



**North East & Yorkshire Regional Delivery Plan  
2022/23**

## 1. Introduction from the Regional Director



Health Education England (HEE) is part of the NHS, and we work with partners to plan, recruit, educate and train the health and care workforce. HEE's long term goals are to:

- reform clinical education to produce the highest quality new clinical professionals in the right number.
- transform today's workforce to work in a cooperative, flexible, multi-professional, digitally enabled system; and
- deliver and quality assure with partners education and training that is rigorous, highly sought after and future focused.

This is HEE's 2022/23 regional delivery plan for the North East and Yorkshire (NEY). It is a public and partner-facing document which summarises what we plan to deliver, independently or with partners, in the coming year and how this contributes to our long-term goals above and to NHS-wide people-related priorities and, critically, how this supports the aims of our region's Integrated Care Systems (ICSs).

We deliver core services for our ICSs, including planning, management and assurance of postgraduate medical, dental and pharmacy education, quality assurance across all forms of medical and clinical training, and the commissioning and contract management of education and training for a range of clinical roles. (Our commissioned programme for clinical education is known as our Multi-Professional Education and Training Investment Plan (METIP) and is included in summary at the end of this document.)

We work with partners to plan, design and deliver activities that support the recovery, growth and transformation of the NEY health and care workforce. We approach this transformation-focused work using a programme and project structure aligned to the NHS Long Term Plan and government priorities, and this year we have designed some of these programmes jointly with our colleagues in NHS England and Improvement (NHSE/I).

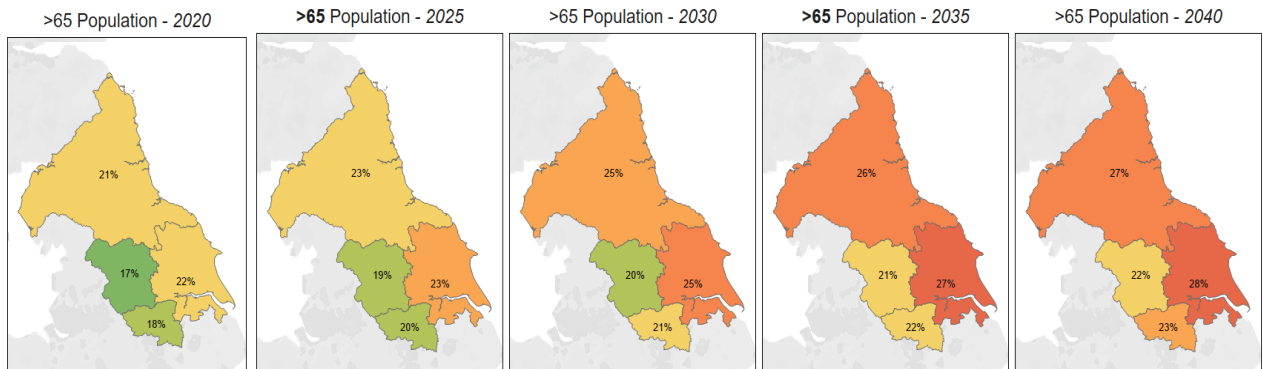
We enable ICS and wider regional programme-focused strategy in three key ways. Our Enabling Workforce Transformation programme leverages HEE's workforce planning, workforce intelligence and change management capability to support transformational change at place and in strategic programmes. Our Widening Access and Education Reform programme centres our work on implementing new roles, spanning the advanced practice to apprenticeships. And our regional Best Place to Work internal OD programme ensures that as a whole HEE team we are working impactfully and with a future focus, in line with our corporate values.

My team and I look forward to working with you in the coming year.

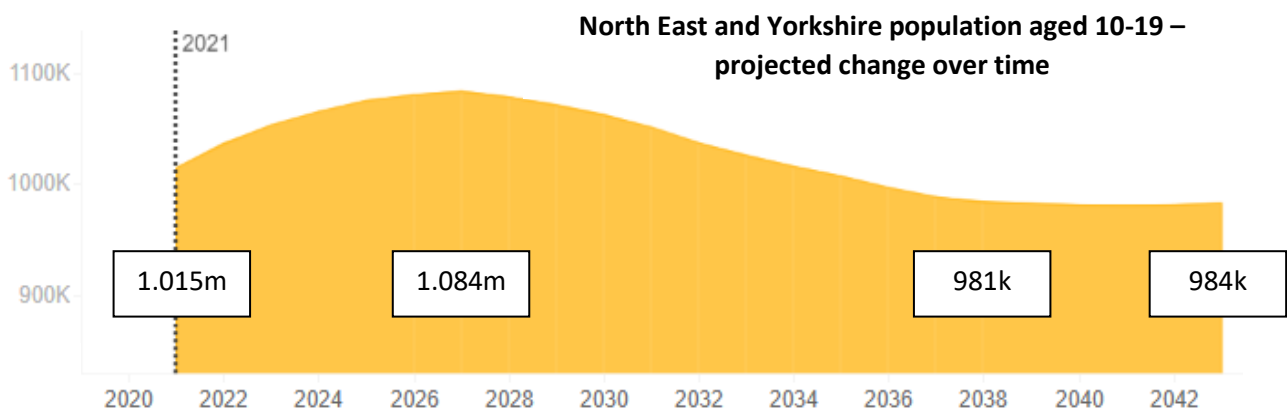
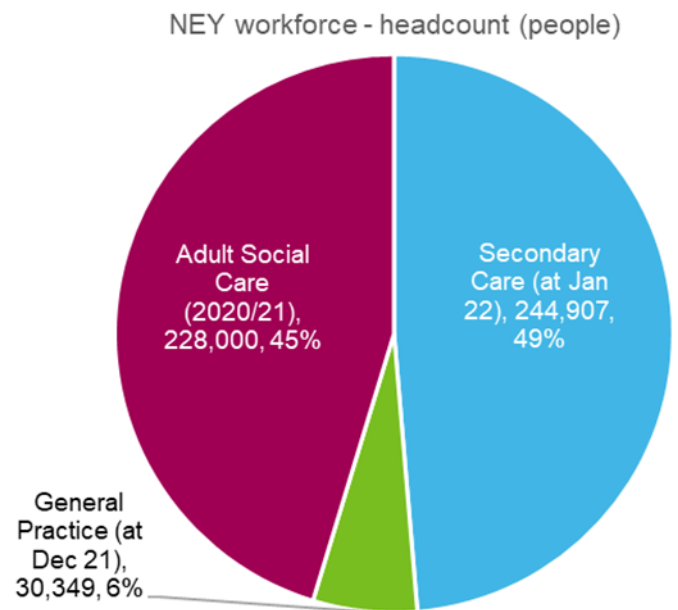
**Mike Curtis, Regional Director**  
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*April 2022*





In 2022<sup>1</sup>, over 467,000 people are part of our health and care workforce, working in a huge variety of roles to deliver compassionate and inclusive social care, primary care and secondary care services. They are trained by an expert network of educators, including 14 higher education institutions based in the region and a further 9 out of region, by health and social care providers who deliver student placements, essential formal and informal training and professional development alongside service, and of course, by our region's schools and colleges whose role in preparing and encouraging school leavers to pursue health and care careers which is critical to meeting the future challenges we face.



<sup>1</sup> Social care figures for 2020/21 (latest available); primary care at Dec 2021; secondary care at Jan 2022

### 3. About Health Education England

The Care Act 2014 sets out HEE’s remit and range of roles and responsibilities in detail, including its duty to ensure an effective system for education and training for the NHS and public health.

#### Our relationship with Integrated Care Systems

We work very closely with the region’s emerging Integrated Care Boards (ICBs) and their health and care partners to plan for and deliver the health and care workforce. In the North East and Yorkshire region, HEE delivers six externally facing functions. The table below shows how HEE functions are organised and how they work with ICBs. This includes some roles within our regional Transformation, Delivery and Performance function which are embedded in and work directly with our emerging ICBs. You can read more about our regional operating model for 2022/23 in our separate report on Supporting Integrated Care Partnerships [here](#).

#### Our relationship with learners

HEE develops the pipeline of learners for the future NHS workforce working with a range of key partner organisations including NHS trusts, GP surgeries, voluntary and private providers as well as universities, royal colleges, and professional regulators. The table below summarises the role HEE directly plays in the education journey for core groups into four categories:

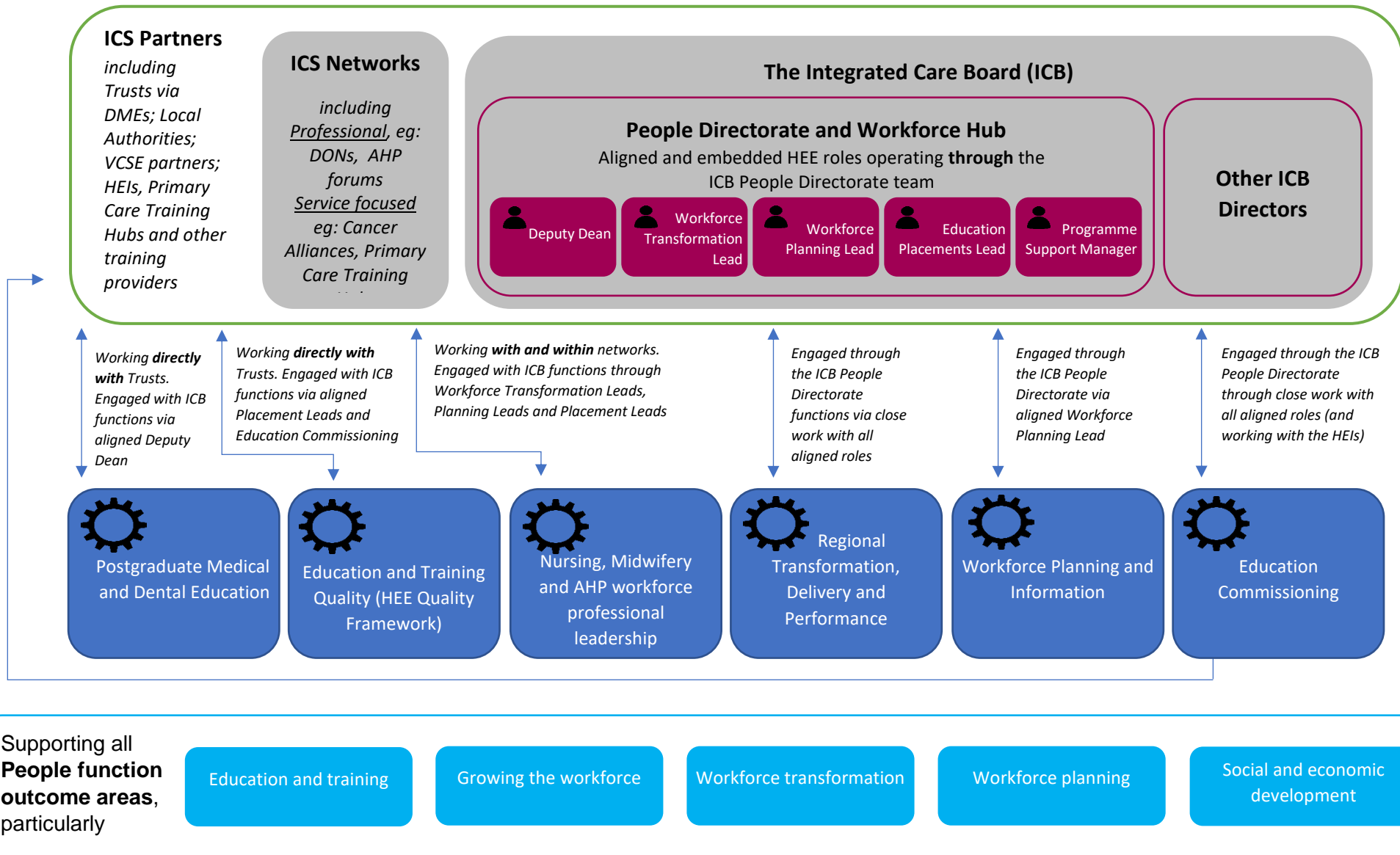
- i. Workforce planning – which covers all workforce groups.
- ii. Education support – applies mainly to postgraduate learners where HEE has a direct ‘hands on’ role in their educational progression and promotes educational reform and new ways of working across all professions.
- iii. Placement management – applies to all learners, including securing sufficient placements in a clinical learning environment of good quality.
- iv. Financial support – different groups of learners receive different levels of financial support.

