

Education Strategy

2019 - 2022

Driving and delivering education and practice development now and for the future



Contents

Foreword	3
Introduction	
Purpose	5
Current Position	e
Realising the Opportunities, Meeting the Challenges and Achieving our Objectives	7
Current risks	7
Workforce	g
Generational differences	11
New ways of working	13
Action and Objective Mapping	16
Roles and Responsibilities	22
Monitoring	22
Further Document Information	23



Foreword

There is a desire to share the knowledge that comes from being a leading cardiothoracic centre to improve patient outcomes locally, nationally and internationally. Education plays an essential role in sharing the knowledge and skills to enhance practice and develop the workforce for the future.

At Royal Papworth Hospital we strive for excellence in all we do, in providing specialist care to patient suffering from heart and lung disease. To enable us to do this we must provide education and training for our staff. By doing so we strive to ensure our staff feel valued, as good education and training doesn't only lead to better patient outcomes, it also provides staff with the tools in terms of knowledge and skills to do their jobs, improving resilience and staff retention.

As a specialist centre we also have a responsibility of sharing the knowledge locally, regionally, nationally and internationally and we wish to use our brand to enable this in the future. The Royal Papworth School is an ambitious objective to pool the resources within teams to build a sustainable education department fit for purpose and the future. The Heart and Lung Research Institute will be the new home for the education department when it opens next to the New Royal Papworth Hospital.

There are exciting opportunities that come from the Hospital move in the Spring of 2019, and we must capitalise on the opportunities the Biomedical Campus partners present. We also need to continue to contribute to and take opportunities that the Cambridge University Health Partnership brings.

The Education Strategy provides the direction for the development of education at Royal Papworth Hospital, ensuring an exciting future in sharing knowledge developed at the organisation by our outstanding teams.

Josie Rudman

Chief Nurse



Introduction

'Health care depends on people — nurses, porters, consultants and receptionists, scientists and therapists and many others. We can design innovative new care models, but they simply won't become a reality unless we have a workforce with the right numbers, skills, values and behaviours to deliver it.'

Five Year Forward View - CQC, HEE, Monitor, NHS England, PHE, TDA (October 2014)

The scale, pace and complexity of change in the NHS provides many challenges for any Trust to ensure that patients receive the best care, making it necessary to constantly, learn, develop and change. This Education Strategy sets out how Royal Papworth Hospital NHS Foundation Trust will ensure that the workforce has the right skills and knowledge to meet these challenges whilst continuing to deliver high quality care.

The goals are challenging but realistic with a focus to improve the quality of learning, education and training provision within Royal Papworth Hospital NHS Foundation Trust. The Strategy is aligned with our Trust's values:

- Leading with care
- Instilling innovation
- Feeling valued
- Encouraging excellence

Further to this, directly aligned with the Five Year Forward View is Leading Change, Adding Value; a framework for nursing, midwifery and care staff (NHS England, May 2016). One of the 10 commitments is:

"We will have the right education, training and development to enhance our skills, knowledge and understanding"

The Strategy sets out our ambitions for the next 3 years. We will continue to use it as a basis for our own decisions and actions, but will, in parallel, debate and discuss the assumptions and conclusions within it, so that as the healthcare landscape changes, we will continue to amend our assumptions and plans where appropriate.



Purpose

The aim is to:

 Provide excellent education, training and leadership and practice development to support the current and future workforce in delivering the best care for our patients.

Principal Objectives are to:

- 1. Establish our Trust as a nationally and internationally recognised centre of excellence in the provision of high quality cardiothoracic healthcare education and training;
- 2. Deliver education and training which directly benefits quality and safety;
- 3. Support and develop leadership capability and capacity;
- 4. Promote and support the personal and career development aspirations of our staff;
- 5. Support improvements to staff recruitment and retention.

In addition, the Trust vision and Strategy principle objectives reflect the <u>Health Education</u> <u>England Quality Framework 2017-18 Quality Standards</u>:

- 1. Learning environment and culture
- 2. Educational governance and leadership
- 3. Supporting and empowering learners
- 4. Supporting and empowering educators
- 5. Delivering curricula and assessments
- 6. Developing a sustainable workforce



Current Position

The Trust benefits from multi-professional, multi-directorate delivered education and practice development. There are specific teams under this umbrella led by senior professionals working closely with administrative support and across the directorates to ensure optimum utilisation of the resources available to meet both local and national education and training priorities. Through collaboration with directorate leads and links, all professional groups are supported both pre and post registration and the Trust enjoys an excellent reputation for the standard of training it delivers. Positive links between internal and external stakeholders and forums ensure the Trust remains cognisant of and responsive to the changing demands of the workforce and service needs.

