**Education, Training and Workforce Development Strategy**

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<th>Trust Board Meeting - Part 1</th>
<th>Item: 8.3</th>
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<td>29th January 2014</td>
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**Purpose of the Report:** To present the Education, Training and Workforce Development Strategy for discussion and approval

**FOR:** Information  ☑ Assurance  ☑ Discussion and input  ☑ Decision/approval  ☑

**Sponsor (Executive Lead):** David Grantham

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**Financial/Resource Implications:** None

**Risk Implications – Link to Assurance Framework or Corporate Risk Register:** Risk regarding staffing

**Legal / Regulatory / Reputation Implications:**

**Quality Governance Implications:** Education and training supports high quality services

**Link to Relevant CQC Standard:** CQC standards 12, 13 & 14

**Link to Relevant Corporate Objective:** 1, 3 & 5

**Impact on Patients and Carers:**

**Document Previously Considered By:** HR and education teams, EMC

**Recommendation & Action required by the Trust Board:**

The Trust Board is invited to discuss and approve the Education, Training and Workforce Development Strategy, with any amendments suggested.
EDUCATION, TRAINING AND WORKFORCE DEVELOPMENT STRATEGY

2014 – 2018

Introduction

The Trust values the importance of education and training both to develop its own workforce to support the delivery of high quality care on a sustainable basis, and to play a part in the wider training of the future NHS workforce. Significant education and training also supports the creation of a learning culture so that the organisation keeps itself up to date with academic and research developments informing innovation and improvement in care and delivery to benefit patients and staff.

To support the Trust in ensuring its continuing role in education and training in an increasingly competitive environment and to set out the priorities for the next few years the attached education and training strategy has been developed. The strategy sets out the context in which education and training will develop, some of the challenges and priorities for action. An Education and Training Committee is proposed to oversee the Trust’s activities in this area and delivery of the strategy.

The Executive Management Committee and staff in education and training have been engaged in the development of the strategy which is brought to the Board for approval.

Recommendation

The Board is asked to approve the attached Education and Training Strategy, subject to any amendments required.
1. MISSION AND VISION

Kingston Hospital NHS Foundation Trust is committed to using education and training to develop its workforce to support the fulfilment of its mission and vision to:

• To improve the health and wellbeing of our community through the provision of high quality, patient focused healthcare.

• To be the Hospital of choice for our local community, recognised for excellent and innovative emergency, surgical, acute medicine and maternity services, delivered by caring and valued staff.

Education and training play a crucial part in developing and retaining a high quality and motivated workforce, ensuring staff are fit and safe to practice, are as effective as possible in their roles, up to date with the latest learning and best practice and continuously developing their skills whatever their area of work or level of responsibility. This Education, Training and Workforce Development strategy sets out the Trust’s priorities and how it will use its resources over the next 3 years to support education and training that will act as an enabler to delivery of the Trust’s objectives.

2. CONTEXT

Local context

The Trust is a high performing District General Hospital in South West London. As at 31 March 2013, the Trust had an established workforce of 2,592 and employed a total of 2,327 whole time equivalent (WTE) staff members across all groups including nursing and midwifery, medical and dental, administrative and clerical, ancillary and management. Amongst this workforce there are staff in training positions (eg junior doctors) that will be part of the workforce while they complete professional training. The Trust also provides student placements in a number of disciplines.

The Board approved a refreshed workforce strategy in November 2012 and this set out the Trust’s ambition to be a great employer – involving, supporting, developing and valuing its staff. Achieving this will support the Trust in realising its plans, improve the experience of both patients and staff and help the Trust to become a ‘best in class’ performing organisation.
The Trust's key priorities for action in developing the workforce are:

**Strengthening people management:** so that all staff feel they get good management. Good management practice needs to be defined and managers provided feedback from their staff to help them improve;

**Leadership development:** to support the Trust's leaders in nurturing the Trust's values, providing positive leadership and inspiring and developing the Trust and its service;

**Team working:** clarifying the role of team working in delivering safe, effective high quality care, the membership of teams and the importance of providing mechanisms and times for teams to meet to reflect on performance and improvement;

**Service line management:** to support local control, ownership and accountability; and,

**Wellbeing of staff:** supporting staff to look after their health and wellbeing, helping them lead a fulfilled life with exercise, learning, connections and community.