Group	Workforce Planning and Design	Education Support				Placement Management			Financial Support	
		Recruitment	Clinical Supervision and Teaching	Revalidation	Assessment and Progression	Placement supply	Placement Quality	Placement funding	Salary contribution	Tuition
Postgraduate doctors	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes (part fund)	N/A
Undergraduate doctors	Yes					Yes	Yes	Yes		
Undergraduate nurses and AHPs	Yes					Yes	Yes	Yes	Limited (bursary)	
Commissioned clinical roles	Yes					Yes	Yes	Yes	Yes	Yes

#### Our relationship with other regional partners

By March 2023, the Secretary of State for Health and Social Care intends to have created a new NHS England organisation, which will incorporate the responsibilities currently held separately by HEE, NHSE/I, NHS Digital and NHSX. We already work collaboratively with ALB partners across the people and workforce agendas, including through our joint governance structures led by the Regional People Board, and we will be working together through 2022/23 to build on these links and maximise the benefits of the new arrangements for our Systems and populations.

**Figure X: Where HEE functions connect with the integrated care system in North East and Yorkshire**



*In addition to the functions above please note the essential contribution of the HEE Finance, Regional Business Management, and Communications teams and all the enabling functions, which supports all our externally-facing functions and aligned roles to operate safely, effectively and as a coherent regional team.*

## 5. About this plan

HEE has three long-term goals:

**Future Workforce:** To reform clinical education to produce the highest quality new clinical professionals ever in the right number

**Current Workforce:** To transform today's workforce to work in a cooperative, flexible, multi-professional, digitally enabled system.

**Quality:** To assure and deliver with partners quality education and training that is rigorous, highly sought after and future focused.

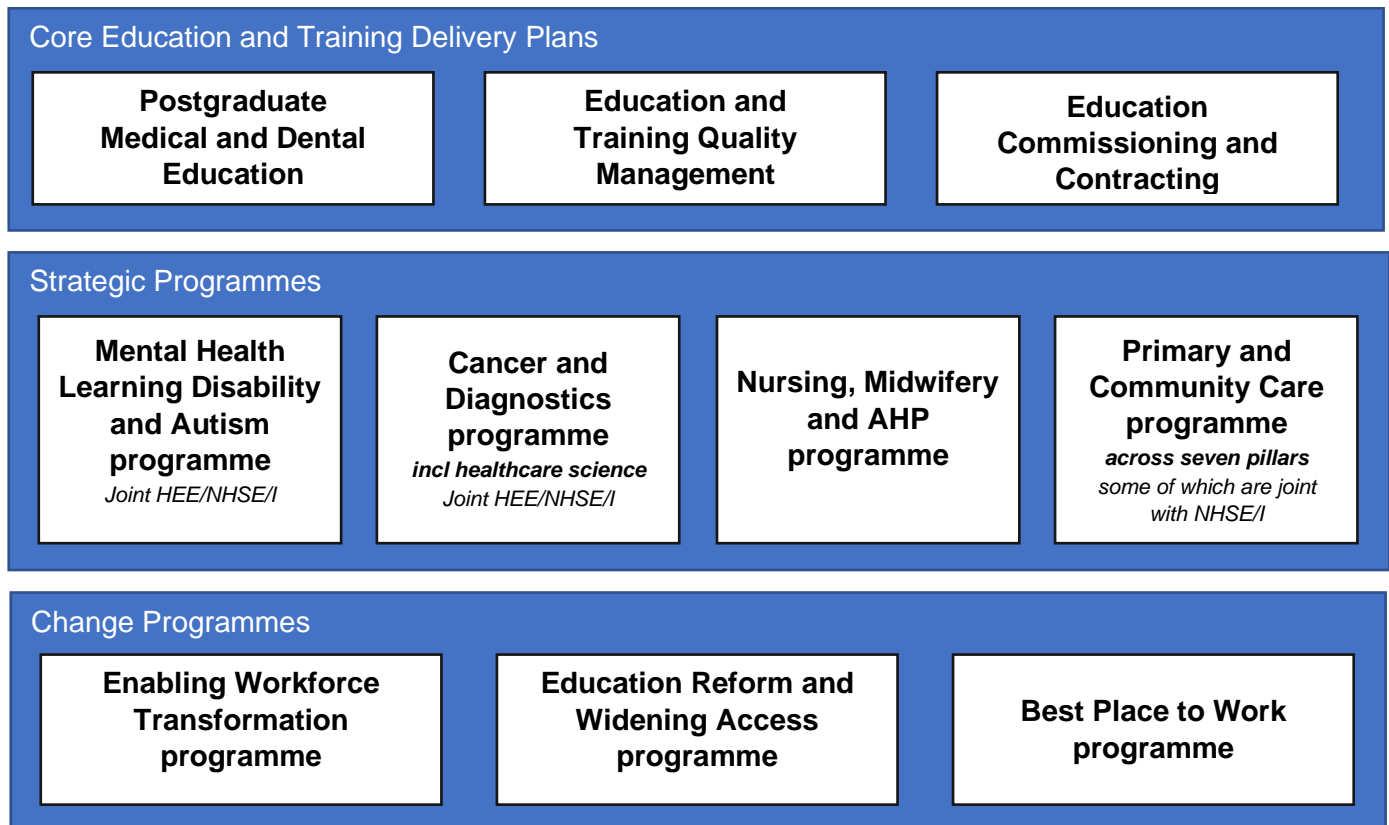
For 2022/23, the organisation has defined 12 objectives which will contribute to our overarching goals:

Future Workforce	Current Workforce	Quality
Deliver domestic education and training supply and expand placement capacity	Support Integrated Care Systems with developing new ways of working and workforce redesign	Embed the new Quality Strategy and Framework to drive a consistent approach to quality assurance and improvement
Complete the long-term strategic framework and develop a more integrated approach to workforce planning	Adapt education and training to accommodate advances in technology and support the workforce to become digitally competent and confident	Enhance the quality and safety of maternity services by delivering the planned future workforce and ensuring the quality of training
Continue to deliver the Long-Term Plan and Manifesto commitments, particularly in relation to: <ul style="list-style-type: none"> <li>- Primary and Community Care</li> <li>- Mental Health, Learning Disability and Autism</li> <li>- Nursing, Midwifery and AHP</li> <li>- Cancer and Diagnostics</li> </ul>	Through the HEE Centre for Advancing Practice expand clinical practice opportunities to build multi-disciplinary teams and a more flexible workforce	Ensure the learner voice is heard and acted upon by using data and insight to measure, monitor and improve the quality of the learner experience
Deliver education reform that improves flexibility of training and facilitates multi-professional teams	Continue to strengthen the training, learning and development available to volunteers, carers and their families	

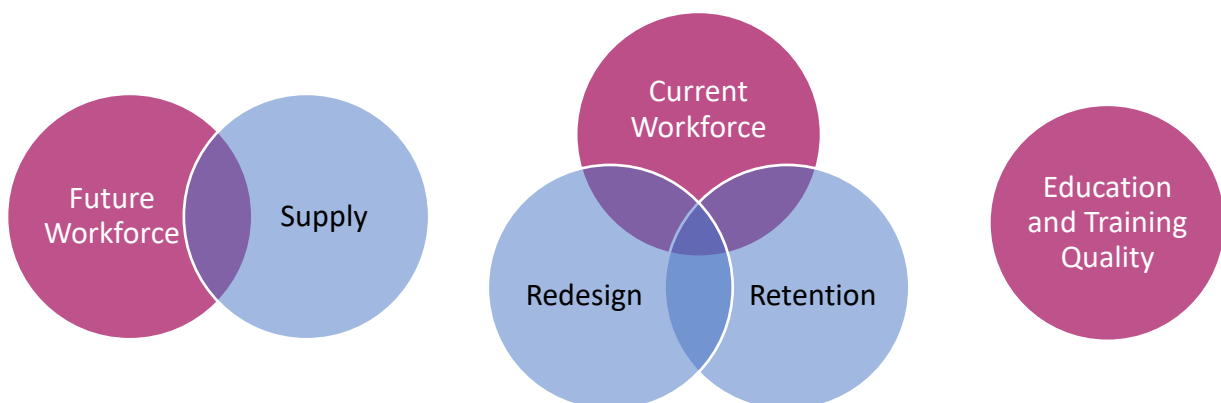
You will shortly be able to read about HEE's corporate goals and national delivery for 2022/23 in our corporate business plan at [www.hee.nhs.uk](http://www.hee.nhs.uk)

In the North East and Yorkshire, our HEE functions will work together to deliver these objectives in a way that is tailored to the needs of our emerging Integrated Care Boards and Partnerships. This delivery plan describes:

- how we will deliver three core services
- how we will contribute to the design and delivery of four key strategic programmes aligned to the NHS Long Term Plan
- how we will support system change in three enabling domains.



HEE's goals relate to (but are not the same as) the three-part structure of delivery emerging from NHS England/Improvement nationally:





We want our delivery plan to speak to the interests of all of our stakeholders, internal and external. We have therefore adopted a structure that reflects these different and shared planning lenses:

Our Strategic Programmes are structured using a blend of HEE and NHSE/I planning domains:

- Future Workforce: Supply
- Current Workforce: Redesign
- Current Workforce: Retention (*considering all levers, including health and wellbeing, EDI, wider HR / OD interventions and leadership*)

Our Core Delivery Plans and Change Programmes have adopted a planning structure specific to their own objectives and content. Our NEY response to HEE's long-term goal related to education and training quality is expressed in a standalone Core Delivery Plan and contributes across all the above domains.

**Contact us:**

Contact details for our strategic and change programmes are provided in the summaries that follow. General comments or queries on this plan, its format and our progress can be directed to: Rachel Baillie Smith, Director of Delivery and Performance, [rachel.bailliesmith@hee.nhs.uk](mailto:rachel.bailliesmith@hee.nhs.uk)

## **Part A: Core Education and Training Delivery Plans**

## Post-Graduate Medical and Dental Education

### Service team

<b>Postgraduate Dean</b>	Prof. Namita Kumar (NK), <a href="mailto:Namita.Kumar@hee.nhs.uk">Namita.Kumar@hee.nhs.uk</a> , Regional Postgraduate Dean (NEY) and Local Postgraduate Dean (NE)
<b>Senior staff team</b>	Dr Jon Cooper, Local Postgraduate Dean, YH Becky Travis, Head of Function for Training Programme Management (TPM), YH Gemma Crackett, Head of Function for Training Programme Management (TPM), NE

### Service objectives

HEE is responsible for delivery of PGMDE in England, committed to maximising the opportunities available to them throughout their training. Managing the delivery of Postgraduate Medical and Dental Training is the responsibility of HEE Postgraduate Deans who have statutory duties in addition to ensuring this training occurs to regulator standards. HEE is also committed to improving and reforming PGMDE for the benefit of patients and doctors in training. In the North East and Yorkshire, we will support, at any one time, around 7,900 medical and dental trainees in 2022/23, who are part of our total (approximately) 20,000 WTE strong medical and dental workforce region wide.