Nevertheless there are opportunities for development and improvement in driving and delivering education and practice development that are reflective of both the national healthcare landscape and the very specific local considerations.

Reflective of <u>Health Education England's (HEE) Strategic Framework</u> and drivers, we recognise the following staff impact factors:

- Challenged staffing levels and increased patient acuity
- Skills development and mix
- Nationally and locally reduced student and qualified staff intake
- Increased reliance on overseas recruitment
- Generational differences and expectations in learning and development
- Increasingly transient workforce

We also recognise the following education and practice development delivery impact factors:

- Concurrent national and local clinical pressures
- Fragmented learning and development teams
- Resource limitations
- Changing learning environments
- Revised funding streams



Realising the Opportunities, Meeting the Challenges and Achieving our Objectives

Current risks

At a national level, Health Education England (HEE) continues to work with employers, employees and commissioners to identify the education and practice development needs of the current and future workforce, equipping them with the skills and flexibility to deliver new and emerging models of care, including the development of transitional roles. In order to become more sophisticated in this process there will need to be greater investment in workforce planning, role development realisation, training for existing staff, and in the active engagement of those clinicians and managers who are best placed to know what support they need to deliver these new and emerging models of care.

Following the national funding reform, from August 2017, NHS bursaries are no longer available to new nursing, midwifery and most allied health students. Prospective students wishing to follow traditional routes to professional registration must now access the student loans system, similar to other academic students. Despite a number of training institutions suggesting the reform has served to encourage higher quality applications and thus course completion rates may remain stable, the impact of this has already begun to be noticed with the Royal College of Nursing (RCN) reporting the number of domestic nurse training applicants having dropped by 5%, the biggest fall in recent years, and a 7% fall in applications from the EU. There is consequently greater emphasis in exploring alternative routes into professional practice, alongside a review of current role scopes and role development within the various professions.

At a local level education funding is exposed to the challenges to make ever increasing efficiency savings. On behalf of HEE, Health Education East of England (HEE EoE) provides the majority of finance for education within our Trust and is equally mandated to ensure it meets its own cost reduction requirements. In recent years, Royal Papworth Hospital has been reliant on the allocation of charitable funds to bridge the gap between reduced external funds, budgetary allowances and the provision of quality learning opportunities. Additionally, the introduction of Tariffs for the placement of undergraduate students (medical and non-medical) has increased competition amongst NHS, Private and Voluntary providers. The introduction of the apprentice levy has ring fenced funds to support educational activity; however there are currently significant limitations in supporting the access programs under the scheme and the range of programs currently available across professions. Therefore, in response to reduced levels of funding, Royal Papworth Hospital will need to make informed decisions relating to the prioritisation of financial investment in education and practice development provision as well as exploring its own additional income generation activity.

Historically, workforce planning, education commissioning and local training needs/skills gap analysis have not been comprehensively linked, either at national or local level. This has impacted on skills and knowledge development, the ability to support career development



and succession planning. There is a need to adopt a more multidisciplinary and Trust wide approach to the planning and provision of learning, education and training which supports both staff and patient care ensuring activity is aligned to key requirements in the delivery of high quality, safe patient services.

Locally, within our Trust, a significant issue impacting on professional development is the inability to protect sufficient time for learning, education and training interventions (for both the member of staff and the educator or supervisor). Increases in clinical activity and the challenges of skill mix within clinical environments makes it difficult for departments to release staff for training, resulting in a high level of non-attendance. The consequences are wasted resources and staff who have not been able to refresh or improve their skills and knowledge. The ability to protect learning time and maximise personal and professional development opportunities is also dependant on the effective scheduling of work activity and individuals' working patterns.

