# Education Quality Strategy



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## Introduction

On the 1st of April 2023, Health Education England (HEE) merged with NHS England and became the Workforce, Training and Education Directorate (WT&E) of the new NHS England. The general function of HEE was to support the education, training and development of the NHS and public health workforce. This function was transferred to NHS England. Through the NHS Act 2006 and Care Act 2014, NHS England has a statutory duty to secure continuous improvement in the quality of training and education provided for healthcare workers.

The directorate discharges this function by:

* Providing national leadership on workforce planning and development, ensuring the security of supply of the professionally qualified clinical workforce;
* Promoting high quality education and training, responsive to the needs of patients and local communities;
* Allocating and accounting for NHS and public health education and training resources and the outcomes achieved.

## Our Education Quality Strategy

The journey so far

In 2016, we published our first Education Quality Strategy and Education Quality Framework as HEE. The Education Quality Strategy was developed in co-production across HEE and with our wider stakeholders and partners to describe how we ensure that quality is at the heart of, and is the driving force behind, our education and training agenda. The Education Quality Strategy sets out our priorities, principles and overarching processes for continuous quality improvement and innovation in the education and training of the healthcare workforce. The Quality Strategy is underpinned by our Education Quality Framework, which makes clear the quality standards we expect of clinical learning environments, safeguarded through the NHS Education Funding Agreement. The NHS Education Funding Agreement is a key lever to support the delivery of our standards across all providers and help to ensure that all commissioning decisions are informed by our understanding of, and insight into, the quality of healthcare education and training.

What we have learned

The development of the Quality Strategy and Quality Framework was an ambitious undertaking, the first of their kind within the largest healthcare education and training system in the world. Since the strategy was first published, we have continued to learn and improve how we drive continuous quality improvement. We have responded with agility and flexibility to the changing landscape of education and training and the new challenges, opportunities, and priorities this has presented, including:

* The transition to the new NHS England;
* Delivery of the Long-Term Workforce Plan, Manifesto and People Plan commitments;
* Expansion in clinical placements and international recruitment;
* The reforms to education and training;
* The need to ensure quality is embedded within integrated care boards (ICBs), primary care networks and training hubs;
* The continually evolving system leadership role for NHS England and its national and regional partnerships;
* A greater emphasis within health and care services on wellbeing, flexibility, equality, diversity and inclusion;
* The NHS Patient Safety Strategy.

Our focus

In response to the challenges we face, and the learning we have gained, we refreshed our Education Quality Strategy in 2021, drawing on the knowledge, experience and expertise of our partners and stakeholders through an extensive process of engagement and co-production. We have now updated the Education Quality Strategy to reflect our transition to the new NHS England.

Our Education Quality Strategy enables NHS England to be the system leader for multi-professional education and training, providing clarity about:

* What we expect placement providers to do to promote and support equitable, diverse and inclusive learning environments;
* The mechanisms through which we engage with, and listen to, our learners;
* How we will promote and support the wellbeing of learners through our quality standards and quality interventions;
* How we expect the wellbeing and role of educators to be promoted and supported;
* How we will monitor and assess quality, and respond to quality concerns, capitalising on good practice, innovation, and technology;
* How we will build stronger collaborative alignments with the wider health and care system, including through our offer to ICBs;
* How we will seek to drive continuous improvement in the quality of education and training in England;
* How we improve patient safety collaboratively with the system.

Working differently

The Education Quality Strategy promotes evolving ways of working to reflect the changing healthcare landscape.

We will develop and build on our use of technology to enable quicker and more efficient access to learners and educators for their feedback. Using feedback, we will develop annual action plans, with underpinning data, for areas in which we will focus improvements. Each year we will review our intelligence and develop improvement reviews as required (for example, a focus on wellbeing, promoting Freedom to Speak Up Guardians and supporting our educators).

We will build on and support a consistent approach to quality oversight at local, regional, and national level, for enhanced quality assurance. These governance arrangements will support us in the systematic sharing of learning and good practice, including on a system basis, for improving education and training quality. This will require us to work in partnership with ICBs to support their development, particularly in relation to education and training quality.

We will use the levers in the NHS Education Funding Agreement and the standards for quality set out in our Education Quality Framework to ensure that commissioning decisions reflect our understanding of quality. The NHS Education Funding Agreement will ensure that all providers assess their delivery of education and training against our quality standards on a routine basis.

## Strategic aims

Culture and principles

Our quality principles will promote a culture of learning across education and training that delivers a safe and inclusive environment for learners, patients and educators.

NHS England will support our providers to embed a culture that is transparent, diverse, and inclusive through the application of the Education Quality Framework and through the learning from our work across wellbeing and equality, diversity and inclusion.

