement Hubs
- Facilitate local networks with HEIs and Trusts and other service providers
- Host a series of Listening events on tariff, following the outcomes of the consultation.

Acknowledgements

HEE (NW) wishes to extend its sincere thanks to all participants who attended and participated in the stakeholder forum. The insights, expertise, willingness and quality of the perspectives shared were significant. The commitment for stakeholders to ensure an environment that was conducive to collaboration, effective risk management but building upon the innovative experience of the North West in responding to future challenges was strongly evident.