The physical infrastructure associated with learning, education and training provision is currently of a mixed standard across the organisation and, historically, has suffered as a consequence of a limited ability to plan, develop and improvement the ageing estate. Furthermore, the new Royal Papworth Hospital and Royal Papworth House sites are designed around the delivery of patient focussed clinical care – there is no direct provision for a protected training environment, except for working in collaboration with other partners on the Cambridge Biomedical Campus site where there are dedicated facilities

Our education and practice development provision must mitigate these shortcomings and risks

- Ensure regular and frequent reporting and discussion forums for lead educators and directorate leads/links
- Support the undertaking of structured training needs and skills gap analyses
- Develop quality metrics/dashboard to demonstrate training and education delivered to staff, trainees and students is of the highest standard, efficient, effective and positively impacts the quality of patient care
- Achieve full compliance with professional body commissioned, HEE and HEI education standards.
- Foster improved links between operational and workforce design and delivery and educational provision
- Ensure we value our trainers through personal development, adequate time in job plans, effective education infrastructure, constructive educational appraisal and creating the highest healthy educational environment.
- Develop teaching capability and sustainable capacity within the workforce, including:
 - education link roles



- clinical skills practitioners
- o consultants with accountable education time
- education fellows
- Further develop a robust process for the effective, transparent and equitable use of education and practice development funding
- Establish a strong administrative education structure to support education management and delivery appropriately resourced mirroring associated tariffs.
- Maximise the support and appropriate use of apprenticeship pathways
- Further identification and maximisation of income generation opportunities and efficient, effective processes to support education activity across the organisation
- Support the need for safe, protected learning environments and time
- Identify and access suitable clinical and non-clinical learning environments within the Cambridge and Huntingdon campuses
- Where practical, deliver training and education in the clinical learning environment. This will support keeping the clinical workforce in the workplace and allow clinical education staff to reach out into the practice areas

Workforce

The 2017 HEE draft health and care workforce strategy for England to 2027 sets out a national plan to help 'inform the conversation about what staff need; about what staff the health service needs, and how we shape the future we all want: a sustainable, free, universal healthcare system'. New professional workforce comes from four places; new graduates, returning practitioners, recruitment from elsewhere and internal development/grow your own pathways – however, with changes in entrants and access to these pipelines all healthcare professions are experiencing difficulties in recruitment both nationally and locally. For example, it is well publicised that there is a national shortage of qualified nurses; this has resulted in the Trust carrying a number of vacancies and the appointment of pre-registration (overseas) staff into Band 5 vacancies as Band 4 staff (while working towards obtaining their UK registration with the NMC).

The percentage of staff leaving their current employment or NHS as a whole for reasons other than retirement has been steadily increasing over the last 5-10 years (with a recent exception of medical staff). Nationally it is reported some of the increase in people leaving is due to the pressure of work, some because of lack of flexibility, some due to pay, and some because people feel they are not getting the career development they want. Locally the move of Royal Papworth Hospital to Huntingdon and Cambridge sites has also influenced people's decision to leave. Consequently there is an increased demand on supervising, mentoring and developing new staff, whilst maintaining safe service delivery.



The Greenaway Shape of Training review resulted in a number of changes to medical curricula and training. This includes core medical and surgical training with major new training programmes which will require implementation and alterations to the whole of training in medicine including ICU during the next 3 years. The surgical and anaesthetic training numbers will also change with challenges around how these will be met due to the requirement for more outpatient and theatre attendance by trainee doctors. This could expose gaps for covering patients on the ward but opens up opportunities to consider Advanced Practitioner roles and Physician Associate roles alongside the development of the peri-operative physician role. There is a clear move by HEE to migrate posts to large hub centres when training standards are not met. We have also faced a number of rota gaps due to low recruitment and the limit of Tier 2 visas which has temporarily been relaxed. We will need to consider the opportunities for combining medical and non-medical roles to ensure we minimise rota gaps and maximise training opportunities - whilst also supporting the same standard of care delivery and practice development at all times of the day and night. Royal Papworth is a unique training environment and we must ensure it allows young doctors to be inspired by our work and generate the consultants of the future. All of these challenges and opportunities will require careful planning, negotiation and implementation but should establish Royal Papworth as the premier place for trainee doctors where every learner is known and valued.

All Health Care Assistants are now required to undertake a Care Certificate (or demonstrate equivalent knowledge) before being permitted to work unsupervised. The increased drive to develop the Healthcare Support Worker (HCSW), through the advent of the Nursing Associate role and its professional registration also offers an increased scope of practice and opportunity for staffing template reviews.

