

Higher Education Funding Reforms

Clinical Placements



Background

The reforms announced in the Comprehensive Spending Review (CSR) in 2015 will lead to significant changes in the way health education funding is provided, this will mean that from 1 August 2017;

- Most new students in England on nursing, midwifery and AHP preregistration courses who currently have access to NHS bursaries will instead have access to the standard student support package of tuition fee loans and support for living costs.
- The cap on the number of University places will cease

However, HEE will remain responsible for discharging the Secretary of State's duty to ensure the supply of staff for the NHS. It doing so it will need levers to secure the numbers of students identified through workforce planning



Engagement – Clinical Placements

HEE will

| ensure the NHS has the workforce it needs | maintain the current number and distribution of clinical placements for 2017/18 |
|--|--|
| ensure investment in clinical placements is used to ensure: right geographical and professional range of graduates | work with its partners to implement reforms |
| ensure the NHS only recruits the best | ensure a smooth transition to the new system when the cap on numbers in training is lifted |

Future commissioning arrangements and funding

Number of placements



number of students required to meet HEEs workforce plan



What are placements for?

Student

High quality and safe practice learning environment

Application and development of skills

Exposes and socialises students to the cultures, values and behaviours of organisations where people are cared for

Access to breadth of roles, interprofessional learning, clinical and organisational experiences

Current workforce

Opportunities and motivation to develop and guide the future workforce

Wider impact

Presence of students can have positive impact on patient care

Improve recruitment and retention of staff

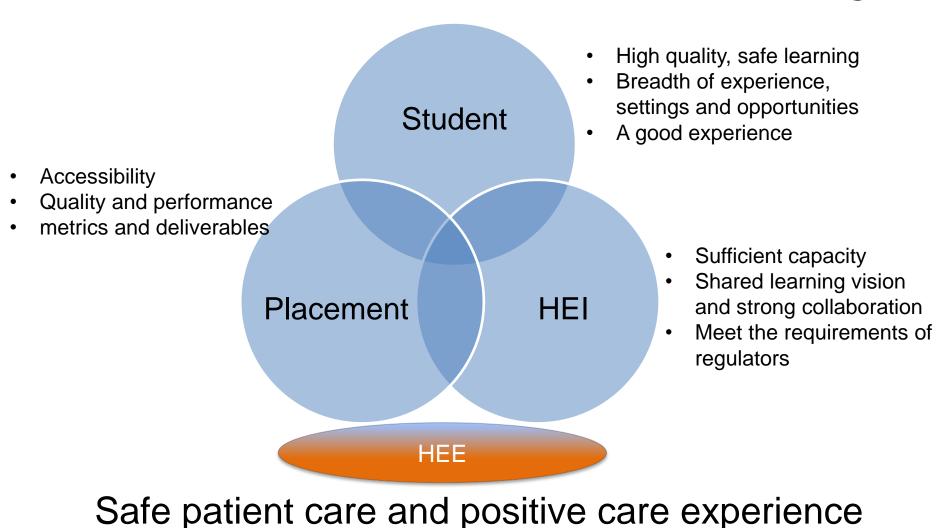
Supports research & innovation

Supports future sustainable and transformed health and social care workforce and services

Facilitates diversity and supports and enables widening participation

Attributes of Placements





Current Responsibilities for Placements



Higher Education Providers

Placement providers

Programme quality

standards and innovation

Capacity, capability and quality assurance

Recruit students

curriculum development

Practice learning,

Student needs, progression and

Information provision

Practice mentors and supervisors

Access to placements and placement partnership agreements

Welfare and safety of students on placement

Assessment and sign off for learning outcomes and competencies

Current Responsibilities for Placements



HEE

Regulators and professional bodies

Discharging the Secretary of State's duty

Ensuring minimum new workforce supply

Oversight of placement capacity and capability

Managing and mitigating risks

System wide leadership

Developing a single Quality Framework – 2015/16 Mandate

Distributing funding for placements

Commissioning of infrastructure and education support

Setting standards and assuring the quality and safety of learning wherever it takes place including practice learning environments

Mentorship education

Libraries and information services

Technology enhanced learning

Other local initiatives

Simulation



Placement Capacity

- New commissions driven by workforce demand through workforce planning process and published as part of National Workforce Plan
- Locally, commissions determined through de-aggregation of national plans to reflect local and national needs
- Placement capacity aims to be aligned to demand from commissions
- Capacity also needs to reflect patient care & safety, quality, requirements of regulators, curriculums & learning outcomes, service settings and sectors, etc.