To this end, we are guided by a set of core principles underpinning how we work:

* Patient safety and learner wellbeing at the core of our activity;
* Promoting and supporting quality improvement;
* A multi-professional approach in all we do;
* Promoting EDI;
* Promoting consistency and a common language;
* Encouraging and sharing innovation;
* Facilitating a cross-system approach to quality and encouraging partnership working with all our partners and stakeholders to maximise the advantages of joined up working for the benefit of patients, learners, and educators;
* Recognising the shared responsibility we all have for quality across the system;
* Value for money for our investment in education and training.

Listening to, and engaging with learners

Central to our understanding of quality is the learner voice and we strive to ensure that this voice is heard and acted upon. We gain direct learner feedback from a range of sources, including:

* Routine surveys such as our own National Education and Training Survey (NETS), the General Medical Council’s National Training Survey (NTS), and the National Student Survey (NSS);
* Targeted surveys of learners at critical points in time to meet emerging needs for deeper insight and intelligence;
* Learner forums to facilitate collaboration and a greater depth of engagement with learners (such as national and regional learner forums, focus groups, and national and regional professional forums).
* On-going touchpoints with NHS England throughout a learner’s education and training journey (including feedback via our quality interventions).

The learner voice enables us to respond to challenges and promote good practice by understanding quality through learners’ experiences on the ground, enabling us to target our quality management interventions and closely monitor actions and improvements. We are also able to develop local, regional and national quality improvement initiatives through engagement and partnership with learners and stakeholders.

We are committed to building on our use of the learner experience to enable a more systematic use of feedback and engagement in our priorities for improving the quality of education and training. We are strengthening in 4 key areas:

1. Feeding back to learners on what has happened because of what they have told us - ‘you said, we did’;
2. Increasing the systematic use of learner feedback (for example, through better engagement to improve survey response rates and greater capacity for local and national analysis);
3. Improving the timeliness of identifying and responding to intelligence through, for example, quicker turnaround of survey data, targeted, ad hoc surveys (for example, using focussed versions of our NETS), and national thematic reviews;
4. Using collaborative and co-design methodologies to deliver sustainable improvements in quality.

Working with regulators

Working with the healthcare and professional regulators, we have a joint responsibility for monitoring, maintaining, and sustaining quality, promoting closer working and avoiding duplication. Through our regional and national governance arrangements and active collaboration, we will continue to work together to effectively share and analyse data and intelligence, support multi-professional quality issues, and enable and empower multi- and inter-professional learning.

Working with placement providers

Working with our placement providers, we will exercise proportionality, be supportive and solutions focused, support educators and leaders in education and training, and support placement capacity and capability. We will seek to share quality information and intelligence, helping to assure the quality of clinical placements and supporting continuous quality improvement. We will also support the links between education providers and those working in clinical practice to help educators in their role in supporting learners.

Working with ICBs

To realise our shared ambitions for quality in the learning environment, NHS England continues to work with system partners to ensure alignment with the evolution of ICBs. NHS England will develop an offer to ICBs that will be flexible to reflect the maturity status of the ICB and will be based on the following core principles:

* **Effective education and training quality functions** – NHS England and the ICBs to work together to ensure that the quality of healthcare education and training is a priority and that there are the structures and processes in place for its effective delivery;
* **Effective leadership and delivery capacity and capability** – NHS Education to support the ICBs in developing effective leadership and workforce capacity and capability in the delivery of high-quality healthcare education and training;
* **A multi-professional approach to education and training** – to ensure that healthcare education and training is delivered effectively in a multi-professional way where needed to effectively support workforce expansion and priorities in the Long-Term Workforce Plan;
* **Bringing together quality and workforce transformation** – to recognise and capitalise on the inter-dependencies between education and training quality and workforce transformation;
* **Commitment to the continuous improvement of quality** – NHS England to support the ICBs in the continuous improvement of education and training delivery as a priority to ensure there is a broader focus on quality beyond risk management and mitigation;
* **EDI** – working and learning environments for healthcare learners and those supporting them should support and promote EDI;
* **Evidence-based quality** – quality monitoring and improvement is driven by appropriate data an intelligence;
* **Partnership working to manage and improve quality** – NHS England and the ICBs to work collaboratively together (and with other stakeholders where appropriate) to maintain and improve the quality of healthcare education in line with clearly set out governance arrangements (and contractual obligations where relevant);
* **Effective investment and healthcare education and training** – ensuring value-for-money in NHS England’s investment in healthcare education and training across the system;
* **Sharing information and openness** – key information is shared with relevant partners and stakeholders in a timely and transparent manner.