There is a need to continue to deliver and support Modernising Scientific Careers training schemes across all healthcare science professions, including requirements for registration and continuing professional development.

In conclusion, there will be a need to implement a continuous cycle of workforce and skill mix review, developing and integrating new and existing roles, where they add value, into the current and future workforce. The predicted NHS funding gap and the desire for enhanced and advanced scopes of practice will increase pressure to drive down costs whilst improving quality, defragmenting service delivery and releasing time to care. This will require the identification and mobilisation of advanced practice opportunities and development of a workforce that undertakes activities currently provided through other professions. New roles and different ways of working need exploration, development and embedding into the organisation.



 Our education and practice development provision must be responsive to the workforce demands and shape efficient and effective delivery across the professions.

To do this we will:

- Respond to national developments in workforce to be vanguards for new roles and training such as Advanced Care Practitioners, credentialing of new skills and roles
- Support recruitment and retention pipelines including:
 - Overseas staff development
 - Apprenticeship pathways
 - Grow your own programs
 - Student and learner practice placement
 - o Student and learner preceptorship and mentoring/supervision
 - Return to professional practice pathways
- Grow medical elective program so as to attract high calibre students from across the globe
- Maximise opportunities to extend our involvement and practice placement across all years of the pre-registration learner
- Ensure all students are integral and valued members of the team
- Support training and develop to support a more flexible workforce with readily transferable skills
- Further explore medical staff supervision needs and provision
- Ensure delivery of statutory training programs for HCSWs
- Support the development of the Band 4 practitioner and nursing associate roles
- Work in partnership with the Trust Lead Scientists to help develop healthcare science staff in accordance with the Modern Scientific Careers pathways
- Support the development and delivery of an advanced practice strategy identifying education pathways to support the identification and creation of new roles and their integration into the workforce, including:
 - Advanced practitioners
 - Specialist practitioners
 - Enhanced practice roles
 - Non medical consultants
 - Professional doctorates
- Identify and maximise potential education and development synergies with associated Trust strategies

Generational differences

'Mind the Gap - Exploring the needs of early career nurses and midwives in the workplace' (2015) highlights the generational concepts that require consideration if we are to appropriately support individuals as they begin and continue their professional careers – whilst the focus of the report is nurses and midwives, the generational observations may be extrapolated across all professions. Three generations are working in health with stark differences between them in expectations, perceptions, and motivations. These differences



matter - understanding and responding to differing motivational needs improves recruitment, retention and career development.

In this context staff need a clear pathway of progression and be supported to achieve through personal/professional development that is representative of their different professional and generational needs. There is a greater importance attached to employer-supported training, continuing personal and professional development, career progression planning, mentorship and preceptorship.

Forecasters predict that, by 2020, millennials (sometimes referred to as 'generation Y') will account for half of the global workforce, whilst many more generation Z (the generation after 'generation Y') employees will have entered the job market. The emerging traits associated with this latter group are that they are highly self-directed digital multi-taskers who value personal freedom, and who will seek progressive and supportive work environments. They are also likely to spend more time changing jobs than their more senior work colleagues.

It is equally important to note, as well as concentrating on training new staff, it is critically important to focus on our current workforce and their on-going development needs. Data indicates more than 50% of today's workforce will still be working in the health service in 2032.

The implications of these generational differences are multifaceted and are an essential consideration for future proofing the attraction, recruitment, development and retention of our staff.

 Our education and practice development provision must acknowledge generational differences ensuring the individual has access to supported learning opportunities appropriate to their preferences, profession and experience

To do this we will:

- Support the assessment, planning and monitoring of delivery of core and mandatory training
- Support the safe, standardised induction of new staff
- Support the delivery of high quality mandatory training in a manner practical for Royal Papworth and fit for purpose
- Further explore and map passporting of prior learning and experience
- Embed a culture of mentoring, supportive supervision and appraisal for all doctors in training whether HEE or Locally Employed Doctors to ensure proper governance and safety.
- Enable staff supporting the learner to have sufficient resource, training and knowledge to be responsive to learning needs and learning environment



- Recognise the needs and encourage flexibility in education and practice development delivery
- Support the advancement of multi-modal learning opportunities, including the use of digital platforms
- Support career pathway mapping and succession planning
- Support all staff in accessing education, training and development to meet their requirements for continuous professional development

New ways of working

Amongst our workforce and within our local environment there is a growing demand for a more flexible approach to be applied to education and practice development; typically education and practice development which is accessible anywhere, anytime, through a variety of channels. Additionally, individuals now also place a greater value on undertaking learning that is accredited or credentialed.