The Education, Training and Workforce Development strategy needs to support delivery of these key priorities. The Trust also has a number of other strategies and goals that are dependent upon good education, training and workforce development:

- Quality goals – that are supported by skills development
- Commercial strategy – that requires business skills and acumen amongst staff
- Risk management strategy – ensuring risks are identified and, where appropriate, training is used to mitigate these (e.g. health and safety)

The Trust must also continue to fulfil its contracts and commitments for the delivery of training placements for students and trainees to a high standard. For doctors these placements are mostly commissioned from a ‘lead provider’ (usually St George’s Healthcare) with the Trust acting as a ‘sub-contractor’ in the provision of a proportion of the overall training placements commissioned.

Education and training can be used to support skills development and the creation of new or enhanced roles that can help the Trust deliver more cost effective care through changes in skill mix as it wrestles with the challenge of reducing cost and maintaining and improving service quality. The Trust has a CIP requirement of around 6% each year.

Staff that receive education and training and feel that they are the beneficiaries of investment in their development are also likely to be better motivated and less inclined to leave the organisation. The Trust’s promotion of and investment in education and training, if carefully planned, can help reduce staff turnover and associated costs or recruitment, induction and potential discontinuity within teams and services.

**National Context**

Support for education and training has been reorganised as part of the NHS changes in 2013. Responsibility for commissioning training and development programmes for future health professionals has become the responsibility of Health Education England and its network of Local Education Training Boards (LETB). The Trust is a member of...
the South London LETB, which is now called Health Education South London (HESL). The aim of HESL is to gain better value from the funding available for education and training by encouraging a more integrated approach to delivery and a closer alignment between the commissioning of training with the future workforce and development needs of providers in both secondary and primary care.

There is pressure on training budgets for efficiency savings as much as there is pressure on operational budgets and this is unlikely to change over the period of this strategy.

Nationally there are proposals to re-organise the training of the future medical workforce that will re-direct doctors into GP training. This is expected to reduce the number of hospital placements required. There is also a reduction in the number of surgical trainee placements taking place in 2014 and onwards reflecting an anticipated oversupply of trained surgeons. In the longer term the ‘Shape of Training’ review has proposed reforms to medical training increasing generalist training with specialist training undertaken in broad based specialty groupings (eg women and child health) and providing for greater transfer and recognition of skills, knowledge and competencies between specialties. These reforms are likely to take several years to be implemented.

Learning and development is also identified as a key support for developing the right cultures within NHS organisations in the reports on patient safety and quality of services arising from the Mid-Staffordshire Enquiry (Francis) report¹.

3. CURRENT ACTIVITY AND DELIVERY

The Trust’s education, training and workforce development activity is undertaken in the following main areas:

*Post-Graduate Medical Centre (PGMC)*

The centre supports the delivery of undergraduate and postgraduate medical training placements and delivery of medical training programmes. Professional leadership is provided by the Director of Medical Education supported by local Educational Supervisors and Clinical Supervisors. The PGMC also administers funds for consultant and Staff and Associate Specialty (SAS) doctors study leave. It has also recently taken on the role of supporting both junior and consultant medical staff in administering e-portfolios and appraisal records for the purposes of re-validation. The Local Education Faculty Group (LEFG) meets to oversee delivery of the medical training programmes and receive reports and feedback such as the GMC junior doctors survey or feedback from inspection visits. Funding for the PGMC’s activities supporting junior doctor placements comes from the training placement commissioners.

¹ Francis Inquiry into Mid Staffordshire NHS Foundation Trust reports, Keogh Mortality Review, Berwick Report *A promise to learn – a commitment to act, Improving the Safety of Patients in England*
Overall the Trust’s medical and dental postgraduate and undergraduate training accounts for some £6 million of income for infrastructure, staffing and salary support for trainees. Increasingly payment will be tied to outcomes and quality measures.

Library and Knowledge Service (Stenhouse Library)

This provides a central resource of information and learning for all staff and students working on a network basis with other services in neighbouring Trusts. Funding is provided as part of training commissioning. The Library has a joint strategy to support service delivery agreed with Croydon Healthcare and Epsom and St Helier Hospital NHS Trusts’ services. The strategy envisages joint working and collaboration on using information resources.