This leadership offer will ensure quality of placement experience and learning for all our learners. It will enable multi-professional support and promote inter-professional learning to develop a flexible and adaptable workforce. NHS England’s regional and local quality infrastructure and wider partnership networks are well placed to offer models of multi-professional support to underpin this and promote the value of inter-professional working and learning in the workplace, through:

* Promoting a culture that maximises the learning opportunities for learners in all sectors and services delivering placement teaching and learning across the system;
* Ensuring all learners have access to equitable and high-quality support across their learner pathways, aligned with their current education programmes and preparation for future healthcare careers;
* Maximising the passion, expertise, strengths and commitment of the education and training infrastructure and wider partnership networks;
* Removing unnecessary duplication and aligning efforts to maximise quality improvement activities;
* Ensuring that learners, partners and stakeholders understand the role, purpose and contributions of NHS England’s learning infrastructure;
* Helping to develop an understanding of how to ensure curriculum implementation across providers (as increasingly one provider will not be able to provide opportunities to align to a whole curriculum).

## Our commitment to improving quality

We will demonstrate our commitment to continuously improve quality through national and regional action plans that illustrate the impact of our Education Quality Framework and quality management activities.

We have clearly and consistently heard from our stakeholders the message that improving quality cannot be confined to identifying poor practice, or remediation and mitigation of risk. Rather, identifying and sharing good practice, and facilitating and encouraging routine and on-going evaluation in the pursuit of continuous quality improvement is critical to achieving our goal of high-quality education and training to ensure safer patient care. Our strategic priority for ever improving quality includes several commitments:

* Continuously strive to listen and learn from the experience of patients, the public, and learners to improve the quality of learning and the quality and safety of patient care;
* Help to create and share new solutions where there are concerns about quality;
* Identify, record and disseminate good practice wherever we find it;
* Work collaboratively with stakeholders and partners to optimise solutions;
* Use data intelligently to identify themes and target quality activities through improvement initiatives;
* Better utilise existing quality governance structures, escalation pathways, and support processes to drive up quality in all areas rather than focus narrowly on problem areas;
* Promote the delivery of continuous quality improvement through specific quality standards and provide a framework to help best target on-going improvement.

Assessing improvement

We will continue to utilise and refine our evidence to provide us with an accurate a picture as possible of multi-professional quality across England. We understand that our expectations and quality standards set out in the Education Quality Framework are not all easy to assess, therefore a variety of evidence will be required to understand whether standards are being met, and triangulation of evidence will be critical. We are also sensitive to the fact that not all standards will be equally relevant and applicable across all learning environments and here standards and evidence will be relatable in different ways.

We are committed to developing and enhancing our evidence collection and data analysis capabilities through:

* Further development and establishment of NETS;
* Enhancing our quality improvement register (of regional quality concerns and risks);
* Expanding the scope of our placement provider self-assessment tool to meet the needs of smaller placement providers as well as education providers;
* Developing our process for undertaking national thematic reviews in response to country-wide issues;
* Enhanced regional and national in-house intelligence and analytical capacity;
* A nationally consistent quality management system;
* Enhancing our escalating concerns pathway.

Evidence and data will continue to drive our focus on quality improvement by highlighting specific quality issues, identifying trends and themes, and unearthing good practice from which we can all learn.

Assessing and responding to risk

We will continue to develop our Intensive Support Framework (ISF) as a tool to use, in conjunction with the Education Quality Framework, to categorise risk and provide a consistent framework within which to escalate, report, and address areas of concern.

The ISF has enabled us to share a common definition of risk for education quality with partners and to highlight internally and across the system where our greatest quality challenges lie, whether these are within a specific learning environment (such as a hospital ward or GP practice), across an organisation, across an entire training programme, or at a whole system level.

We have increasingly seen the value of using our common understanding of risk to shape and instigate timely interventions, and our multi-professional focus has driven an increasingly collaborative, whole system approach to dealing with the most serious quality concerns. This includes partnership working across not only our health and professional regulators, where multi-professional and inter-professional oversight and solutions are required, but also other providers and system colleagues, where transformation can also help to deliver current and future quality improvement.

We have developed and will embed, processes and interventions, based on our experience and learning, which have the greatest impact to address serious quality concerns, and support our learners and their educators. We will also use our intelligence and existing pathways to identify and share emerging concerns through national and regional escalation pathways.

Ultimately, NHS England has a responsibility to act decisively when its standards for education and training have not been met. Where major quality concerns remain unresolved despite all reasonable actions having been taken to address the situation, NHS England will, as an act of last resort, remove learners from clinical placements on programmes we directly manage (in line with our removal of learners guidance). For those programmes we do not directly manage, we will work with key stakeholders to remove learners in accordance with a co-produced set of agreed principles to guide our joint working and meet our duty of care to all our learners.