Higher Education Institutions (HEIs) continue to develop different training methodologies and programs of study, from standalone modules to professional doctorates. There is an increased pressure to be responsive to the purchaser of the study programmes with an increasingly favourable buyers' market. These changes provide opportunity for Trusts to work collaboratively to shape current and future academic programs and complement these through accessing individual employer/professional body delivered learning and development sessions.

We have also recognised a substantial increase in the desire for distance learning, elearning, and simulation training. The use of social learning networks is also expanding. Since networking can offer one of the most effective ways in which to develop learning capability, there is significant potential value in building connections with those who can both share insight and challenge thinking. Furthermore, many organisations are moving towards the use of the 70/20/10 delivery model and utilising blended learning methods. The 70/20/10 concept centres around the idea that the majority (or around 70%) of learning comes through experience, around 20% comes from social learning with colleagues and just 10% through formal learning such as classroom training or online courses. The three components of the 70/20/10 model reinforce one another, helping to promote new and sustainable behaviours, leading to improved performance.

There is a growing shift towards creating a 'learning culture', with the increased use of internal knowledge-sharing events, job rotation, secondment and shadowing, action learning sets and collaborative learning. Learners now expect to have greater control of their learning, reflecting the need for agility and flexibility in meeting bespoke individual needs. In-house methods of delivery remain more popular than external and are expected to grow further in use.

Additionally, the introduction of the Apprenticeship Levy has ring fenced funds to support education and practice development. Alongside financially supporting study programs, the scheme ensures the learner has protected time to undertake the study. Our current focus in utilisation of the levy is through healthcare support worker development and entry into the registered nurse profession.



Since 1918, Royal Papworth Hospital has built an incredible reputation as one of the best heart and lung hospitals in the world. The move to the Cambridge Biomedical Campus from April 2019, to a building designed and built to meet the highest international standards with state-of-the art facilities to enhance the patient experience and support staff to achieve excellence in their everyday work will further support recruitment and retention of expert staff involved in cutting edge treatments and leading research and development.

Its location places the hospital at the centre of a concentrated hub of medical science and innovation and further builds our partnership with Cambridge University Health Partners. With its renowned cardiothoracic expertise, Royal Papworth Hospital joins a growing list of world-leading clinical and scientific organisations on the campus, including:

- Astra Zeneca's new global and Research and Development headquarters
- Cambridge University Hospitals Addenbrooke's and the Rosie
- The Medical Research Council Laboratory of Molecular Biology
- GlaxoSmithKline Clinical Trial Unit
- NHS Blood and Transplant
- The Cancer Research Institute (Cancer Research UK/ University of Cambridge)
- National Institute of Health Research Cambridge Biomedical Research Centre
- The Milner Therapeutics Institute and Consortium
- Cambridge Health at Work
- Cambridge University Clinical School
- Abcam
- Cambridge Academy of Science and Technology

It is our intention to continue close collaboration with our current health and education partners, including Cambridge University Medical School for medical student and staff training, Anglia Ruskin University for student nurse training, clinical apprenticeship delivery and continued professional development, University of East Anglia for allied health professional training and continued professional development, Health Education England and Cambridge University Health Partners for professional development, the NHS Leadership Academy for leadership, management and development training; alongside other key external suppliers of specialist education and training.

As part of the ambition to be a leading cardiothoracic education centre, the Trust would like to contribute to and share knowledge of cardiothoracic care and treatment across the region, nationally and internationally. To continue to build on the portfolio of developments already in place by bringing together the education and professional development teams under one umbrella of the Royal Papworth School to provide structured education for existing staff and visiting professionals. This ambition includes capitalising on the Heart and Lung Research and education Institute project which is to be built next to the New Royal Papworth Hospital, by utilising the facility to bring together clinical academics to provide a learning environment to match the proposed research environment. This will include working with existing partners (Cambridge University and Cambridge Universities Health Partners) and building new relationships with Higher Education Institutes.