Programmes currently covered by HEE placement funding

- Nursing (all fields)
- Midwifery
- Podiatry
- Dietetics
- Occupational Therapy
- Operating Department Practice
- Orthoptics
- Orthotists/Prosthetics

- Physiotherapy
- Speech & Language Therapy
- Diagnostic Radiography
- Therapeutic Radiography
- Dental Hygiene
- Dental Therapy



HEE Quality Context

- · Statutory duty to secure continuous improvements in the quality of education and training
- Promoting skills and behaviours that will uphold the NHS Constitution work-based learning environment crucial to this endeavour.

Quality Framework

Core metrics

Data driven

Risk based Multi-professional tool

Measure quality

Identify quality

Improve quality

Clinical environment focus

Broad multi-professional education support infrastructure

Consistent and comparable view of quality

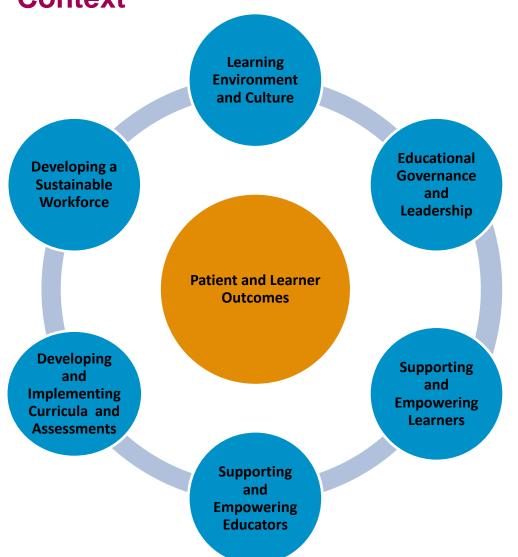
National and local level

High quality patient care

Supporting learners

Quality improvement

HEE Quality Framework – Strategic Context





HEE quality framework

Standards for Clinical learning environment

Workforce with the right skills, values and behaviours

Safe, effective and compassionate patient care.

- Patient Safety
- Sustainability & Transformation
 Plans (STPs)
- Quality Improvement
- Quality 'Early Warning System'

Quality improvement and patient safety



- Response to quality concerns in partnership with HEIs and placement providers
- Early warning system
- HEE engagement / notification of quality assessment to system partners
- HEE specific response to support quality improvement within a 'special measures' context
- Thresholds for escalation, risk assessment and system-wide aligned response
- Proportionate and evidence based 'quality interventions'
- Ensure lessons learned process from all critical issues
- Robust processes, systems and governance to underpin all of the above

Approval of programme and work-based learning sites (HEE, Professional Regulators and Local Education Providers)



Suspension of approval and removal of students. Support for learning environment quality improvement.



Current process for distribution of placement funding

DH

Provide funding
Set policy
Overall level of funding
Rate of funding

HEE

Manages and distributes funding

- Funding applies regardless of the setting or location of the placement
- The currency for tariff is made on the basis of 'student weeks'



A changing landscape...

Within the wider NHS:

Introduction of sustainability and transformation partnerships

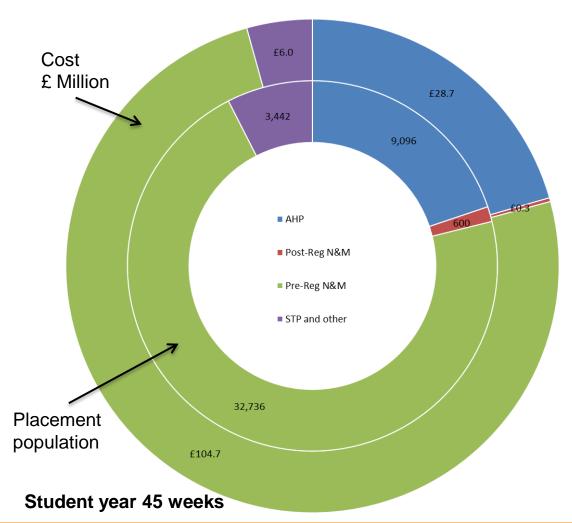
Development of new care models

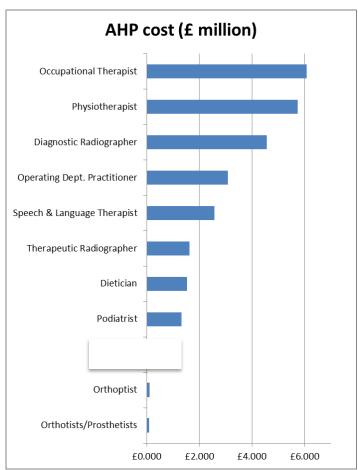
- Supply
- Up-skilling
- New roles (Nursing Associate)
- New ways of working (greater community involvement)

Within Health Education: Student funding changes (tuition, maintenance and placements) **Apprenticeship HEE review of** development salary support

HEE's investment in non-medical placements

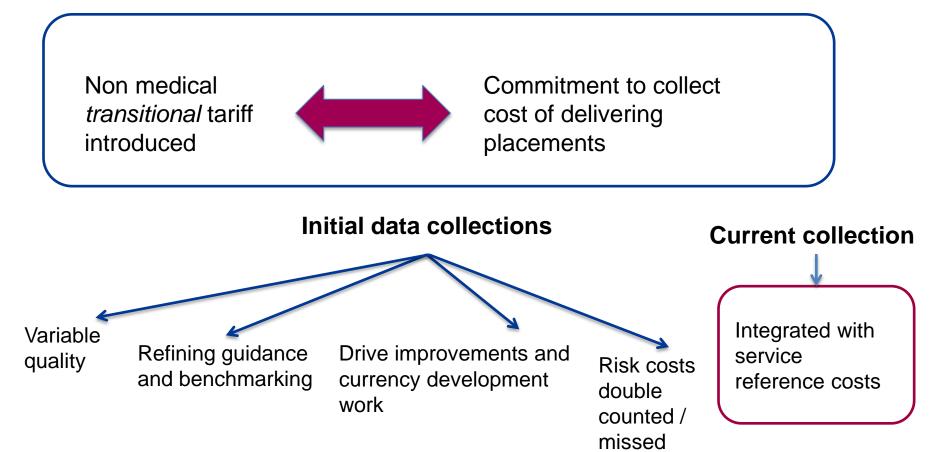






Tariffs for non-medical clinical placements





Next couple of years - Likely that current transitional tariffs will be in place (with marginal changes)



To attract funding a placement must:

- be recognised part of the education/training curriculum and approved by the education provider and regulatory body as appropriate
- meet the quality assurance standards of the regulator professional bodies and commissioner
- be quality assured in line with the agreed processes
- be direct clinical training of a minimum of one week
- have the appropriate clinical and mentoring support



What is funding for?

| Tariff applies to: | Any type of organisation | |
|--|--|--|
| | Any setting | |
| | England (outside England, placements commissioned by HEE and the local offices at a locally agreed rate) | |
| | Covers funding for all direct costs involved in delivering education and training by the provider | |
| Funding for placements Commissioned by HEE and local offices | Must not be used to subsidise any element of the cost of placements for non-NHS funded students/trainees | |

Non-medical tariff funding use will vary to reflect local needs and may include a wide range of costs such as:

Direct staff teaching time within a clinical placement Teaching and student facilities, including access to library services, simulation, etc