### Service plan 2022/23

	Workstream	Workstreams and Business as Usual Activities	Lead	Key partners	Timeframe
1	Deliver HEE PGDME statutory obligations	Ensure sign off for trainees achieving Full Registration and CCT (Certificate of Completion of Training) Revalidation for doctors in training Management of extensions in context of ongoing Covid recovery and Management of Education Support Budgets	NK	General Medical Council Local Education Providers Employers (including Lead Employers) Royal Colleges	BAU as per continuous training cycles linked to each trainee's Annual Review of Competency Progression (ARCP)
2	Recruitment, delivery and assessment of PGDME	Manage legal cases Develop and implement strategies to support trainee retention post completion	NK	HEE's solicitors Local Medical Schools Local Education Providers Employers (including Lead Employers)	As required As per recruitment cycles
3	Medical Education Reform	Develop and implement strategies to enable distribution of medical trainees across specialisms to support nationally defined expansion priorities	NK	Local Education Providers	Across 22/23 as per national timelines
4	Dental Education Reform	Complete Advancing Dental Care Programme and implement dental education reform model	NK	Local Education Providers General Dental Council NHS E/I	Across 22/23 as per ADC report roll out
5	Strategy	Support generalist agenda, continuing generalist school establishment in N Cumbria and N Lincolnshire and Hull	NK	Local Education Providers System partners as specific to local models	Across 22/23

## Education and Training Quality Management

### Service team

<b>Postgraduate Dean</b>	Prof. Namita Kumar (NK), <a href="mailto:Namita.Kumar@hee.nhs.uk">Namita.Kumar@hee.nhs.uk</a> , Regional Postgraduate Dean (NEY) and Local Postgraduate Dean (NE)
<b>Senior staff team</b>	Dr Jon Cooper, Local Postgraduate Dean Mr Pete Blakeman, NE Deputy Postgraduate Dean and Director of Clinical Quality Jon Hossain, YH Deputy Dean, Clinical Lead for Quality Julie Platts, North East and Yorkshire Senior Quality Lead

### Service objectives

The North East and Yorkshire Quality Team's function is to apply the multi-professional HEE Quality Strategy and Framework across the region, ensuring continuous quality improvement in line with our corporate foundations for success. This Multi-professional framework enables us to support our system partners, education, and placement providers by delivering a whole workforce quality perspective. The team is focused on:

- Supporting the 11 multi-professional workforce and HEE professional leads to ensure quality risks and concerns for all professional groups are understood, information is shared, and we work together to identify and deliver solutions.
- Continuing to work closely with all our stakeholders in Provider organisations and HEIs to proactively collate intelligence on known quality of education and training concerns and share at the ICS System Quality Groups.
- Supporting placement and education providers in escalating quality concerns and monitoring improvement action plans.
- Embedding the policy for the escalation of concerns, linked to the Intensive Support Framework and the Quality Improvement Register.

National Quality Team Key Performance indicator metrics are approved at the Quality Scrutiny Forum, Health Education England's Deans' Forum and in collaboration with HEE's Performance Delivery Team to ensure they are in line with the HEE Business Plan Key Business Questions. The North East and Yorkshire Quality Teams deliver against these KPIs at a regional and local level and compliance is reported nationally to the newly established Quality Committee.

### Workstreams and Projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicator (national)	
				Metric	22/23 ambition
1	National Education and Training Survey	Produce regional, local and ICS level National Education and Training Surveys reports informed by our data and insight, which will give assurance that we are improving education and training. Work closely with professional leads in NMAHP, HCS, ACP, Pharmacy, Primary Care, Libraries and Knowledge Services and Training Programme Management	NK	Response rates improve for all learners	Improved response rate compared with June and November 2021 with a focus on multiprofessional learners
2	Patient Safety Syllabus Training	Patient safety training materials have been published by HEE NHS E/I, The Academy of Medical Royal Colleges and eLearning for healthcare, elements of which are expected to be completed by all NHS employees.	JH	Uptake of L1 and L2 training ( <i>all colleagues are encouraged to complete Level 1 training</i> )	As per nationally agreed targets
3		The QIR allows escalation of multiprofessional Intensive Support	PB/JH	Number of ISF L3 concerns	ISF 3 and 4 concerns continue to be

	HEE Quality Improvement Register (QIR)	Framework L3 and L4 concerns to HEE nationally and system wide. Manage these in line with processes with input from professional lead experts.		and length of stay Number of ISF L4 concerns and length of stay	managed robustly and de-escalated when possible.
4.	Quality intervention outcome reports	Compliance with the national Standard Operating Procedure, ensuring all eligible multiprofessional quality outcome reports are published nationally as per the SOP timelines.	JP	How many published reports on HEE website	Urgent Risk Reviews, Programme Reviews Learner/Educator Review outcome reports published as per national SOP
5.	NEY specific Good Practice System	Relaunch this with NEY stakeholders and professional leads to identify further regional areas of notable practice and to enable sharing of quality improvements. Link with the proposed national practice quality portal	JP/ Professional Leads	How many good practice items published in the national good practice portal	Case studies developed and shared
6	Provider Self-Assessment	Implementation of the HEE-wide multiprofessional provider self-assessment in NEY in line with the NHS education contract and the quality framework.	JP	How many providers declare Board-level engagement?	100% of providers declare education and training Board level engagement
7	Enhancing Generalist Skills Programme ( <b>Enhance</b> )	Launch of NE and YH Multi-professional Generalist Enhancing Skills programme in North Cumbria Integrated Care, Hull University Teaching Hospitals and North Lincolnshire and Goole.	NK/JC	Programmes up and running for all learners and clinical managers with external evaluation in place	Programmes well evaluated with feedback acted upon
8	Local relationships and networks to increase understanding of quality standards	Quality team members and professional leads meet with stakeholders to raise understanding of the HEE Quality Standards	NK, JC, JP, Professional Leads	Stakeholders are aware of what is required to comply with HEE's quality standards	Quality standards adhered to ensure high quality education and training for all learners
9	Role in assurance and interface/update with Regulators	Work closely with the General Medical Council, General Dental Council, Nursing and Midwifery Council and Health and Care Professionals Council	NK, JC, JP, Professional Leads	Meet with Regulator teams and consistently meet regulatory standards	NEY meet all regulatory Standards
10	Deliver the national EDI Quality Improvement Plan	Collect existing and additional data relating to EDI in educational settings across the NHS to support Postgraduate Deans in delivering QIP for example the national provider Self-Assessment, NETS and other quality intelligence to monitor this.	NK, JC, JP, Professional Leads	EDI QIP data collection and analysis rolled out in NEY	Baseline EDI data available in NEY

## Education Commissioning and Contracting

### Service team

<b>Head of Commissioning</b>	Kevin Moore, Head of Education Commissioning and Transformation, <a href="mailto:kevin.moore@hee.nhs.uk">kevin.moore@hee.nhs.uk</a>
<b>Senior staff team</b>	Shirley Harrison, Regional Education Management Programme Lead <a href="mailto:shirley.harrison@hee.nhs.uk">shirley.harrison@hee.nhs.uk</a> Anthony Hann, Contract Manager, <a href="mailto:anthony.hann@hee.nhs.uk">anthony.hann@hee.nhs.uk</a> Sharon Simister, Programme Manager, <a href="mailto:sharon.simister@hee.nhs.uk">sharon.simister@hee.nhs.uk</a>

### Service objectives

The Commissioning and Contract Team are responsible for engagement with both internal and external partners to deliver the following:

- 21/22 METIP - Operationalisation
- 22/23 commissioning budget management
- Develop consistent reporting arrangements
- Education Contract roll out
- Focus on placement budget management and development of the 22/23 METIP submission in accordance with national deadlines.

Our Commissioning and Contracting service supports our corporate foundations for success by ensuring value for money and a focus on outcomes.

### Workstreams and Projects 2022/23

	Workstream	Projects	Lead	Key partners	Timeframe
1	Impact and value for money	Roll out Education Contract across Primary Care and PIVO partners	SH	Primary Care (including dental) and PIVO partners	Ongoing
		Represent region in development of refreshed Education Contract terms for implementation from April 2024	SH	HEE national Commissioning team HEE Commercial team Education and Service Providers	March 2023
		Play an active role in national tariff review	KM	National teams	Ongoing
		Continue to develop forecasting methodology to support Finance	SH	Finance and HEE programme leads	Ongoing
2	Investment planning aligned with education and clinical capacity	Deliver 2022/23 METIP commitments, working in alignment with agendas set out in strategic programmes	SH	National partners/HEI's and HEE programme leads and ICB?	Until March 2023
		Identify and develop areas for educator workforce capacity expansion	KM		
3	Procurement	Represent region in national procurements as required	KM/ SH	HEE Commercial team/Programme Leads	Ongoing
4	Placements commissioning	<i>Commissioning actions associated with placements appear in the Education Reform and Widening Access programme</i>			

## **Part B: Strategic Programmes**

## Joint Cancer and Diagnostics Programme

Joint programme team	
<b>HEE sponsor:</b> Kevin Moore, Head of Education Commissioning and Transformation, HEE <a href="mailto:kevin.moore@hee.nhs.uk">kevin.moore@hee.nhs.uk</a>	<b>NHSE/I sponsor:</b> Fiona Hibbits, Deputy Director for Workforce Transformation, NHSE/I <a href="mailto:fiona.hibbits@nhs.net">fiona.hibbits@nhs.net</a>
<b>Joint programme team:</b> Mandy Brailsford, Education Transformation Lead, HEE, <a href="mailto:mandy.brailsford@hee.nhs.uk">mandy.brailsford@hee.nhs.uk</a> Sarah Hamilton, Regional Cancer Workforce Lead, <a href="mailto:sarah.hamilton@hee.nhs.uk">sarah.hamilton@hee.nhs.uk</a> Sally Drew, Regional Healthcare Science Workforce Lead, <a href="mailto:sally.drew@hee.nhs.uk">sally.drew@hee.nhs.uk</a> Mike Edmondson, Regional Deputy Head of Workforce Transformation, NHSE/I – <a href="mailto:mikeedmondson@nhs.net">mikeedmondson@nhs.net</a> Tahmima Tahir, Workforce Transformation Lead: Cancer and Diagnostics, NHSE/I – <a href="mailto:tahmima.tahir@nhs.net">tahmima.tahir@nhs.net</a> Lucy Firth, Senior Workforce Transformation Manager, NHSE/I	

Programme objectives
<p>This joint programme covers national programme requirements and regional programme priorities. Our overarching objective is to support NEY Systems to address recovery challenges in diagnostics and move towards delivery of the LTP ambitions for cancer:</p> <ul style="list-style-type: none"> <li>by 2028, 55,000 more people each year will survive their cancer for five years or more;</li> <li>and by 2028, 75% of people with cancer will be diagnosed at an early stage (stage one or two).</li> </ul> <p>Working with the Cancer Alliances and the Cancer Networks and aligned with ICB priorities, the regional ALB joint team innovates, plans, commissions and facilitates training which enables Systems and providers to deliver service transformation, restoration and recovery, for example through the establishment of new models of service such as Community Diagnostic Hubs. As well as delivering growth in capability and capacity in core roles, we are supporting innovative redesign in both workforce deployment and the associated education and training. This includes ensuring an effective relationship between workforce redesign and placement capacity, support for advanced roles to support cancer and diagnostic innovation and promoting understanding of the value of Healthcare Science professions in expansion of delivery.</p> <p>The plan covers core workforce expansion targets including radiography roles, cancer nurse specialists and others, including maximising the use of specific grants for regional benefit, and also our work to support innovative areas of care such as genomics. The breadth of the workforce in this area ranges from Assistant Practitioner to Consultant and training will include apprenticeships in addition to traditionally delivered programmes.</p>

Workstreams and projects 2022/23					
	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply: training expansion	Imaging workforce expansion via education and training to deliver Richards Review recommendations across all roles	KM	Diagnostic Radiographer expansion	METIP targets
				Therapeutic Radiographer expansion	
				Associate Practitioner apprenticeships expansion	
				Mammography Associate expansion	
				Advanced Practice expansion	
				Healthcare Science expansion	
				Cancer Nurse Specialist expansion	
		Ensure appropriate HCS workforce education, training, and availability	SD		
	Supply: Education transformation	Continued implementation, design and facilitation of Imaging and Endoscopy Academies	MB	Ensure appropriate quality measures are in place, such as portfolios, accreditation and appraisal.	