Our education and practice development provision must support flexible and innovative delivery to ensure individuals receive the right evidence based learning, in the right place, in the right way at the right time

To do this we will:

- Continue to build on the portfolio of developments already in place by bringing together the education and professional development teams under one umbrella of the Royal Papworth School to provide structured education for existing staff and visiting professionals
- Strive to achieve the highest nationally recognised standards for our cardiothoracic training programmes as measured through our professional surveys.
- Build on the current Foundation and Core Training Programmes to embed the GMC, AoME, Royal College and curriculum standards for training alongside a teaching programme with enhanced procedural exposure to exceed HEE requirements.
- Collaborate closely and where synergies exist to combine multiprofessional education activities across the Biomedical Campus working towards integration alongside strong partnership within the CUHP.
- Further develop accreditation and credentialing of current and future training and development programs
- Develop link, lecturer practitioner and fellow roles with local HEIs
- Promote collaborative working with training and development delivery across local Trusts and partner organisations
- Increase the use of simulation and clinical scenario based training
- Work collaboratively with our Digital partners to develop appropriate learning opportunities on a flexible, remotely accessible, digital platform
- Explore the advanced use of technology to deliver training in the workplace, including:
 - Virtual learning environments
 - e-learning modules
 - o approved apps on PCs, tablet devices and smartphones
- Develop educators in practice resource base and ability to deliver mobile, flexible learning opportunities
- Foster a culture of reflective practice, encouraging the sharing of learning from the workplace with other professionals
- Promote and support education and practice development research opportunities
- Further develop our representation and presentation at local, national and international education and development forums, encouraging the reporting from and sharing of learning
- Explore learning and development opportunities within the apprenticeship program, trailblazing where need is identified
- Increase number of bespoke SSC / SSP projects to attract increased number of students and enable quality improvement and research activities
- Build upon the provision for externally deliverable programs to support sustainable income generation and increase grant income for education projects
- Through sustainable income generation and appropriate use of accessible funds, create an education fund to offer support for innovative education initiatives.



Action and Objective Mapping

Our principle objectives are set out above and referenced below and as we deliver on our strategy we will seek to demonstrate their impact on the development of our organisation and how they contribute to wider national agenda. We will aim to deliver this strategy by aligning key annual activities, performance targets and resources to the objectives identified and develop an action plan for phased delivery:

Our Principle Objectives

- 1. Establish our Trust as a nationally and internationally recognised centre of excellence in the provision of high quality cardiothoracic healthcare education and training;
- 2. Deliver education and training which directly benefits quality and safety;
- 3. Support and develop leadership capability and capacity;
- 4. Promote and support the personal and career development aspirations of our staff;
- 5. Support improvements to staff recruitment and retention.

Health Education England Quality Framework 2017-18 Quality Standards:

- 1. Learning environment and culture
- 2. Educational governance and leadership
- 3. Supporting and empowering learners
- 4. Supporting and empowering educators
- 5. Delivering curricula and assessments
- 6. Developing a sustainable workforce



Action Objective			ion S le Ol			HEE Quality Standard						
	1	2	3	4	5	1	2	3	4	5	6	
 Ensure regular and frequent reporting and discussion forums for lead educators and directorate leads/links 		✓		✓		✓	✓	✓	✓			
 Support the undertaking of structured training needs and skills gap analyses 		✓		✓	✓	✓	✓		✓	✓	✓	
Develop quality metrics/dashboard to demonstrate training and education delivered to staff, trainees and students is of the highest standard, efficient, effective and positively impacts the quality of patient care		√	√	>	✓	✓	√		✓	√	✓	
 Achieve full compliance with professional body commissioned, HEE and HEI education standards. 	>	✓				~	~			✓		
Foster improved links between operational and workforce design and delivery and educational provision	✓	~		✓	✓	✓	√	✓	✓	✓		
 Ensure we value our trainers through personal development, adequate time in job plans, effective education infrastructure, constructive educational appraisal and creating the highest healthy educational environment 			√	,	√	√	√	✓	✓			
 Develop teaching capability and sustainable capacity within the workforce, including: education link roles clinical skills practitioners consultants with accountable education time education fellows 	√	✓	✓	✓	√	✓		✓	✓	✓	√	
 Further develop a robust, process for the effective and equitable use of education and practice development funds 		✓	✓	✓	✓	✓	✓	✓	✓		√	
 Establish a strong administrative education structure to support education management and delivery - appropriately resourced mirroring associated tariffs. 	✓		✓	✓		✓	✓	✓	✓	✓		