Coordination and support

Quality assurance

Pastoral and supervisory support

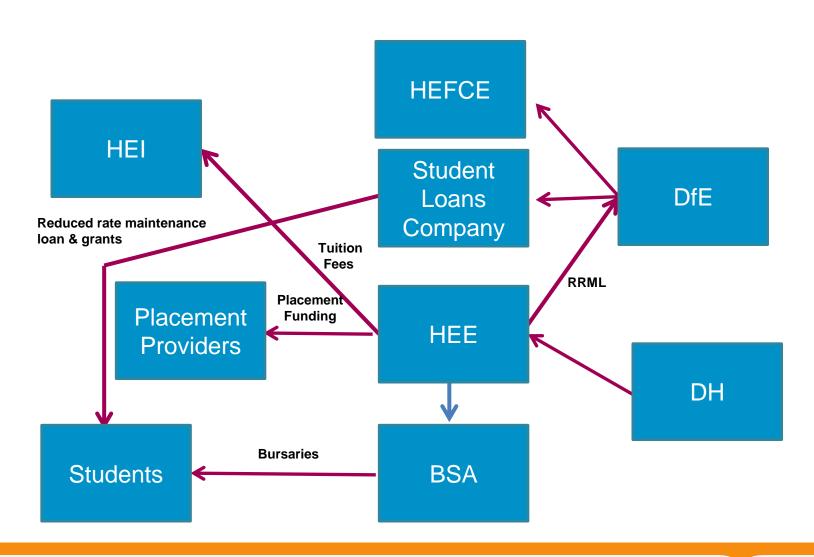
Infrastructure costs

Education supervisors and support roles

Existing funding flows for non-medical students



Health Education England





Objectives for placement funding

| Patients | Safe, high quality care from students under supervision |
|---|---|
| Students | Consistent high quality learning experience |
| HEE and regulatory requirements | Requirements of the HEE Quality Framework and regulators met |
| HEE Placement funding contributes to | Sustainable teaching and learning infrastructure |
| Learning environment supports | Development of students fit for practice at point of registration |
| Placements, learning outcomes competencies | Transformed and flexible workforce for the future |
| Future | Not inhibit the ambition to grow the workforce |
| Widening participation and equality and diversity | Informed by and informs the wider strategic system responsibilities |
| Deliver as good if not better placements | System works collaboratively |



Placement funding outcomes

| Workforce supply | Sustainable, home-grown, meets the health and care needs of the population |
|---|--|
| Facilitate high quality workplace based learning and assessment | Supports health courses in the TEF process |
| Student satisfaction | Supports high levels of student satisfaction |
| Placement capacity and capability | Support future needs |
| Future workforce | Enables and embeds workforce transformation |
| Widening participation, diversity and student choice | Supported through access to appropriate placements |
| Small professions and geographical demands | Variations managed |



Other factors to consider:

How would:

- the list of eligible programmes be reviewed and new programmes be added to the list?
- new universities or other entrants be able to access funded HEE placements?
- new routes for training, such as pre-registration apprenticeship programmes, access funding?
- the need to meet the requirements of new care models be managed?
- student expectations and choice be managed while meeting the need to maximise placement capacity?
- each option best deliver affordability & sustainability?
- diversity and widening participation be facilitated?
- how might the administrative burden and cost of managing each option differ?
- what would be the impact of new technology and simulation and should this be eligible for HEE placement funding?

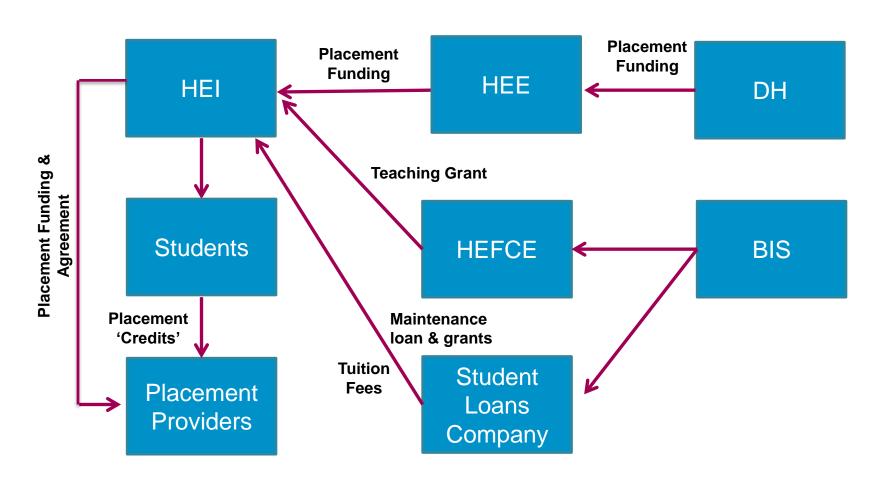


Issues to discuss/resolve

- Distribution of current placements tertiary/secondary care, community, primary care, PIVOs, Local Authorities
- Areas for growth to reflect future demand care and nursing home sector
- Impact of new roles and programmes Nursing Associates, Physician Associates
- HEEs role in securing future supply to meet workforce plan (nationally and by profession/geography)
- Vulnerable programmes
- Static budget at least until 2020