Clinical Skills Team

The Trust’s mandatory training and core clinical skills training is provided by this team (including resuscitation, medical devices and manual handling). They also offer training and courses externally. In recent years the Trust’s mandatory training offering has been developed to make use of on-line e-learning (‘learn on-line’) as much as possible to reduce the need for face to face training. The capture of training status/records has also been improved using the Electronic Staff Record (ESR) to hold training data. The Trust is now better able to report on training fulfilment and, therefore, individuals’ fitness to practice/work. The Mandatory Training programme is overseen by the Mandatory Training group and subject matter experts (SMEs) for each area.

The simulation centre and mock ward environments have also been developed (with the PGMC) to provide a better and more realistic training experience.

Bands 1-4 development (including HCAs and apprenticeships)

The Trust runs a number of programmes supporting training in bands 1-4 including a specific programme for HCAs with a designated coordinator role. This role also provides support for a small apprenticeship programme.

People management skills

Training on core people management skills is offered by the HR Department. The Trust does not operate an accredited general management training programme.

Leadership training to support Service Line Management (SLM)

This is a new programme commissioned by the Chief Executive to support the development of the Trust’s senior leadership team to deliver service line management and support the Trust’s development. It will be delivered over 2014 – 18 with the support of Ashridge. The programme commenced on 22 January 2014. There is a complementary programme of work planned with corporate services on business partnering (supported by the Beech Consultancy).
Occupational Health and Wellbeing

There is training on stress management and resilience provided by the Psychological Wellbeing Service (PWS) to teams across the Trust and for managers on stress risk assessments. This is part of a range of training and other interventions to support staff psychological wellbeing.

External to the Workforce Directorate there is internal training and development provided by:

Nurse training and development placements/sponsored training – administered by the Nursing Directorate (with external funding support)
Ward sisters development programme – commissioned by the Nursing Directorate
Practice Development Nurses – to support the development of nursing skills
Infection Control Team – safe hygiene, isolation etc
New consultant development programme – run by the Medical Director
IT skills and CRS training – provided by the IMT Directorate
Financial and budgetary management – provided by the Finance Directorate

Additionally Trust staff have access to programmes offered externally and commissioned or provided by external NHS training and development providers, such as the NHS Leadership Academy programmes.

There is also a significant amount of education, training, learning and development that goes on in the organisation that is not run centrally or coordinated. Many clinical services have their own specialist ‘in-house’ training and many of the professions develop their own programmes (eg finance and HR professional development, midwifery ‘focus days’ etc).

4. ISSUES AND CHALLENGES

The issues and challenges in delivering education, training and workforce development are different depending upon the type of intervention being provided. An overall SWOT analysis is at Appendix 1. Looking at each core area of training and development the Trust is currently providing the issues are as follows:

Medical education - the key issues here are:
• Growth in administration (e-portfolios and information requirements for revalidation) requiring additional support
• Greater governance and accountability requiring new skills within the PGMC team (project management, reporting etc)
• Uncertainty regarding future junior doctor training commissions
• Achieving clarity of the funding and support provided for medical education and its distribution within the Trust

Nurse education and development
• Developing nurse leadership and core management skills for good ward management (eg rostering)
• Release of staff from patient facing work for training and development

Mandatory Training
• Capacity to design and develop good high quality on-line materials
• Difficulty securing a culture of routine compliance
• Developing a ‘competence is assessed’ (e.g., observed) approach

Clinical skills
• Optimising simulation
• Managing the capacity for training effectively (reducing DNAs)
• Enhancing training delivery and the user experience (‘training the trainers’ who are often SMEs rather than trainers)

Bands 1-4 development
• Extending the focus beyond HCAs
• Liaison and coordination with nursing on HCAs

People management
• Ad-hoc nature of training offered – it is not a programme but a ‘pick and mix’
• Managers not taking advantage of the training
• Coordinating in-house expertise to train (e.g., business skills)

There are some overall issues that are apparent:
• Coordination and development of an integrated approach to training
• Reducing silo working between the areas
• Developing a stronger ‘needs based’ approach to training (better assessment of need and sharing of performance issues and data to inform this)
• Sharing best practice training and delivery techniques (developing all our trainers)
• Need for stronger evaluation measures and systematic feedback to inform measures of effectiveness.