Action Objective				trate oject	•	HEE Quality Standar						
	1	2	3	4	5	1	2	3	4	5	6	
 Maximise the support and appropriate use of apprenticeship pathways 	✓	✓		✓			✓	✓		✓	✓	
 Further identification and maximisation of income generation opportunities and the efficient, effective processes to support education activity across the organisation 	✓		✓	✓ 	✓		✓			✓	✓	
 Support the need for safe, protected learning environments and time 	✓			✓	✓	✓	✓	✓	✓	✓	✓	
 Identify and access suitable clinical and non-clinical learning environments within the Cambridge and Huntingdon campuses 	✓	✓		√	>	~		√	✓	✓		
 Where practical, deliver training and education in the clinical learning environment. 	✓	✓		✓	✓	✓		V	✓	✓		
 Respond to national developments in workforce to be vanguards for new roles and training such as Advanced Care Practitioners, credentialing of new skills and roles 		*	>	V	>			✓	✓		✓	
 Support recruitment pipelines including Overseas staff development Apprenticeship pathways Grow your own programs Student and learner practice placement Return to professional practice 	√	√		✓	✓	✓	✓				✓	
 Grow medical elective program so as to attract high calibre students from across the globe 	✓	✓		✓	✓	✓		✓	✓	✓	✓	
 Maximise opportunities to extend our involvement and practice placement across all years of the pre-registration learner 	✓	✓		√	✓	√		✓	✓	✓	✓	
 Ensure all students are integral and valued members of the team 	✓		✓	✓	√	✓	✓	√	✓		✓	
Support training and develop to enable a mobile workforce		✓		✓	✓	✓		✓		✓	✓	



Action Objective			ion S le Ol			HEE Quality Standard							
	1	2	3	4	5	1	2	3	4	5	6		
Further explore medical staff supervision needs and provision	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓		
Ensure delivery of statutory training programs for HCSWs	✓	✓				✓	✓	✓	✓	✓	✓		
 Support the development of the Band 4 practitioner/nursing associate 	✓	✓		✓	✓	✓		✓		✓	✓		
 Work in partnership with the Trust Lead Scientist to help develop healthcare science staff in accordance with the Modern Scientific Careers pathways 	✓	>		>	✓	✓	✓			✓	√		
 Support development and delivery of an advancing practice strategy, including: Advanced practitioners Specialist practitioners Enhanced practice roles Non-medical consultants Professional doctorates 	~	✓	~	V	✓	√	~	Y	✓	✓	√		
Support the safe, standardised induction of new staff		✓	✓	~	V	✓	✓	✓	✓		✓		
 Support delivery of quality mandatory training in a manner practical for Royal Papworth 		√		✓	✓	✓	✓	✓	✓	✓	✓		
Further explore and map pass-porting of prior learning and experience	√		✓		✓	✓	✓	✓			✓		
 Embed a culture of mentoring, supportive supervision and appraisal for all doctors in training whether HEE or Locally Employed Doctors to ensure proper governance and safety 	✓		✓	✓	✓	✓	✓	✓	✓		✓		
 Enable staff supporting the learner to have sufficient resource, training and knowledge to be responsive to learning needs and learning environment 	✓	√	√	√	✓	✓	√	✓	√	✓	✓		
 Recognise the needs and encourage flexibility in education and practice development delivery 	✓	✓	✓	✓	✓	✓		✓	✓	✓			
Support career pathway mapping and succession planning			✓	✓	✓	✓	✓	✓		✓	✓		