Placement funding via Students to placement providers







Health Education England

Placement funding via students to placement providers

Advantages

- Gives student greater choice and influence over placements
- May drive up quality as providers compete for activity
- Students may develop stronger links •
 to providers who offer good
 experience or incentives which may
 improve recruitment

Disadvantages

- Potential imbalance between HEE supported and other students
- Providers may choose not to offer placements
- Students may choose convenience, location and travel time, over quality
- Adverse affect on rural or more remote areas
- Introduces complexity and potentially costs in supporting informed choice, monitoring activity and managing payments
- Governance



Higher Education Funding Reforms

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Options for the future



Ways in which the funding could be managed

There are a number of potential options for distributing future funding, including:

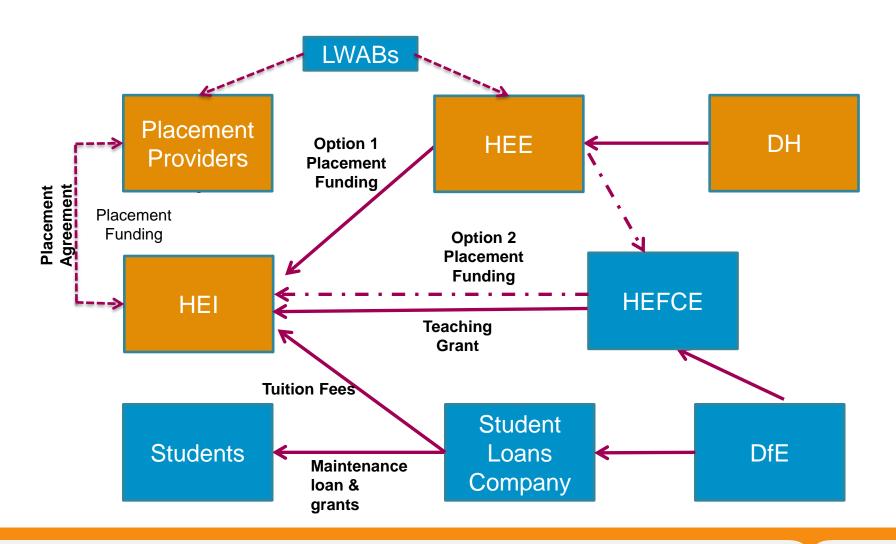
- 1. Placement funding directly to placement providers via HEE
- Placement funding by HEE or HEFCE via HEIs to placement providers
- 3. Placement funding to support learning environments or via a lead organisation to support learning collaboratives



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1. Placement funding by HEE or HEFCE William Via HEIs to placement providers Health Education England





Placement funding by HEE or HEFCE via HEIs to placement providers

Advantages

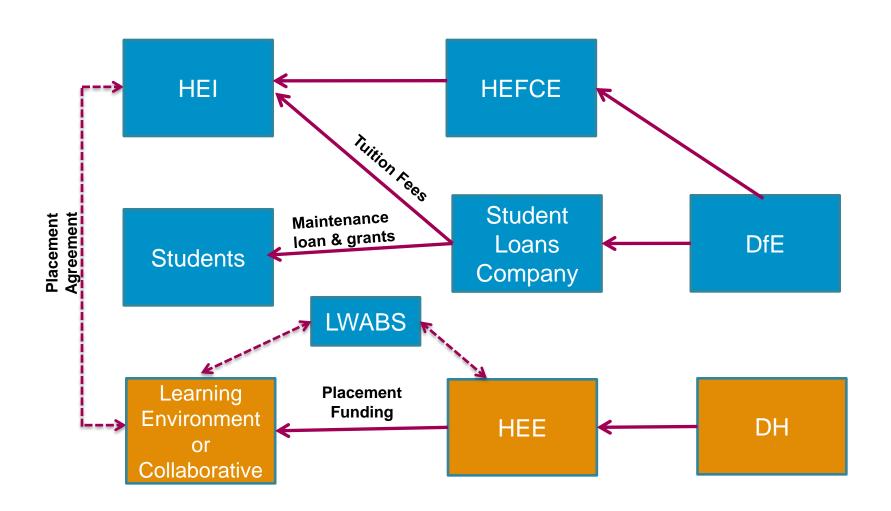
- Enables direct relationship
- HEFCE option offers direct links
- Would align with universities responsibilities to regulators
- HEE continues to be responsible for the quality of learning environments
- Some existing experience and is current model for social work
- Able to track the funding of students