The Trust strategy proposed below is intended to tackle these issues by identifying five key strategic priorities for education, training and workforce development and some specific objectives under each.

5. THE TRUST’S STRATEGY

There are five strategic objectives the Trust is seeking to achieve in education, training and workforce development:

1. To manage education, training and development activities effectively and efficiently, based on the needs of the Trust, and in a manner that supports its other strategic aims and objectives and culture.
2. To support continuous learning for all, which underpins the development of the whole workforce and delivery of care by staff who are supported to thrive and flourish and are always able to give their very best.

3. To cultivate leaders and managers capable of embedding education, training and development into practice, to support quality, safety, clinical governance, service development and a learning culture.

4. To foster strategic alliances and partnership working and, where appropriate, integration with others to support the delivery of training and development that has greatest impact and benefit and maximising opportunities for shared learning.

5. To deliver education, training and development that is continually quality assured, meets required standards and ensures that all sources of funding are used effectively, efficiently and appropriately.

6. HOW THE STRATEGY WILL BE DELIVERED

Strategic objective 1: To manage education, training and development activities effectively and efficiently, based on the needs of the Trust, and in a manner that supports its other strategic aims and objectives and the Trust's culture.

- Establishment of an Education, Training and Workforce Development Committee to jointly plan, co-ordinate and oversee all education, training and development activities within the Trust so that they support Trust objectives and use training budgets most effectively.
- By evaluating training needs on a more comprehensive basis using appraisal data, safety and performance data, staff feedback, patient feedback, complaints and incident data and based on the requirements of service line and Trust plans and strategies.
- Optimising the use of the Trust’s high quality learning environments and practice placements to meet any Regulatory and Commissioner set quality assurance arrangements (eg GMC survey/inspections).
- Maximising the utilisation of e-learning and new developments in learning technology to ensure accessibility of training in terms of time and location, and to improve the opportunities for multidisciplinary training using simulation etc.
- Setting out consistent processes for recording, monitoring and evaluating education learning and development outcomes across the range of Trust activities in this area.

Strategic objective 2: To support continuous learning for all, which underpins the development of the whole workforce and delivery of care by staff who are supported to thrive and flourish and are always able to give their very best.

- Developing a co-ordinated approach to lifelong learning based on excellent appraisal and personal development processes (and that will also support the requirements of professional and statutory bodies in terms of revalidation/re-accreditation and maintaining registration to practice).
• Promoting team development through integrated learning opportunities and a team development programme and resources (a key priority in the Workforce Strategy).
• Providing access to skills and other training, accredited programmes and continuous professional development, mandatory and essential job skills training in response to Trust and patient needs.
• Developing education, training and development programmes that align with new roles and new ways of working, e.g. Practitioner/Assistant Practitioner roles.
• Promoting clear and equitable policies on access to education, training and development and encourage learning and development exploiting technology such as e-learning and other open platforms for learning.
• Continuing to provide and develop entry into health care professional education through pre-ceptorship and apprenticeships.
• Developing career opportunities through a ‘skills escalator’ approach i.e. retaining staff in post whilst they are acquiring their qualifications and developing their careers.

Strategic objective 3: To cultivate leaders and managers capable of embedding education, training and development into practice, to support quality, safety, clinical governance, service development and a learning culture

• Completing the leadership programme for key leaders and managers giving them the skills and attributes to lead and manage (a key priority in the Workforce Strategy).
• Encouraging the development of opportunities for inter-professional/multi-disciplinary learning amongst our leaders and managers.
• Designing development opportunities that share best practice models from a range of contexts, building on and learning from other departments and other providers across the healthcare and education community.
• Building the Trust’s competence and capacity to learn by using specific service improvement projects as part of development programmes and processes for leadership development.
• Encouraging a positive learning and (no blame) feedback culture that expects and empowers leaders to identify their own development needs and promotes an expectation that leaders/managers are responsible for developing their own skills as developers of people.
• Strengthening and formalising succession planning, mentoring and coaching.