				Ensure equity of access to learning and educational resources for learners across the whole region. Use virtual and innovative educational practices to support learning regionally	
2i	Redesign: Non-Obstetric Ultrasound	Capital investments for optimisation: design and deliver	ME	Ensure equity of access to capital investments which support delivery and innovation	
		Sonography banks and pay rates	ME	Support harmonisation of pay rates	
2ii	Redesign: CT/MRI optimisation	Workforce pilots (Xair - mobile x-ray), Care Navigators, RMS and the Virtual Support Tool	ME	Support the spread, adoption and learning from pilots	
		Imaging navigators' pilot	ME/SH	Support the spread, adoption and learning from pilots	
2iii	Redesign: Endoscopy optimisation	Productive Endoscopy	ME	Support adoption spread and learning from the productive endoscopy programme	
2iv	Redesign: Echocardiography and DEXA <sup>2</sup> optimisation	ACP targeted retention project	SH	Support and ensure clear retention plans available for ACPs	
2v	Redesign: Non-surgical oncology	To be developed	SH	To be developed	
3	Current Workforce: Retention	AHP growth and retention (incl IR)	CA	Regional IR AHP Programme Commenced June 2022	
		Service manager leadership development	ME	Leadership programme commissioned for 63 places regionally. Undertake programme evaluation.	
		Targeted e-rostering reviews	ME	Undertake e-rostering reviews aligned to levels of attainment	
		Return to practice education review (inc Retire and Return and trainer return opportunities)	ME	Ensure R & R opportunities cascaded and share pensions programme webinar access.	
		Targeted retention initiatives for Cancer Nurse Specialists	SH		
		Health and wellbeing targeted offer	ME	Ensure Bespoke and national HWB strategies adoption	

<sup>2</sup> Dual Energy X-Ray Absorptiometry

## Joint Mental Health, Learning Disability and Autism Programme

<p><b>Joint programme team</b></p> <p><b>HEE programme sponsor:</b> Rachel Baillie Smith, Director of Delivery and Performance  <a href="mailto:rachel.bailliesmith@hee.nhs.uk">rachel.bailliesmith@hee.nhs.uk</a></p>	
<p><b>NHSE/I sponsor: Mental Health</b>                  Joanne Poole                  Regional Head of Mental Health Programme  <a href="mailto:joanne.poole1@nhs.net">joanne.poole1@nhs.net</a></p>	<p><b>NHSE/I sponsor: Learning Disability and Autism</b>                  Eamonn Harrigan                  Senior Clinical and Assurance Programme Manager  <a href="mailto:eamonn.harrigan@nhs.net">eamonn.harrigan@nhs.net</a>                  Julie Bates                  Senior Clinical and Assurance Programme Manager  <a href="mailto:juliebates2@nhs.net">juliebates2@nhs.net</a></p>
<p><b>Joint programme team: Mental Health</b></p> <p>Kate Holliday, Workforce Transformation Lead:                  Regional Programmes, <a href="mailto:kate.holliday@hee.nhs.uk">kate.holliday@hee.nhs.uk</a>                  – HEE                  Mike Edmondson, Regional Deputy Head of                  Workforce Transformation, NHSE/I –  <a href="mailto:mikeedmondson@nhs.net">mikeedmondson@nhs.net</a>                  Mike Lewis, Regional Programme Manager  <a href="mailto:mike.lewis@hee.nhs.uk">mike.lewis@hee.nhs.uk</a> – HEE                  Nicola Davies, Regional Programme Manager  <a href="mailto:nicola.davies@hee.nhs.uk">nicola.davies@hee.nhs.uk</a> – HEE                  Aya Moussawi, Programme Support Manager  <a href="mailto:aya.moussawi@hee.nhs.uk">aya.moussawi@hee.nhs.uk</a> – HEE                  Chris Burt, Programme Support Officer  <a href="mailto:christopher.burt@hee.nhs.uk">christopher.burt@hee.nhs.uk</a> – HEE                  Rebecca Verlander, Clinical Delivery Programme                  Manager <a href="mailto:r.verlander@nhs.net">r.verlander@nhs.net</a> – NHSE/I                  Sultan Mukhtar, Clinical Delivery Manager  <a href="mailto:sultan.mukhtar@nhs.net">sultan.mukhtar@nhs.net</a> – NHSE/I                  Amina Bristow, Clinical Delivery Manager  <a href="mailto:amina.bristow2@nhs.net">amina.bristow2@nhs.net</a>                  Terry Sharkey, Programme Manager  <a href="mailto:terence.sharkey1@nhs.net">terence.sharkey1@nhs.net</a> – NHSE/I                  Lisa Alderson, Programme Support Manager  <a href="mailto:lisa.alderson@nhs.net">lisa.alderson@nhs.net</a> – NHSE/I                  Priya Grieves, Administration Support Officer –                  NHSE/I</p>	<p><b>Joint programme team: Learning Disability and Autism</b></p> <p>Kate Holliday, Workforce Transformation Lead:                  Regional Programmes, <a href="mailto:kate.holliday@hee.nhs.uk">kate.holliday@hee.nhs.uk</a> -                  HEE                  Juliet McGilligan, Regional Programme Manager  <a href="mailto:Juliet.mcgilligan@hee.nhs.uk">Juliet.mcgilligan@hee.nhs.uk</a> - HEE                  Siobhan Gorry, Senior Manager, CYP  <a href="mailto:Siobhan.gorry@nhs.net">Siobhan.gorry@nhs.net</a> - NHSE/I                  Maria Foster, Health Inequalities Senior Manager  <a href="mailto:Maria.foster2@nhs.net">Maria.foster2@nhs.net</a> – NHSE/I                  Patricia Churchill, Project Manager, Nursing and                  Quality <a href="mailto:pchurchill@nhs.net">pchurchill@nhs.net</a> – NHSE/I                  PMO team – <a href="mailto:england.neylda@nhs.net">england.neylda@nhs.net</a> – NHSE/I</p>

### Programme objectives

**Ensure we have a well-trained, resilient and cared for workforce, able to deliver an excellent Mental Health, Learning Disabilities and Autism Service across North East & Yorkshire.**

Working together, we will respond effectively and efficiently to the pressures being faced right now and plan for the future. To do this, we will:

- Have an effective regional workforce plan to ensure a sufficient supply of the right skills with a workforce who is diverse and reflective of our communities
- Ensure our workforce can access clear career pathways and development opportunities, achieved through engagement and partnership working with the local HEI's
- Work collaboratively with local authorities, voluntary and community sectors, Skills for Care and ICS Teams to enable transformation and new ways of working.

Our programme plan is in two pillars, focusing on the distinct workforce needs of Mental Health and Learning Disability and Autism services, relating to two separately delivered NHSE/I regional programmes. Our workforce governance is joint across both areas, supporting effective oversight and shared learning.

<b>Mental Health</b>					
<b>Workstreams and projects 2022/23</b>					
	<b>Workstream</b>	<b>Projects</b>	<b>Lead</b>	<b>Key Performance Indicators</b>	
				<b>Metric</b>	<b>22/23 ambition</b>
1	Supply	Develop region wide careers campaign to attract people into a career in MH	CB	Campaign produced	Enhance visibility/awareness of MH careers within the NHS
		Develop future pipeline of clinical and non-clinical roles through links with schools, FE colleges, princes Trust and Combined Authority	CB	Links established	Develop established links with key regional stakeholders to enable future pipeline
		Increase placements in MH through partnerships with VCSE	KH (CB)	Increase in number of placements	Grow number of placements available for students across MH provision including VCSE
		Develop expansion plan for AHPs in MH	CA (AM)	Expansion plan produced	Implement roadmap for the sufficient growth of AHPs in MH roles across NEY
		Maximise the potential of International Recruitment of nurses to MH services	KH RB	International recruitment figures	Regional approach to ethical international recruitment
		Create standardised approach to peer support workers (recruitment, onboarding, career pathways into clinical roles)	ND	No of PSW linked roles in employment or planned for employment. Curriculum standardised and courses with future cohorts planned	Regional recruitment package agreed across all MH workforce Maximise training capacity for NEY PWSs and Supervisors Manage regionally held contract
		Develop a supply pipeline dashboard for MH pathways showing numbers coming through and facilitate collective discussions with HEIs to influence course development	KH	Data from HEIs	Collective understanding of what courses are available, volume of people coming in and out, where gaps are and new courses developed
2	Redesign	Increase diversity within the workforce, ensuring better representation of communities across NEY	ML	Diversity increased across NEY	Support delivery of initiatives to improve access and representation within MH roles across NEY
		Enable equality for access for those with MHLDA to services such as cancer, Primary Care	KH	Access improved for those with MHLDA	Work with Cancer, PC programmes to enable greater access

	Redesign <i>cont.</i>	Improve the understanding of regional workforce development demands for community mental health transformation	KH (ML)	Workforce Development needs identified	Standardise process for gathering workforce development needs data in community MH transformation
		Support new training initiatives and projects to enable the Mental Health Act Reform	KH (ND)	LeaDER evaluation and impact shared	Projects all delivered across NEY and evaluated
		Help increase workforce capacity through supporting the implementation of new roles in MH	ML ND	Increase in the number of new roles across NEY	Support delivery and implementation of new roles in MH including AC/RC, ACPs, PAs, PSW, MHWBP, ECP, apprenticeship and YIPP
		Develop a region wide talent pool / leadership development pathway	KH	People transferred across NEY	Talent pool established across NEY
		Improve the mental health response in primary care, secondary care and tertiary care including the ambulance services across NEY	ML	Rollout of projects findings across NEY	Support delivery of projects to improve MH response
3	Retention	Develop clear career pathways across all areas of MH to encourage people to stay and progress	AM CB	Increase in retention and no of people progressing	Clear pathways mapped and agreed across all MH roles
		Support training opportunities across NEY ensuring access for all and a clear way of identifying gaps	AM CB	Increase number of people accessing training especially those outside of the NHS	Raise awareness of training opportunities available to existing staff Develop training programmes in areas where there is an identified need Maximise training capacity across NEY
		Develop bespoke training programmes and support packages for Assistant Psychologists and Clinical Support Workers	KH	LeaDER evaluation and impact shared	Projects delivered across NEY and evaluated
		Respond to scoped demand for CYP, Perinatal, IAPT, SMHP, EIP, OPMH upskilling opportunities	AM CB	Scoped demand met and training delivered	Prospectus developed Online portal developed
		Further develop wellbeing initiatives including resilience hubs	ML ND	Staff survey Uptake of resilience hubs	Explore current opportunities for wellbeing and resilience across NEY. Support the implementation of resilience hubs
		Improve MH nursing experience and retention	KH RB	Retention data and staff survey	Projects delivered
		Work with employers to agree tailored content for MH Enhanced Clinical Practitioner apprenticeship ready for HEI delivery from Autumn 2023	Kay Butterfield	Survey Workshop	Course Content HEI readiness to deliver

4	Workforce planning	Establish a system-led workforce modelling approach across health and care to meet system requirements of the future and underpin the ICS people deliverables	RB	Workforce modelling approach implemented at ICS level	ICS engaged and clear workforce plan identified
		Agree and implement consistency for ESR coding across MH roles	RB	ESR data	Consistent coding across NEY
		Cleanse ESR data for Psychological Professions (PP) workforce	RB	ESR data	Clear picture of the PPN workforce
		Set up dashboard to accurately monitor PP workforce identifying gaps and influencing longer term workforce planning for PP	RB	Dashboard created	Clear workforce plan produced for PPN

## Learning Disability and Autism

### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Develop future pipeline of transformative registered professional and multi-disciplinary roles: eg peer support workers and children's keyworkers	JM	No of staff in posts and resource portal content on MDT roles for LDA	Increase in numbers in training for range of identified professions
		Increase clinical leadership through supporting HEE's work with the multi-professional competencies and Advancing Practice following specialist credentials	JM	No of trainee ACPs working in LDA services	Increase in numbers of trainee ACPs working in LDA services
		Create standardised approach to peer support workers in learning disability and autism services through improving training and learning from service models regionally in mental health services	JM	No of PSW linked roles in employment or planned for employment	Increased prevalence of PSWs in post and career pathways and training courses identified and developed.
		Establish and promote entry roles specific to learning disability and autism services	JM	No of apprenticeships relevant to LDA shared	Increased uptake in entry level roles for LDA services
		Increase exposure to careers in learning disability and autism services – multi-HEE team outreach regarding careers and placement opportunities.	JM	No and range of resources to share across region	Increased range of regionally produced and shared resources and contacts to help careers
2	Redesign	Develop and grow workforce for Autism-specific diagnostic pathway teams	JM	No of case studies of good practice	Case study examples and trailblazing workforce teams
		Improve understanding of Autism and Learning Disabilities across the mental health workforce and wider workforce	JM	Number of those trained on tier 3 for inpatients MH, tier 3 for community MH	Increased number of staff trained and using TtT in their work settings
		Improve diversity of workforce and access to work	SP JM	Measure of make-up of LDA workforce, looking at range of characteristics	Improved diversity including people with LDA

	Redesign <i>cont.</i>	Improving Autism-specific Peer Education	JM	No of resources and case studies to be developed	Peer Education resources navigable and accessible for range of people
		Increase integration of Expert by Experience voice in all activity, towards co-production	SP/ JM	HEE HEY Policy of co-production and inclusion	Regional policy for MH and LDA inclusion and co-production
3	Retention	Support training opportunities ensuring access to quality training for all in the wider workforce	Tbc	Training mapped for wider workforce	Wider workforce training participation rate increases
		Clarify and promote career pathways in learning disability and autism services	Tbc	Webinar and resource portals opportunity	Resources and webinars accessible for sharing good practice for career pathway and talent management
		Consolidate professional confidence in care throughout the workforce, working with Skills for Care	Tbc		SfC and HEE joint approach for 23/24
4	Workforce planning	Develop plans for a system-led workforce modelling approach across health and care to meet system requirements of the future and underpin the ICS people deliverables	RB		More integrated understanding of workforce and needs in NEY via data and WP reliability
		Address key gaps in workforce data and agree and implement practical solutions working across health and social care organisations.	RB		Improve confidence in workforce data and predictions

## Nursing, Midwifery and Allied Health Professionals (NMAHP)

### Programme team

<b>Programme sponsor</b>	Laura Serrant, Regional Head of Nursing, <a href="mailto:laura.serrant@hee.nhs.uk">laura.serrant@hee.nhs.uk</a>
<b>Programme team</b>	Michelle Bamforth (MB), Regional Deputy Head of Nursing, <a href="mailto:michelle.bamforth@hee.nhs.uk">michelle.bamforth@hee.nhs.uk</a> Claire Arditto (CA), Regional Head of AHP, <a href="mailto:claire.arditto@hee.nhs.uk">claire.arditto@hee.nhs.uk</a>

### Programme objectives

The NMAHP programme in 2022/23 will focus on contributing to professional growth targets including 50k programme, Training Nursing Associate (TNA) programme, midwifery and AHP professions with specific focus on Diagnostic Radiography (DRad), Operating Department Practitioner (ODP), Podiatry, Occupational Therapist (OT) in Social Care and the support worker workforce. We will do this by managing domestic supply routes including addressing attrition in training. Focusing on a multi-professional workforce, and underpinning interdisciplinary training and upskilling, growing and promoting the contribution of nursing associates and supporting return to practice across all groups.