Disadvantages

- No direct link for HEE for the quality
- Risks of NHS responsibility to a third party
- Education providers may not have the links to wider health and social care economies
- Need to separate funding from other funding streams
- HEFCE would need new system of monitoring and governance
- Challenges for placement providers
- Loss of control of quality framework,
- Loss of money for smaller professions

2. Placement funding to support learning environments or via a lead organisation - to support learning collaboratives Healtle





Placement funding to support learning environments or via a lead organisation to support learning collaboratives



Advantages

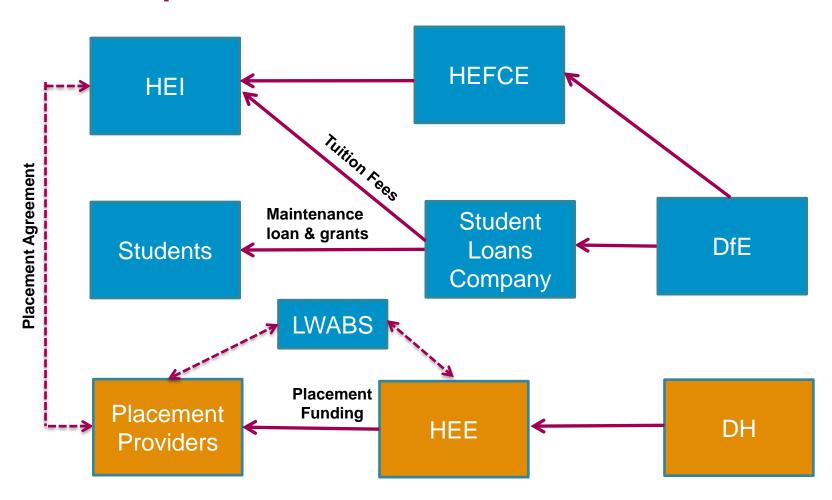
- Multi-professional
- Offers opportunities to align with other placement tariffs
- Funding based on quality outcomes
- Based on minimum number of learner weeks rather than individual learners
- Potential flexibility within an overall allocation

Disadvantages

- Removes current direct link between student and funding
- Process for identifying and agreeing suitable environments
- Current contractual arrangements would need to change
- Risk of inequity
- New system of monitoring and governance needed
- Risks for statutory regulators around the delivery of standards

3. Placement funding directly to placement providers via HEE







Placement funding directly to placement providers via HEE

Advantages

- Minimum change to the system
- Established administrative and contractual processes
- Supports HEEs statutory responsibilities
- Link to HEEs role STPs, LWABs
- Utilises HEEs intelligence and data
- Simplifies introduction of new access routes
- Supports large programmes

Disadvantages

- Lack of a direct link to quality processes and outcomes
- May reduce flexibility
- Could lead to differentiation
- Could reduce incentives for expansion
- Distances decisions on placements from HEIs – maintains status quo
- Potential for less open and transparent funding flows
- Small programmes with disbursed placements not supported



Way forward

- One model
- Mixed model for different professions
- Implementation



Other workstreams

- The government is committed to monitoring, in detail, data regarding application rates, diversity statistics and workforce supply following the implementation of the reforms.
- A new group has been established to take forward this piece of work, with representatives from DH, DfE HM Treasury, HEE and the Higher Education Funding Council for England (HEFCE).
- The group will work with Higher Education Statistics Agency and the Universities and Colleges Admissions Service to ensure the data garnered is precise, relevant and up-to-date.
- The government will set out further detail regarding monitoring and evaluation in second part of its official response to the consultation, planned for Autumn 2016

Following engagement events – analysis and contribution to phase 2 of DH response to consultation



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