Introduction and NESC Update

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Drivers for Change

• **Ageing Population** and move to care closer to home

• Changing balance of **competition** between and within sectors due to economic changes

• **Innovation in technology** and **partnership working** reducing demand for some skills and increasing demand for others

• Pressure for a more **diverse workforce** to respond to increasing diverse society across Health & Social Care

• An increasingly tight **fiscal environment** (£20b in ‘savings’)

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NESC General Update: Corporate & Business Services

Health Innovation Clusters (HIEC)
  • Two PQQs submitted (North & South of patch)

Commissioner/Provider Split
  • Deaneries and ‘Chinese Walls’

Structure Systems and Processes Review inc. establishment and budget
  • Fit for purpose, productive & value for money

Balanced Scorecard (BSC)
  • Monitor quality of education provision by programme and by NHS organisation
NESC General Update: Corporate & Business Services

Risk Management Strategy (RMS)
- Risk policies and register integrated with SHA

Learning Development Agreements (LDA)
- All now signed and working on feedback from 1st meetings

Review and support for the MPET review.
- Actively engaged in national debate
NESC General Update: Education Commissioning

Education Commissioning for Quality Framework

- Defines excellence and the associated competencies and supports the development of capacity and capability in education commissioning;
- Provide a framework for the measurement of improvement in education commissioning (aligned to the SHA assurance framework).
- Provide a mechanism for SHAs to demonstrate value for money from education commissioning.

Learning Beyond Registration

- £6m contracts now with the University not named School/Faculty
- LBR opportunities have been extended to all band 5 – 9 staff
- From 2010 each Trust will be allocated 40% of the LBR budget as flexible funding.

Development of the Assistant/Associate Practitioner across SCSHA

- Increased demand for a generic Assistant/Associate Practitioner (AP), focused upon the Next Stage Review Pathways.

Development of Apprenticeships across SCSHA

- DH target of 324 new Apprenticeships by 31 March 2010 – will achieve 377!
NESC General Update: Education Commissioning

Libraries and E-Learning
• Since 1 April 2009, all NHS organisations in South Central have been receiving funding towards the cost of knowledge support services.

Learning Disability
• The ‘Valued People Project’ established in May has attracted national interest at the DOH. Recommendations: SCSHA consulting on developing a Regional Academy in Learning Disability Education which will provide specialist LD education at all levels

Modernising Scientific Careers
• South Central is hosting 2 Scientist Practitioner Trainees at the Churchill Hospital as part of the Genetics pilot.
• The DH ‘Deliberative Event’ for MSC in July was well-attended by South Central colleagues, and a ‘Next Steps’ statement is expected in November.
**NESC General Update: Deaneries**

**PMETB** - Visits to Oxford and Wessex

**Medical trainees** - 95% fill rate between Oxford and Wessex

**QAFFP** - (GMC and PMETB) visit to Oxford in Autumn

**GP’s**
- Taskforce: supported the expansion of 50 GP training practices across the SHA.
- GP Appraisal: NESC has now become the largest provider organisation for PCTs in the country.
- Practice Nurse training:

**Dental Trainees** - Creating another 24 additional DF1 (Vocational Training) places in for UK dental graduates who cannot work in the NHS without completing this programme.
NESC General Update: Innovation & Development

**New programmes**, special projects and research and development activities include:

- Consultant Practitioner Development scheme;
- Improving Global Health through Leadership Development;
- Clinical Academic Careers Project;
- Education Bursary Scheme;
- Ward Manager’s Assistant role;
- Preceptorship Framework;
- Public Health Practitioner Developments;
- Peripheral Line Training;
- The development and implementation of a standardised application process for General Practices who wish to become training practices.
NESC General Update: Workforce Strategy

Workforce Strategy
Collaboration with Local Authorities/Social Care
Medical workforce planning

Workforce Metrics

- Staff in post
- Total workforce
- Total pay costs
- Agency Cost rates
- Turnover
- Redundancies
You told us you wanted ...

Clearer & more involved role as stakeholders

• Stakeholder strategy: SEP, 1:1 with CE’s, DoN, LDA meetings; Strategic Partnership Meetings (N & S), PRAG, Bi-monthly meet Clinical Directors and Ass Dir Prog, regional HEI group (to be set up), Local Authority, possible Strategic Workforce Alliance

Easier & more effective ways to develop new courses

• We need to decide if NESC Courses Centre is provider or commissioner, for external courses.

Financial support from NESC to support Trust projects

• Clear process, and new template, for discretionary bids. Allocated in Qtr 1.
• Assurance for year on year funding (given financial climate).
You told us you wanted...

Put Service back in the driving seat
  • SHA clinically focused, new infrastructure with CDs

Plan workforce in Care Pathways
  • Workforce reports being developed with CDs for each care group area

Strategic Direction: bringing together future service delivery models – linking workforce, education & training
  • Bringing workforce into NESC, and *incorporating* education into ‘workforce’ strategy – future role as multi-professional commissioners