In addition, and in line with the 2022/23 priorities and operational planning guidance for the NHS we will support systems to develop and deliver their workforce plans by:

- providing NMAHP professional and strategic expertise across HEE and NHSE/I functions and work programmes, delivered at both Regional, ICS and local level.
- actively support the delivery of sufficient high quality, practice-based learning opportunities to enable students to qualify and register as close to their initial expected date as possible.
- accelerate the introduction of new roles, such as Apprenticeships, Enhanced Care Practitioners (ECP) and TNA/NA in line with national plans
- support the development of the Nursing and AHP Additional Roles Reimbursement Scheme (ARRS) roles in Primary Care (PC)
- promote and support initiatives to expand workforce integration for Nursing and AHP roles in health and Social Care (SC) settings (Joining Up Care for People Places and Populations White Paper- DHSC Feb 2022 ([LINK](#))).

### Workstreams and projects 2022/23

	Workstream	Projects	HEE Metrics	Lead	Key Performance Indicators	
					Metric	2022/23 ambition
1	Future workforce (Grow the professional workforce across NMAHP)	Support HEIs and providers to facilitate sustainable Undergraduate and Postgraduate expansion including reducing pre-reg attrition.	Net growth in Midwifery pre-registration completers against baseline	MB	Multi-professional Education and Training Investment Plan (METIP)	545 starters
			Net growth in Nursing including specific targets in Learning Disability (LD) and Mental Health (MH) Nurses	MB		5,539 Adult, Child, MH, LD nurses starters
			Net growth in specific AHP professions (Drad, OT, Podiatry and ODP)	CA		3,131 starters (10 professions)
		Encourage return to practice from NMAHP professions	CA/MB	100% Trusts actively supporting RtP AHP 30 HEE starters 20 completers		

Future workforce (Grow the professional workforce across NMAHP) <i>cont.</i>		Number of returners to the Health and Care Professions Council (HCPC)	CA	Attrition/ RTP data HCPC	
	Ensure diverse entry routes to NMAHP professions	Increased targeted number of Nursing Associate trainees starting in year – particular focus on PC, LD and MH.  Increase access to OT in Social Care	MB/ CA	METIP	752 starters  Evident growth in Social Care OT placements
	Promote Equality, Diversity and Inclusion across all work programmes	Embed Equality and Health Inequality (EHIA) impact assessments across the work programmes. EDI- Student Council to support in the definition of requirements	MB/ CA		Develop EHIA's for each programme alongside appropriate stakeholders.
	Increased Apprenticeship growth, leading to a higher number of starters across the NMAHP professions	Number of Registered Nurse Degree Apprenticeship trainees starting in year – specific focus on LD/MH starts linked to all England plan  Number of AHP Apprenticeship starting in year – specific focus on Podiatry, ODP, DRAD, Arts Therapies  Focuses growth in L3 and L5 Apprenticeships for AHP Support Workers	MB  CA	Department for Education (via Fay Lane)  Department for Education (via Fay Lane)	  An increase on 117 (2021/22 starters)  Increase number of Support worker Apprenticeship starters
	Engagement in Multi-Year Workforce Modelling to support future workforce growth. METIP to confidently identify the numbers of learners and predicted gaps	METIP ICS Workforce Planning	MB/ CA	METIP	Collaborate with Workforce transformation and commissioning team to operationalise METIP.
	Facilitate continuous professional development (CPD) with provider organisations in line with national priorities.	Full settlement and assurance provision has been equally distributed across the system and professions.	MB	CPD Submissions from Trusts and PC Training Hubs	100% Spend of CPD allocation
	Clearly align with key HEE functions to contribute to NMAHP provision	Clear evidence of accountability in the NMAHP workplans including Advanced Clinical Practitioner, Cancer and Diagnostics, MH, LD and PC workstreams.	CA/ MB		
2	Ensure success and sustainability of 4 AHP ICS Faculties	Review National funding allocation	CA	Maturity Matrix Quarterly reporting	Maturity evident via reporting against baseline



	Current workforce (Upskilling and Workforce Development) <i>cont.</i>	Support the development of the Enhanced Clinical Practitioner standard in NMAHP	To be defined in line with national metrics 22/23  Establish Regional Assurance Board	CA/ MB	Tbc	Tbc following national agreement  ECP programmes identified in a no. Providers in region
		Maximise the Retention and transition of the NMAHP professions, with a focus on early year careers	Support the delivery of the National Preceptorship programme.	CA/ MB	Attrition, recruitment and workforce retention data	Tbc following national agreement – reduction in NMAHP attrition rates
3	Quality	Growing the capacity and capability of practice-based learning	Effective governance and support of the Clinical Placement Expansion Programme (CPEP) and additional placement development funding. With targeted growth and quality monitoring via Monitoring Learning Environments.	CA/ MB	Placement Growth % HEI Simulation Growth	Growth targets  CPEP 10%  SIM 177.35%
		Provide professional oversight, governance and quality assurance of student learner practice education	Promote increased uptake of NETS and PARE across NMAHP  Support the quality team in MLE quality monitoring across providers	CA/ MB	NETS/PARE Response rates/ completion quality	Increase uptake of NETS and PARE across NMAHP
		Engage the multi-professional learner voice	Establishment and Implementation of the Regional Student Council  Ongoing AHP leadership placements, implement in nursing and midwifery with targeted projects to be co-produced within the team	CA/ MB	N/A	Recruit to and establish in Q1 Report progress into the NMAHP workforce steering group

## Primary and Community Care Programme

### Programme team

<b>Programme sponsor</b>	Mike Curtis, Regional Director, <a href="mailto:mike.curtis@hee.nhs.uk">mike.curtis@hee.nhs.uk</a>
<b>Programme team</b>	<p>Workforce Transformation Lead, Regional Programmes, HEE NEY <a href="mailto:kate.holliday@hee.nhs.uk">kate.holliday@hee.nhs.uk</a></p> <p>Regional Programme Manager, Workforce Transformation, HEE NEY <a href="mailto:kay.butterfield@hee.nhs.uk">kay.butterfield@hee.nhs.uk</a></p> <p>Clinical Leads:            Primary Care Dean (Head of Primary Care School), HEE YH (tbc)            Primary Care Dean (Head of Primary Care School) HEE NENC <a href="mailto:justin.burdon@hee.nhs.uk">justin.burdon@hee.nhs.uk</a></p>

### Programme objectives

This broad programme includes support to eye care, general practice, oral health, palliative and end of life care, pharmacy, social care including unpaid carers and volunteers and urgent and emergency care. Our approach to this workforce challenge is multi-professional and system wide, seeking to innovate and share workforce solutions among ICS partners and across sectors.

Working with the NHSE/I Primary Care team, with Systems and with primary care providers we will:

- Work in partnership to make the most effective use of the resources available.
- Improve timely access to primary care – maximising the impact of the investment in primary medical care and primary care networks (PCNs) to expand capacity, increase the number of appointments available and drive integrated working at neighbourhood and place level.
- Invest in the workforce with more people, includes additional roles reimbursement scheme (ARRS) to deliver 26,000 roles in primary care (20,500 FTE 22/23) to support the creation of multi-disciplinary teams and new ways of working any by strengthening the compassionate and inclusive culture needed to deliver outstanding care.
- Build community care capacity – keeping patients safe and offering the right care, at the right time in the right setting. Supported by creating equivalent of 5,000 additional beds, through expansion of virtual ward models.

## Eye Care

### Joint programme team

<b>HEE:</b> Kay Butterfield, Regional Programme Manager, <a href="mailto:kay.butterfield@hee.nhs.uk">kay.butterfield@hee.nhs.uk</a>	<b>NHSE/I:</b> Steve Clark, Regional Clinical Lead for Eye Care, <a href="mailto:stephen.clark2@nhs.net">stephen.clark2@nhs.net</a> Fiona Ottewell, Regional Improvement Lead for Eye Care <a href="mailto:fiona.ottewell@nhs.net">fiona.ottewell@nhs.net</a> Fiona Hibbits, Deputy Director for Workforce Transformation, NHSE/I <a href="mailto:fiona.hibbits@nhs.net">fiona.hibbits@nhs.net</a>
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### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Explore with local optical committees in NEY what services optometrists in the community could undertake that would relief secondary care	KB/ SC/ FO	Services identified for workforce redesign Progress NHSE/Is National Eye Care Recovery and Transformation Programme	

		Identify what services in addition to eye tests are being undertaken in NEY commissioned by which CCGs to explore what is possible	KB/ SC/ FO	Services and CCGs identified	
		Work with NHSE/I and CCGs regarding services commissioned to community optometrists that could relieve secondary services	KB/ SC/ FO	Conversations commence regarding workforce redesign and commissioning  One service identified for workforce redesign  Begin the implementation of Optometry First model	
2	Redesign	Develop regional consensus on training requirements for eye care related roles	KB/ SC/ FO	Facilitated discussions held with each ICS. Training requirements collated and included within joint NHSE/I and HEE Workforce Plan	
		Explore implementing Calderdale Framework to aid confidence in services that are being considered to be transferred to be undertaken in community rather than secondary services	KB /SC /FO	Calderdale Framework undertaken in respect to one service identified for workforce redesign	
3	Retention	Increase the variety of services provided by community to improve interest in remaining and entering community practices	KB /SC/F O	Community Services increased enabling Acute Services to focus on complex/specialisms through workforce redesign	
		Reduce workforce stress levels in secondary services to enable those working in secondary services to focus on specialist areas of eye care which will reduce long outpatient waiting lists, eliminate the risks of avoidable sight loss and address hospital capacity pressures by expanding care outside hospital.	KB/ SC/ FO	Reduced waiting lists for Acute Services/ improved timescales to receive care through workforce redesign	

## General Practice

### HEE programme team

Primary Care Training Hubs (PCTHs) are key partners in the delivery of this programme. These are commissioned in YH, with coordination from David Claxton, Primary Care School Manager, HEE YH [David.claxton@hee.nhs.uk](mailto:David.claxton@hee.nhs.uk)

The NENC PCTH is directly delivered by HEE, with management from Gail Linstead, Primary Care Workforce Lead, HEE NENC [gail.linstead@hee.nhs.uk](mailto:gail.linstead@hee.nhs.uk)

Director of General Practice (Head of Primary Care School), HEE YH: vacant post – Name TBC

Primary Care Dean (Head of Primary Care School) HEE NENC: [justin.burdon@hee.nhs.uk](mailto:justin.burdon@hee.nhs.uk)

Wider HEE Regional colleagues supporting the work of this programme include:

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### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Deliver General Practitioner training growth target	TBC/JB	Number of GP trainees starting training in year	438 YH/244 NENC
		Support return to general practice programmes with continuing practice team	TBC/JB	Number of practitioners returning to general practice in NEY	
		Support the increase of numbers of Nursing Associates employed in general practice and social care (See overall nursing programme section for further information)	TBC/JB/MB	Human resources recruited to provide support to employers Benefits realisation work undertaken Engage with PCNs	233 NEY
		Support the increase of the capacity and capability of general practice educators and supervisors across nursing and ARRS roles	TBC/JB/MB	Engage with PCNs Training programmes undertaken	
		Support the increase of Advancing Practice roles in general practice	TBC/JB/LC/JP	Advancing Practice roles increased	81 NEY
2	Redesign	Recommission Cervical Sample Takers Training (CSTT)	Louise Lane	Training Commissioned	
		Work with output of multi-year workforce modelling project, particularly to identify learning requirements associated with local health inequalities	WTLs with ICSs	Learning needs analysis undertaken within each ICS Training commissioned for each ICS	
3	Retention	Expand innovative and high-quality learning environments in general practice	ICS facing placement leads	Increased number of general practice placements	

## Oral Health

### HEE programme team

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### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition NEY
1	Supply	Increase number of Dental Hygienists – market-led	JS/MS	Deliver growth target	80
		Increase number of Dental Nurses – HEE commissioned	JS/MS	Deliver growth target	53
		Increase number of Dental Technicians – HEE commissioned	JS/MS	Deliver growth target	9
		Increase number of Dental Therapists in Post Reg Foundation Training – HEE commissioned	JS/MS	Deliver growth target	22
		Increase number of Dental specialty training posts in Paediatric Dentistry, Special Care Dentistry and Oral Surgery – HEE commissioned through Dental Education and Reform Programme (DERP)	MS/JS	Deliver DERP target	2
		Oral Health Practitioner primary care apprenticeships	MS/JS	Introduction of OHP apprentice programme  HEE Quality Framework	6
2	Redesign	Develop Early Years training posts in line with ADC Review Report – Local Office led	MS/JS	Convert existing DFT/DCT1 posts by <10%	8
		Develop Early Years training posts in line with ADC Review Report - Local Office led	MS/JS	Convert existing DCT2/DCT13 posts by <10%	6
		Further develop Primary Care Multi-professional Oral Health education and training - modular training programmes GPs, Pharmacists, social care staff and AHPs	MS/JS	Deliver growth target	4 programmes
		Further develop Primary Care Multi-professional Oral Health education and training - Mouth Care Matters project for primary care and secondary care	MS/JS	Deliver growth target	2 programmes
3	Retention	Work with NHSE/I to increase training capacity in identified areas of greatest need – Local Office led	MS/JS	Distribute training in line with NHSE/I's capacity improvements	Subject to commissioning decisions
		Upskilling of dental nurses – Additional Duties modules programme	MS/JS	Deliver growth target	12
		Reskilling of Dental Therapists in line with Dental Contract reform changes	MS/JS	Deliver growth target	12

## Palliative and End of Life Care (PEoLC)

### Joint programme team

#### HEE:

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#### NHSE/I:

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### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Map workforce, using national workforce planning tools across all sectors by working with the SCN PEoLC network and ICS teams, in order to plan current and future need for workforce	JM/MH	Shared resource of data and planning for all PEoLC workforce	Enhance intelligence for workforce planning for 2023 +
		Support Children and Young People PEoLC workforce and address challenges through creative solutions via redesign or new role opportunities, for example in PCNs	JM/MH	Specific regional workforce issues and solutions identified	Planned priorities for 2023 +
		Identify ways to promote a range of professional and care roles into the PEoLC Care specialist workforce	JM/MH	Number of promotional materials and case studies shared	Increased exposure of PEoLC opportunities
		Identify and promote opportunities for training and upskilling, in medical and multi-professional roles, attracting people to be part of the PEoLC workforce.	JM/MH	Resource to map opportunities at regional and ICS level	Wider understanding of opportunities including placements.
2	Redesign	Putting personalised care at the heart of PEoLC workforce training, for example Personalised Care Institute training, personalised care and support planning.	JM/MH	Personalised care agenda in all workforce meetings	Increased evidence of personalised care training
		Identify and develop apprenticeship, nursing associates and talent for care opportunities for integrated palliative and end of life care workforce	JM/MH	Resources and events to share opportunities	Increased awareness and uptake of offers.
		Develop PEoLC workforce to support and reflect the population in terms of diversity and ethnicity of population we service - promotion of palliative and end of life care roles	JM/MH	Pilots and initiatives shared.	Good practice widened.
		Upskill and raise awareness for wider workforce eg receptionists, support staff, such as "Compassion Community" training.	JM/MH	Pilots and initiatives shared.	Good practice widened.
3	Retention	Collaboratively identify ways to recruit and retain the Senior Nurse and Medical Specialist Palliative Care Workforce	JM/MH	Facilitated workshop evidence	Increased range of approaches to address challenges
		Identify career pathways, training opportunities and talent management.	JM/MH	Number of resources shared and developed	Grow resource banks and widen exposure.
		Upskilling workforce at all levels on key areas for development with key skills for this workforce eg difficult conversations, trauma informed care	JM/MH	Resources	Maximise ELFH and HEE funded training

## Pharmacy

### HEE programme team

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### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Pharmacy Foundation (previously pre-reg) (GP/PC) - HEE commissioned	GR	In year starts	15 NEY
		Pharmacy Foundation (previously pre-reg) (SC) - HEE commissioned	GR	In year starts	119 NEY
		Pharmacy Independent Prescribing (SC) - HEE commissioned	GR	In year starts	150 NEY
		Pharmacy Technician (GP/PC) – HEE commissioned	GR	In year starts	180 NEY
		Pharmacy Technician (SC) – HEE commissioned	GR	In year starts	179 NEY
		Pharmacy Foundation (SC) Post Reg Diploma (22/23 figs YH only) – HEE commissioned	GR	In year starts	70 YH
		Undergraduate Clinical Pharmacy (previous B230) – HEE commissioned	GR	In year starts	1900 NEY
2	Redesign	Recommission non-medical prescribing training, responding to changing curricula elsewhere	Jane Brown/ GR/ Louise Lane	New NMP commissioning in place	
		Pharmacy Specialist Technical Services workforce	GR	In year starts	200 NEY
		Community and Primary Care Pharmacy Workforce	GR	In year starts	400 NEY
		Infrastructure support: Independent Prescribing	GR	Increase of IPs	200 NEY
3	Retention	Early Careers Pharmacist Pathways	GR	Pathway created	
		Pharmacy Technician Career Pathways	GR	Pathway created	
		Upskilling priorities: prescribers, clinical, specialist mental health, technical	GR	Upskilling training undertaken	

## Social Care

### Joint programme team

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This pillar is also supported by a broad stakeholder group involving local authorities, care providers, ADASS and Skills for Care

### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Support workforce planning in social work environments with Skills for Care, Local Authorities and ICS Leads and identify the associated training needs	KB/ Clare Humble	Five year future demand model in place Training needs identified to support supply	
		Support the reduction of reliability of bank and agency workforce	KB/FH	Ensure retention plans are in place as part of one workforce retention plans. Share retention data for social care with ICSs. Pilot agency framework development for social care. Develop a collaborative workforce bank.	
		Support the increase of recruitment to social care	KB/CA/ FH/VB/ Claire Rix	Place based health and social care recruitment pilot rollout. Support and share joint recruitment initiatives. Support programme to increase number of occupational therapists in social care Open new to social care routes for recruitment eg volunteers, carers, refugees Increase the number of undergraduates that have a placement in social care Develop a long-term sustainable solution to integration of placements in social care Develop health and care collaborative programme for Reservists and Covid Vaccinators to secure permanent employment	
2	Redesign	Work with Skills for Care, Local Authorities and ICS Leads to identify skill mix requirements to enable appropriate care in the appropriate place to be delivered for the population	KB/FH  CA/VB	Provide training support packages. Increase in job satisfaction Increase opportunities to 'grow own workforce' through Occupational Therapist Apprenticeships (Level 6)	
		Work with volunteers and unpaid carers to identify training gaps and opportunities to fill them	KB	Range and visibility of training available to volunteers and unpaid carers is increased	



3	Retention	Explore what work has already been undertaken in respect to career pathways	KB	Support promotion of social care career opportunities	
		Increase leadership training opportunities within social care	FH	Social Care able to access NHS Leadership Academy programmes (longer term aim to change name to be: Health and Social Care Leadership Academy)	
		Narrow the 'benefit' gap of working within NHS and Social Care (actual and perceived)	FH	Support access to NHS benefits and universal health and wellbeing offers Support pilot of local pay framework Support the development of the design and delivery of the social care content for NEY Retention Community of Practice	

## Urgent and Emergency Care

### Joint programme team

#### HEE:

Kirsty Lowery-Richardson  
Workforce Transformation Lead  
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#### NHSE/I:

Fiona Hibbits, Deputy Director for Workforce Transformation, NHSE/I [fiona.hibbits@nhs.net](mailto:fiona.hibbits@nhs.net)

### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key Performance Indicators	
				Metric	22/23 ambition
1	Supply	Support workforce planning in 999 and 111 environments	KLR/FH	Training needs identified to support supply	
		Explore potential for IR nurses for 111 roles	KLR/FH	Roles identified for ILR nurses	
		Support modularisation of 111 Pathways training in YAS	KLR/FH	Work undertaken to have modular pathways	
		Identify Specialist Paramedic education route that is sustainable and consistent across NEY	KLR/FH	Identification of specialist paramedic pathway	
2	Redesign	Work with YAS and NEAS to utilise ECP apprenticeship as appropriate	KLR/FH	ECP utilised	
		Support Newly Qualified Paramedic programme review and refresh	KLR/FH	Newly qualified paramedics review completed	
3	Retention	Present career pathway for 999 and 111 opportunities	KLR/FH	Career pathway outlined	
		Continue to support rotational paramedic growth in YAS (incorporating FCP)	KLR/FH	Rotational paramedic programmes include FCP	
		Support regional learner, educator and NQP engagement sessions.	KLR/FH	NQP engagement sessions held	

## **Part C: Change Programmes**

## Enabling Workforce Transformation Programme

### Programme team

<b>Programme sponsor</b>	Rachel Baillie Smith, Director of Delivery and Performance <a href="mailto:rachel.bailliesmith@hee.nhs.uk">rachel.bailliesmith@hee.nhs.uk</a>
<b>Programme team</b>	Kate Holliday, Workforce Transformation Lead: Regional Programmes Ben Chico, Workforce Transformation Lead (WTLs), SYB Wyn Jones, Workforce Transformation Lead, HNY Kirsty Lowery-Richardson, Workforce Transformation Lead, WY Catherine Sills, Workforce Transformation Lead, NENC Louise Lane, Regional Workforce Transformation Programme Manager  Workforce Planning Leads (WPLs); Programme Support Managers; Regional Programmes Team members

### Programme objectives

Through this programme we aim to proactively enable workforce transformation to happen at region, System, programme and place levels. We work with and through the region's four Integrated Care Boards, promoting partnership, cooperation and collaboration in line with our corporate foundations for success. Projects within the programme will deliver practical enablers to workforce transformation, covering future visioning, workforce planning, facilitating tangible workforce change making best use of all available NEY resources, and evaluating impact. Our work to support digital transformation through workforce transformation and with workforce development actions is also captured here.

### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key partners	Timeframe
1	Develop workforce insight across Integrated Care Boards and Partnerships, supporting ICB strategy development and publication of five-year workforce plan by March 2023	Support ICBs to establish a system-led multi-year workforce modelling (MYM) approach across health and care to meet system requirements of the future and underpin the ICS people deliverables	RBS/ KA/ WPLs	ICBs – senior sponsors, operational planners and sector participants	Data process to June 2022 System workshops July 2022
		Support ICBs to deliver operational planning rounds, maximising benefit from ongoing MYM development	WPLs	ICBs	Ongoing throughout 2022/23
		Refresh approach to Workforce Insight, responding to: <ul style="list-style-type: none"> <li>- System-specific insight needs relating to priorities emerging from multi-year model</li> <li>- Regional strategic programmes</li> </ul>	RBS/ WPLs	ICBs	Refreshed approach by September 2022, then ongoing
		Support ICBs to develop and publish five-year workforce strategy drawing on all of the above	WTLs / WPLs	ICBs	March 2023
2	Support transition to stable ICB People Functions	Agree HEE support to infrastructure with ICBs	RBS/ WTLs	ICBs	April 2022 and ongoing
		Work with Apprenticeship Hub to understand system level impact of apprenticeships activity	LL	Apprenticeship Hub; ICBs Employers	March 2023
		Support ICBs to optimise schools' engagement and careers offers	WTLs	ICBs; HEE NENC Careers Team	Ongoing throughout 2022/23
3	Enable workforce change	Establish the Workforce Challenge Hub (team, methodology, project design and delivery, and evaluation) to deliver a core programme of workforce transformation projects focussed on	KH/ LL	YH AHSN NENC AHSN System participants	April – July 2022: Establishment and phase 1 project identification

		agreed System and programme priorities, underpinned by a structured and clearly understood methodology for enabling workforce transformation.			August – December 2022: Phase 1 project design, delivery and evaluation January 2023: Phase 2 project identification
		Continue to develop capability in HEE workforce transformation leadership, delivery and tools including use of HEE Star. Specifically work with the CLEAR national faculty to develop a CLEAR supervision capability in NEY	KH/ LL	HEE national Transformation Team National CLEAR Faculty System and provider participants	August 2022
		Establish outcomes focus on workforce transformation funding and ensure effective impact evaluation	LL	WTLs ICBs	Ongoing throughout 2022/23
		Develop shared approach to understanding reach and impact across HEE funding streams (including WD, CPD and others) focused on maximising transformational impact	LL	HEE enabling functions NMAHP team	Ongoing throughout 2022/23
		Enabling the integration of health and care workforce activities	WTLs	ICBs NHSE/I Integrated Care Workforce Collaborative Group	Ongoing throughout 2022/23
4	Contribute to tackling health inequalities	Support ICBs to understand diverse population needs through Workforce Insight, contributing to existing System level work on population health management	CH/ WPLs	OHID Primary and Community Care programme	Ongoing throughout 2022/23
		Gather and communicate training and education opportunities related to health inequalities and identify curriculum development opportunities to increase impact (making use of health inequalities submissions included in operational planning round)	LL	WTLs OHID School of Public Health (Y&H; NENC) HEE and NHSE/I EDI leads	May 2022: Phase 1 scoping
5	Digital	Support ICBs to deliver workforce dimension of the What Good Looks Like framework (NSHD)	WTLs	ICBs	Ongoing throughout 2022/23
		Proactively develop WT team digital readiness	All	HEE Digital First team and Digital Champions	Ongoing throughout 2022/23
6	NEY 4+1 collaboration (4 Systems plus activity which benefits the region as a whole)	Continue to develop and facilitate 4+1 approach to regional strategic programmes, creating strong working relationships with regional NHSE/I programmes, wider regional ALB functions and national teams	All	NHSE/I, wider regional ALB functions and national teams	Ongoing throughout 2022/23
		Continue to develop and implement practical regional support to service priority areas, particularly elective recovery	All	NHSE/I	Ongoing throughout 2022/23
		Continue to support the development of the Regional People Board and associated regional governance structures	Mike Curtis /RBS	HEE RD and SLT NHSE/I ICBs	Ongoing throughout 2022/23

## Education Reform and Widening Access Programme

### Programme team

**Programme sponsor** Kevin Moore, Head of Education Commissioning and Transformation,  
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**Programme team** **Education transformation**

Mandy Brailsford

**Advanced Clinical Practice and New Roles**

**Regional Faculty**

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Megan Wright, Programme Support officer: Regional Faculty for Advancing Clinical Education

Asma Fareed, Programme Administrator: Regional Faculty for Advancing Clinical Education

**System-level ACP Faculties embedded in or with liaison via Workforce Transformation**

WY	HNY	SYB	NENC
Kirsty Lowery-Richardson Helen Beaumont-Waters (interim) Kim Toom Eraina Archer	Amanda Fisher Carly McIntyre	Simon Clarke Alex Kotcheta Sarah Fisher Trudi Philips	Simon Gardner Lauraine Gibson Claire Carr Gemma Machin

**Physician Associates development**

Julie Hoskin

**Apprenticeships expansion and innovation**

Helen Suddes, Widening Participation and Apprenticeship Lead

Ben Park, Contract and Data Performance Manager

Penny Pinder, Quality Assurance Development Manger

Rachel Chalk, Apprenticeship Development Manager - Primary and Community Care

Nicola Carter, Business Support and Administration

*Apprenticeship development is also supported by the externally commissioned capacity provided in the Regional Scientist Team, focused on apprenticeships in healthcare science*

**Placements expansion and innovation**

**Regional placements coordination:** Sarah Pemberton (seconded), Caroline Hinds (substantive)

**Placements commissioning:** Shirley Harrison

**System-level Strategic Placements Leads embedded in or with liaison via Workforce Transformation**

WY	HNY	SYB	NENC
Sarah Rowson	Sarah Newsome	Clair-Marie Clarke	Barbara Foggo

## Programme objectives

Through this programme we aim to maintain, design and deliver exceptional education that meets current and future innovative system need, with a focus on responding to prioritised System need and broad participation.

Our regional Advanced Clinical Practice Faculty works with System-level Faculties to grow the capacity of the region's Advanced Practice workforce, ensuring that new capability is embedded in local delivery. Promotion and embedding of new roles are also a key part of this work.

Our Apprenticeship Hub similarly works with System-level apprenticeship leadership capacity to help the region deliver against the Talent for Care Strategy, in relation to Get In, Get On, Go Further. Through this work we identify how existing and new apprenticeships can enhance workforce capability and support widened access to health and care careers.

Working together across multiple functions, we will ensure innovation of placements to enable access for learners and maximise opportunities to effectively grown the workforce.

## Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key partners	Timeframe
1	Education transformation	Develop and maximise impact of Academies agenda within strategic programmes	MB		
2	Advanced Clinical Practice and New Roles	Trainee Information System (TIS)	CC/MM	All ICS based faculty teams	Roll out summer 2022 implementation/test Sept 2022
		Learning Disability and Autism – increase in ACP roles for LDA	JP	All ICS based faculty teams	April – Sept 2022
		Equality/ Diversity and Inclusion (WRES project) - understanding the barriers and supporting trainees from a BAME background to apply to tACP roles	JP/MM /LC	All ICS based faculty teams University of Huddersfield	June 2022 - 2023
		Practitioners E Portfolio – investment into portfolio to support tACPs	JC	All ICS based faculty teams Rotherham NHS FT leading	Sept 2022- 2023
		TACP specialisms - increase uptake on specialist areas	All faculty team		Ongoing
		Accreditation - ACP HEI programme Accreditation	JC	HEIs	Ongoing – Sept 2023
		Primary Care – support the development of Primary care ACP roles	LC	All ICS based faculty teams	Ongoing
		Support First Contact Practitioner agenda	LC/JP	Primary and Community Care programme teams	
		Physician Associate (PA) Ambassadors	JH	All ICS faculty teams	Ongoing
		PA Preceptorship	JH	All ICS faculty teams Primary care training hubs	Ongoing
		PAs in MH – 2x fully funded PAs per organisation for 1 full year using a system wide recruitment selection and education approach to embed PAs into MH workforce	JH	Y&H ICS faculty teams Sheffield Health and Social Care – Lead organisations	April 2022 – ongoing

		PA career progression –developing senior PA roles	JH	All ICS based faculty	April 2022 – ongoing
		PA Apprenticeship – currently out for tender for HEIs to provide	JH		Ongoing
		PA foundation programme - this proposal reflects a 40/60 model of shared salary with local trust to embed PAs in workforces which currently do not utilise this workforce resource *NB requires funding	JH		Requires funding
		Development of HEI PA forum	JH	6 HEIs who run a PA course	Feb 2022 – ongoing
		Developing a local ICS based PA employer's forums	JH		Jan 2022 ongoing
3	Widening participation and apprenticeships	Oral Health Practitioner L4 apprenticeship provision, including new programme in Leeds commencing June 2022	HS/PP	HEE TV	
		Mammography Associate L4 Apprenticeship Program filling growing need for cancer and diagnostics staff in workforce; develop a Mentorship Programme for those that are new to mentoring apprentices - to understand what expected of them as a mentor and also to understand about apprenticeships	HS/PP	NBIA	
		New Senior Healthcare Support Worker L3 programme launched across region and bespoke Primary Care provision	HS/RC	Northumbria/CASH/NCFT	
		Grow the Levy transfer facilitation service to minimise expiring levy in region and increase apprentice numbers	HS/RC	ICB/Trusts/ Commercial Partners	
		Science Industry Maintenance Technician Level 3 and Healthcare Engineering Specialist Technician Level 3 apprenticeships. Developing the NHS Estates and Facilities workforce across the NEY	HS/BP	Northern & Yorkshire NHS Assessment Centre, NHS Trusts, College partners	
		Provide strategic and operational support to the establishment of the Flexible Apprenticeship Scheme approved by the ESFA for the NENC ICB and expand the offer to partners in Yorkshire where there is benefit in doing so	HS/RC	NECS/ICB	
		Support DAS account setup for SMEs across the region, working with the Primary Care Training Hub business team as required	BP/RC	PCN/Primary Care	
		Develop an End Point Assessment (EPA) Consortium to support the system and increase the number of high-quality EPA assessors to meet the need	BP	HEIs/FES/ EPAOs/NHS	
		Retain a list of trailblazer groups that employers or education providers from the are involved in, tracking progress of development as appropriate Trailblazer groups where appropriate	BP	ESFA	

	Continue to develop and implement new apprenticeship standards as part of the ESFA provider contract for specialist areas, including dental, pharmacy, estates, healthcare science, oral Health Promotion and mammography	WP&A Team	ESFA, Employers, HEE	
	Ensure regular data and dashboards to illustrate progress of stakeholders across the system against key national regional and local targets, including the public sector apprenticeship target, levy transfers, number of apprentices in primary care, number of apprentices on each apprenticeship programme with each employer	HS/BP	ICBs/ Employers/ ESFA	
	Increase representation of people from under-represented and hard-to-reach groups taking up local apprenticeships	WP&A Team	Employers/ Community Groups/ ICPs/ Workforce Transformation Leads	
	Scope opportunities for collaborative commissioning of apprenticeships with employers, encouraging employers to work together	HS	Employers/ Commissioning Team/ WFTL	
	Support the development of a Quality System for Apprenticeships across the region	KM/HS /PP	HEIs/ FEs/ Employers/ Other Providers/ QT/OFSTED/ HEE	
	Develop a forward plan for priority apprenticeship delivery across the system and quantify the expected Apprenticeship Contribution to Workforce Planning Numbers – Link this to the impact on FT Digital Accounts and Trusts actual commissioning	HS	Employers/ WFPL	
	Provide support for apprenticeship Employer Providers, including annual reviews and preparations for Ofsted, aiming for each provider to obtain a good or outstanding rating and the MAYTAS System	PP/BP	Providers/ OFSTED/ESFA	
	Provide expert advice and information on apprenticeships for employers and education providers working across the System	WP&A Team	System Partners	
	Support Pre-Employment programs through extending the current work with the DWP, Kickstart and the Princes Trust	RC/BP	DWP/Princes Trusts/ Employers	
	Increase Equality and Diversity of Apprenticeship Provision within the NHS and support our partners	WP&A Team	Employers/ Community Partners/WFTL	
	Roll out and further develop online Work Experience opportunities through the Spring pod Project and expand the number of professions included in the current portfolio	HS/BP	Employers/ Interested groups such as Princes Trust	
	Develop plans to increase and develop the Support Care workforce	WP&A Team	Employers/HEE Colleagues	



		through Get in, Get on and Go Further Opportunities, in particular and use this to strength the supply chain into clinical careers			
4	Placements expansion and innovation	Define and agree roles and responsibilities among regional and system-level colleagues working on the placements agenda, clarifying the specific contribution of WT, Quality, NMAHP and Commissioning functions	BC/CH		June 2022
		Participate in process for defining the specification for the procurement of the National Multi-Professional Placement Management System	KM/CH		March 2023
		Confirm placement hours by Programme and Payment Schedules	SH/SP		June 2022
		Development of ongoing system for monitoring Placements/Payments	SH/CH		June 2022
		CPEP/SIM Placement – Monitor and confirm expansion of placements	CH/SP (NMAHP)		March 2023
		METIP – determine and confirm balanced placement portfolio to meet investment needs	SP (NMAHP)		March 2023
		Blended learning – Policy and Implementation Issues	SP (NMAHP)		June 2022
		LEAP/EELE merger of approaches and confirmation of 23/24 funding	KM/CH		March 2023
		LEAP Assurance Board to meet and review LEAP Strategy	KM/SP		June 2022
		Establish Student Council	CH/SP (NMAHP)		March 2023
		Utilisation and Incorporation of Learning Hubs	SP (NMAHP)		June 2022
		Scope and support innovation in new roles such as medical associate professional roles.	MB		
		Work with clinical teams and ALBs to support and understand educational need stemming from clinical challenges and innovation.	MB		
		Nursing students and new standards: impact on placement capacity	SP (NMAHP)		March 2023