## Future focused and inclusive

We ensure that we horizon scan to monitor, identify, and respond to changes in policy, new and emerging technologies, and workforce needs, and utilise the learning and emergent opportunities to continue to improve the quality of the learning environment.

Our Education Quality Framework is future focused, setting out our expectations for prospective placement providers, for new and emerging practice settings, for ICBs, and to support expansions in placement capacity and education delivery.

It also reflects that NHS England exists within a wider quality system, working in partnership with, and across healthcare and professional regulators, service and education providers, arms-length bodies, and key stakeholders. As such, it complements rather than competes with other regulatory and professional frameworks and requirements. We occupy a unique space with a multi-professional and cross-disciplinary view of education quality and have an overview and understanding of the clinical education and training landscape, which reaches across sectors and organisations, while maintaining a view to the long-term training needs to meet the needs of patients and NHS service in the future.

Inclusive application for education quality

While the focus of our Education Quality Framework is the clinical learning setting, where most of our learners undertake their practice learning, its core principles for high-quality education and training remain relevant across a range of other settings. For example, principles of good supervision, induction, learner wellbeing, and teaching delivery, are as applicable for those undertaking placements in schools, prisons, local authorities, system teams, and so on. Similarly, while it is explicitly linked to the NHS Education Funding Agreement and the future health and care workforce, it can be used to help inform assessment of education and training that the NHS may have a stake in in other ways. For example, as well as concentrating on training new staff, it is critically important we focus on our current workforce and their on-going development needs, so the framework can be equally applied to developing advanced practitioners and continuous professional development.

## Governance and leadership

It is crucial for NHS England to have effective education and training quality governance arrangements in place at national and regional levels. These may develop and change over time, with evolving reporting lines, governance groups, roles, and responsibilities, but they will always provide assurance that:

* Roles, responsibilities, and accountability are clearly defined within NHS England and with our wider partners and stakeholders;
* There are effective processes in place to ensure our quality standards are being met within clinical learning environments, with clear lines of sight of where our risks lie and what we are doing about them;
* Data and intelligence about quality are being assessed, analysed, challenged, and used effectively and consistently to improve learning environments through evidence-based improvement planning, and that we can demonstrate quantifiable improvements;
* Good practice and learning to improve educational quality are being shared and embedded at national, regional, and system level;
* There is a multi-professional approach to quality assurance and quality management, with appropriate clinical and expert input;
* We continue to shift from a performance to an improvement focus;
* There is engagement and alignment with our wider strategy for workforce expansion and transformation, education reform, and the Long-Term Workforce Plan.

System governance

NHS England’s responsibility for quality crosses professional, geographical, and organisational boundaries. We will continue to work with existing healthcare governance structures to ensure that education and training quality is understood within the system, including regional and national strategic oversight groups and system quality groups. Education and training quality can rarely be separated from service quality and patient safety, and effective solutions to quality issues will often have an education and training dimension.

## Our standards and expectations

The NHS England Education Quality Framework

The NHS England Education Quality Framework underpins our Education Quality Strategy and provides an overarching set of multi-professional quality standards for the clinical learning environment. Organised around six core domains, it applies to the quality of all healthcare education and training, funded through the NHS Education Funding Agreement, across all clinical learning environments within which learners are placed, including an increasing variety of settings in the primary, secondary, community, and independent sector.

As the education and training quality schedule of the NHS Education Funding Agreement, the Education Quality Framework is applied to assess the quality of delivery of the education and training that NHS England funds and it also reflects NHS England’s statutory obligation for the safety and protection of learners and patients.

Our Education Quality Framework was coproduced with our partners and stakeholders, reflecting their expectations, needs and priorities:

* It gives clarity and focus to EDI;
* It promotes learner wellbeing and the wellbeing of those who support them;
* It emphasises our key role in improving quality as well as our commitment to the future workforce.

The framework helps our stakeholders in the following ways:

* **Patients, service users and the public**, by being transparent about the standards that placement providers are held to;
* **Learners**, by setting expectations of learning environments, the contribution that learners can make, and how to raise concerns;
* **Educators**, by clarifying their role in supporting high quality clinical learning environments;
* **Placement providers**, by describing the standards through which their delivery of education and training will be assessed as part of the NHS Education Funding Agreement and enabling new and prospective providers to see the standards required of them (including global partners who wish to contribute to the education and training of NHS staff);
* **Education providers**, by working with placement providers to support the continuous improvement of practice placements;
* **Integrated Care Boards**, by supporting decisions on practice placement capacity, expansion, international recruitment and new placement providers, and enabling a system-wide understanding and overview of quality, and an approach to consistent quality control, quality management, and quality improvement;
* **Healthcare and professional regulators**, by highlighting the links between NHS England and regulator responsibilities in monitoring, maintaining, and sustaining quality, promoting closer working and avoiding duplication.