Action Objective			ion S le Ol		-	HEE Quality Standard						
	1	2	3	4	5	1	2	3	4	5	6	
 Support all staff in accessing education, training and development to meet their requirements for continuous professional development 	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	
 Continue to build on the portfolio of developments already in place by bringing together the education and professional development teams under one umbrella of the Royal Papworth School to provide structured education for existing staff and visiting professionals 	✓	√	✓	~	✓	√	✓	√	√	√	✓	
 Strive to achieve the highest nationally recognised standards for our cardiothoracic training programmes as measured through our professional surveys. 	~	~	\	~	✓	√	>	>	✓	✓	✓	
Build on the current Foundation and Core Training Programmes to embed the GMC, AoME, Royal College and curriculum standards for training alongside a teaching programme with enhanced procedural exposure to exceed HEE requirements.	>	✓	✓	Y	√	√	✓	√	√	✓	✓	
 Collaborate closely and where synergies exist to combine multiprofessional education activities across the Biomedical Campus working towards integration alongside strong partnership within the CUHP 	√	✓	✓	✓	√	√	✓	√	✓		√	
 Further develop accreditation and credentialing of current and future training and development programs 	✓			√	✓		✓	✓	✓	✓	✓	
Develop link, lecturer practitioner and fellow roles with local HEIs	✓		✓	✓	✓		✓		✓	✓	✓	
 Promote collaborative working with training and development delivery across local Trusts and partner organisations 	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	
 Increase the use of simulation and clinical scenario based training 	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	



Action Objective		Education Strategy Principle Objective						ualit	y Sta	ında	rd
	1	2	3	4	5	1	2	3	4	5	6
 Increase the use of technology to deliver training in the workplace, including e-learning apps on PCs and mobile devices 	✓	✓		✓	✓	√		√		✓	✓
 Develop educators in practice resource base and ability to deliver mobile, flexible learning opportunities 	✓	✓	✓	✓	√	✓	✓		✓	✓	
 Foster a culture of reflective practice, encouraging the sharing of learning from the workplace with other professionals 	✓	√	✓	√		✓	✓	✓			✓
 Promote and support education and practice development research opportunities 	V	✓	✓	✓	~	Y	✓	✓			
 Further develop our representation and presentation at local, national and international education and development forums 	✓		>	V	✓	√	✓	V	√		
 Explore learning and development opportunities within the apprenticeship program, trailblazing where need is identified 	V	✓	~	>	Y	✓	√	✓	✓	√	✓
Increase number of bespoke SSC / SSP projects to attract increased number of students and enable quality improvement and research activities	~	✓		√	✓	√	√	√	√		
Build upon the provision for externally deliverable programs to support sustainable income generation and increase grant income for education projects	√		√	✓	√			✓	√	✓	✓
Through sustainable income generation and appropriate use of accessible funds, create an education fund to offer support for innovative education initiatives.		✓	✓		✓		✓	✓	✓		✓



Roles and Responsibilities

Quality and Risk Committee

Ratify the strategy and support delivery

Chief Nurse

Accountable for the delivery of the strategy

Deputy Chief Nurse

Responsible for supporting Education Steering Group members to deliver the strategy

Education Steering Group (ESG)

To support and monitor the delivery by receiving reports and challenging where required. ESG will sign off annual reporting and agree changes in application of the strategy.

ESG Members

To lead on the delivery of the Principle Objectives. Provide updates to ESG as appropriate.

All Staff

To understand how they can contribute to the overall strategy, and how it can help them in developing themselves for succession planning and working towards advanced practice if appropriate.

Monitoring

Quarterly

- ESG
- Update on progress in written report / mapped progress against principle objectives
- Links to associated strategies
- ESG members

Annually

- Update in form of report
- Q&R
- Board Annual Report
- Chief Nurse
- Deputy Chief Nurse
- ESG Members



Further Document Information

Approval – this is required for all documents.	Education Steering Group							
Approval date (this version)	4 th September 2018							
(Day, month, year):								
Approval by Board of Directors or Committee of the Board (required for Strategies and Policies only):	Quality and Risk Committee							
Date (Day, month, year):	dd mmm yyyy							
This document supports: standards and legislation – include exact details of any CQC & NHSLA standards supported	HEE Quality Standards							
	Study Leave Procedure							
	Medical Staff Study Leave Procedure							
	Consultant Medical Staff Study Leave Procedure							
	Five Year Forward View							
	Facing Facts, Shaping the Future							
Key associated documents:	Shape of Training review							
	Advanced Practice Strategy							
	Work force plan							
	Digital strategy							
	Health & Safety Policy							
	Induction & Mandatory Training procedure							

Counter Fraud In creating/revising this document, the contributors have considered and minimised any risks which might arise from it of fraud, theft, corruption or other illegal acts, and ensured that the document is robust enough to withstand evidential scrutiny in the event of a criminal investigation. Where appropriate, they have sought advice from the Trust's Local Counter Fraud Specialist (LCFS).