## NEY Best Place to Work Programme

### Programme team

<b>Programme sponsor</b>	Jo Dally, Head of Regional Business Management, <a href="mailto:joanne.dally@hee.nhs.uk">joanne.dally@hee.nhs.uk</a>
<b>Programme team</b>	Sharon Talbot, Business Manager, <a href="mailto:sharon.talbot@hee.nhs.uk">sharon.talbot@hee.nhs.uk</a> Mel Gatecliff, Business Manager, <a href="mailto:mel.gatecliff@hee.nhs.uk">mel.gatecliff@hee.nhs.uk</a> Melanie Holloway, Regional Diversity, Inclusion and Participation Manager, <a href="mailto:melanie.holloway@hee.nhs.uk">melanie.holloway@hee.nhs.uk</a> ; All RBM team members: Becky Harbinson, Bill Hardy, Chris Orrick, Gail Schofield, Janet Donnison, Jo Wilson, John Little, Kate Firth, Lauren Coyne, Leah Smith, Rachel Bullerwell, Rhys Williams, Sue Muller

### Programme objectives

This programme encompasses our actions to support and value our own workforce and to make sure HEE is the Best Place to Work. We aim to address and improve team culture, diversity and inclusion, wellbeing, and to support colleagues to learn, develop and achieve. We gather insight from a range of sources including staff surveys, 'We are HEE workshops' and RD webinars and apply this in our workstreams. This programme operates under the umbrella of the national Best Place to Work programme and is linked to the Change Hub, Health and Wellbeing Forum and the OD leads network. In 2022/23 as we head into a period of organisational transition, this programme will include regional activities to support our teams through change.

### Workstreams and projects 2022/23

	Workstream	Projects	Lead	Key partners	Timeframe
1	Promoting and protecting health and wellbeing (HWB)	Continuing implementation of the regional HWB strategy with a focus on maintaining HWB through organisational transition and change – including influencing and building on team HWB SWOTs and action plans; updating and promoting the NEY HWB Hub.	ST	NEY-based colleagues; HWB leads in NHSE/I NEY	Ongoing throughout 2022/23
		Delivery of Wellbeing Conversation training for NEY teams.	ST	NHSE/I (framework design)	Initially April/May 2022
		Maintaining health and safety standards across all NEY offices to ensure staff have a safe place to work – including ensuring FA/FW coverage; undertaking risk assessments; monitoring and managing accidents, incidents and near misses.	ST/MG	NHS Property Services and EMCOR; HEE Estates; FA/FW volunteers	Ongoing throughout 2022/23
		Establishment of process /IT system to manage ordering/return of Occupational Health and Home Office furniture (under auspices of the national Digital First Programme)	BH (Digital Champion)	NEY-based individuals, teams and functions Finance Teams HR Teams	Ongoing throughout 2022/23
2	Ensuring equality, diversity and inclusion	Manage and enable the effective operation of the NEY AHEAD group. Set and review objectives and carry out actions based on national priorities and regional insight.	MH	NEY AHEAD Group members	Ongoing throughout 2022/23

3	Organisational development and change, including preparing for transition	Identify and implement actions to address the regional priorities arising from the 2021 Colleague Survey, Pulse Survey (once available) and ongoing engagement through transition	JD	NEY-based colleagues, teams and functions	Ongoing throughout 2022/23
		RMT development session to plan for 2022/23 delivery and transition	Mike Curtis	HEE regional functions and enablers	April 2022
		In-person regional team development sessions to be held Spring/Summer 2022	Regional function heads	Regional functions	April - June 2022
		Programme of RD-led regional briefings and webinars; regional induction; NEY Hub SharePoint site	Mike Curtis	All NEY-based colleagues	Ongoing throughout 2022/23
		Engagement with regional teams to identify key development themes and needs; promote and publicise L&D offer to address identified needs, including support through transition and change; oversee and ensure full commitment of the regional share of the national L&D budget	MG	NEY-based colleagues, teams and functions: L&D team, Finance, OD network and OD Community of Practice, L&D providers	Ongoing throughout 2022/23

## Annex 1: METIP 2022/23 - NEY total requested starter numbers for September 2022 with deliverability assessment

Programme name	Commissioning route	FY 2019 starters	FY 2020 starters	FY 2021 starters projected at Oct 21	2022 starters proposed	Student applications 2022	University capacity 2022-2025	NHS and wider system placement capacity 2022-2025	Role integration into workforce 2025
<b>CANCER AND DIAGNOSTICS</b>									
Assistant Practitioner Radiography Bridging Programme (from RA, RH and HCA)	Commissioned			Not forecast	24	G	G	A	G
Cancer - Chemotherapy Nurses	Commissioned			Not forecast	20	G	G	n/a	G
Cancer - Clinical Endoscopists	Commissioned			Not forecast	8	A	G	G	G
Cancer - Nurse Specialists	Commissioned			Not forecast	48	G	G	n/a	G
Cancer - Reporting Radiographers	Commissioned			Not forecast	25	G	G	G	G
Diagnostic Radiographer	Market-led	266	295	276	336	G	G	A	G
HCS apprenticeship level 2 (training grant only non-recurrent)	Commissioned			Not forecast	56	G	G	G	G
HCS apprenticeship level 4 (training grant only non-recurrent)	Commissioned			Not forecast	40	G	G	G	G
HCS Echocardiography Training Programme (ETP)	Commissioned			Not forecast	13	G	G	G	G
HCS Higher Specialist (HSST)	Commissioned			10	14	G	G	G	G
HCS Practitioner Training Programme (PTP)	Commissioned			54	94	G	G	G	G
HCS Scientists Training Programme (STP)	Commissioned	88	95	52	68	G	G	G	G
Radiographer - Ultrasound	Market-led	268	266	47	70	G	G	G	G
Therapeutic Radiographer	Market-led	54	63	83	98	G	G	A	G
<b>EDUCATION REFORM AND WIDENING ACCESS</b>									
Advanced Clinical Practitioner	Commissioned	408	385	412	420	A	G	G	G
Physician Associate	Commissioned	117	116	147	175	A	G	A	A

Programme name	Commissioning route	FY 2019 starters	FY 2020 starters	FY 2021 starters projected at Oct 21	2022 starters proposed	Student applications 2022	University capacity 2022-2025	NHS and wider system placement capacity 2022-2025	Role integration into workforce 2025
<b>MENTAL HEALTH, LEARNING DISABILITY AND AUTISM</b>									
Child and Adolescent Psychotherapy	Commissioned			9	13	G	G	G	G
Clinical Psychology	Commissioned	78	97	121	161	G	A	G	G
IAPT Adult - High Intensity Practitioner	Commissioned	60	112	141	162	A	R	A	G
IAPT Adult - Psychological Wellbeing Practitioner (Low Intensity)	Commissioned	182	179	173	334	A	A	A	G
Learning Disabilities Nurse	Market-led	128	161	151	183	G	G	G	G
Mental Health Nurse	Market-led	774	1042	937	1094	G	G	G	G
<b>NURSING, MIDWIFERY AND ALLIED HEALTH PROFESSIONALS</b>									
Adult Nurse	Market-led	2703	3407	3301	3690	G	G	A	G
Anaesthesia Associate	Commissioned			Not forecast	30	G	A	A	G
Children's Nurse	Market-led	395	516	539	572	G	G	A	G
Dietician	Market-led	106	140	153	150	G	G	A	G
District Nursing	Commissioned	117	112	216	130	G	G	A	G
Health Visiting	Commissioned	70	89	90	120	G	G	G	G
Midwifery	Market-led	416	491	513	545	G	G	A	G
Occupational Therapist	Market-led	406	491	585	600	G	G	A	G
Operating Department Practitioner	Market-led	290	296	280	273	G	G	A	G
Orthoptist	Market-led	46	49	74	50	G	G	A	G
Physiotherapist	Market-led	568	687	756	700	G	G	A	G
Podiatrist	Market-led	61	84	89	96	G	G	G	G
Practice Nursing Block contract	Commissioned	268	266	Not forecast	50	G	G	A	G
Return to Practice - Nursing	Commissioned	76	74	83	150	R	G	A	G

Programme name	Commissioning route	FY 2019 starters	FY 2020 starters	FY 2021 starters projected at Oct 21	2022 starters proposed	Student applications 2022	University capacity 2022-2025	NHS and wider system placement capacity 2022-2025	Role integration into workforce 2025
School Nursing	Commissioned	41	45	45	60	G	G	A	G
Speech and Language Therapist	Market-led	135	180	251	260	G	G	A	G
Trainee Nurse Associates - Apprenticeship	Commissioned	268	266	Not forecast	752	G	G	A	A
Trainee Nurse Associates - Direct Entry	Commissioned	803	632	744	8	G	G	A	A
<b>PRIMARY AND COMMUNITY CARE: ORAL HEALTH</b>									
Dental Hygienists	Market-led			74	80	G	G	G	G
Dental Nurse	Commissioned	38	58	48	53	R	G	G	G
Dental Technicians	Commissioned	18	5	7	9	G	G	G	G
Dental Therapists Post Reg Foundation	Market-led	98	63	31	22	G	G	G	G
<b>PRIMARY AND COMMUNITY CARE: PHARMACY</b>									
Pharmacy - Foundation (previously pre-reg) (GP/PC)	Commissioned	12	15	15	15	G	G	G	G
Pharmacy - Foundation (previously pre-reg) (SC)	Commissioned	116	116	116	119	G	G	G	G
Pharmacy - Independent Prescribing (SC)	Commissioned	150	150	150	150	G	A	R	R
Pharmacy - Technician (GP/PC)	Commissioned	5	31	66	180	G	G	G	A
Pharmacy - Technician (SC)	Commissioned	56	92	94	179	G	G	G	A
Pharmacy Foundation (SC) Post Reg Diploma (22/23 figs YH only)	Commissioned	268	266	Not forecast	70	G	A	A	A
Undergraduate Clinical Pharmacy (previous B230)	Commissioned	312	341	408	1900	G	A	A	A
<b>PRIMARY AND COMMUNITY CARE: UEC</b>									
Paramedic	Market-led	379	422	549	568	G	G	A	G

Red, amber green rating in this table refers to the deliverability of this METIP plan only, not the status of overall current supply. In addition to the above: a separate nationally defined commissioning programme for Spending Review priorities including mental health will be aligned to regions in year; regional programmes are block commissioned providing Cytology and Public Health Practitioner training. This table is an extract from a full report on METIP 2022/23 which can be accessed [here](#).

## Annex 2: 2022/23 Budget

Budget	Budget Holder	£ million	What the budget pays for
Postgraduate Medical and Dental Contracts/NHS Education Contract	Nakita Kumar and Jon Cooper	404.82	Salary and placement costs for doctors and dentists in training, and leadership fellows, plus study leave allowance for trainees, professional support units to support trainees, and lead employer costs. The costs of the Pharmacy training programme.
Undergraduate Medical and Dental Contracts/NHS Education Contract	Kevin Moore	148.83	Clinical placement payments to Trusts and GP practices for undergraduate medical and dental students, plus education programme payments to medical schools
Clinical education	Kevin Moore	123.75	The training costs of university students on healthcare related courses including nursing and allied healthcare professional, including those on new and innovative programmes
New roles	Kevin Moore	17.37	
Workforce Development	Rachel Baillie Smith	12.59	Education programmes and infrastructure to support the development of the current workforce in Integrated Care Systems (ICSs)
Education Support including Primary Care Training Hubs	Namita Kumar	18.61	Salary costs of clinical faculty for time spent supporting training, salary costs for the management and administration of the training programmes (clinical and administrative staff), salary costs of staff working in the Quality (of placements) function. Associated non-pays (estates, travel etc). Primary Care Training Hubs
Running Costs	Mike Curtis	2.42	Salary costs of the management and administration of the regional team and associated non-pay costs.
<b>2022/23 Total</b>		<b>728.40</b>	