Strategic objective 4: To foster strategic alliances and partnership working and, where appropriate, integration with others to support the delivery of training and development that has greatest impact and benefit and maximising opportunities for shared learning

• Ensuring the Trust is engaged in the HESL Board and Membership Council helping establish the workforce training and development priorities that it supports.
• Maintaining a close relationship with St George’s Hospital and other ‘lead providers’ of medical and dental education where the Trust is a partner in delivery.
• Further developing links with higher education establishments, such as Kingston University.
• Developing a database or information site to publicise access to learning and development opportunities outside the Trust (eg NHS Leadership Academy programmes, NHS Elect, NHS Quest etc)
• Working with local education providers and schools to raise the profile of NHS careers for school leavers, returners and mature workers
• Taking opportunities to extend the reach of the Trust’s training and development to bring in new participants and income from partners (eg offering mandatory training to GP practice staff)
• Continuing to work with partner organisations on apprenticeship and placement opportunities

Strategic objective 5: To deliver education, training and development that is continually quality assured, meets required standards and ensures that all sources of funding are used effectively, efficiently and appropriately

• To review and oversee the management and deployment of education funding at the new Education, Training and Workforce Development Committee
• Developing an annual education, training and development action and delivery plan that addresses in-year priorities and is monitored by the Education, Training and Workforce Development Committee
• To review the extent of the Trust’s medical training placement support and its sustainability, by Specialty, based on future commissioning intentions, funding and safety and supervision required and develop alternative approaches where necessary.
• Maximising opportunities for external funding of training and development by publicising sources and developing bids for funding in advance
• Positioning the Trust as a significant provider of education, training and development in the health and social care sector, seizing opportunities to generate income.
• Developing a standard framework for recording, monitoring and evaluating education, learning and development outcomes and participant satisfaction.

7. GOVERNANCE

The Trust’s Organisational Development Plan and Governance Review (July 2013) envisaged the creation of an Education and Training Committee. The strategy proposes that the title is expanded to include ‘workforce development’ bringing with it a responsibility for aspects of workforce development that are broader than education and training and could support the Trust’s wider organisational development.

The membership of the committee must reflect its coordinating and planning role around the delivery of training and development in the most cost effective and integrated way. Key members must therefore include:

• Director of Workforce
• Director of Nursing and Patient Experience
• Director of Medical Education
• Operational representation
• Education and training ‘delivery’ staff/representation
• Finance representation and/or support
• Local Faculty representation

The Committee’s roles will be to recommend strategy, establish an annual delivery plan and to monitor performance, risks and outcomes against this, and reporting annually to the Board (see below).

8. EVALUATION & PERFORMANCE MEASUREMENT

To evaluate the delivery of the objectives that support the strategy a number of measures will be used:

• A review of the Trust’s annual education, training and development action and delivery plan and achievement of milestones and measures would be undertaken by the Education, Training and Workforce Development Committee each year. This would inform an annual report to the Trust Board setting out the Trust’s key training earnings, investments and achievements.

• Monitoring of annual appraisal and personal development plans for all staff.

• Education and training costs, including staff release costs.

• Recording of staff attendance on all corporate education and training events.

• Outcome measures of course and training programme evaluations. This would be achieved using the systematic and consistent methodology to be developed based around the Kirkpatrick ‘four levels’ model of evaluation of training programmes, specifically these are:

  1. Reaction - what participants thought and felt about the training (satisfaction)

  2. Learning - the resulting increase in knowledge and/or skills, and change in attitudes.

  3. Behavior - transfer of knowledge, skills, and/or attitudes from classroom to the job (change in job behavior due to training program)

  4. Results - the final results that occurred because of attendance and participation in a training program (e.g. improved patient outcomes/satisfaction).

9. YEAR 1 (2014-15) OBJECTIVES
The following are the main objectives it is expected can be achieved in Year 1 (2014-15).

- Establishment of the Education, Training and Workforce Development Committee
- Understanding of overall education resource and budgets
- First annual plan and coordination of training on a multi-disciplinary basis
- Design and delivery of a standard course/training evaluation form/methodology
- Appraisal paperwork and process enhancement (being developed for January 2014)
- Team development work
- Leadership programme for key leaders
- Maximising external funding opportunities (using IDOX platform to support this)
- Achieving 80%+ mandatory training participation
- Contributing and responding to wider HESL agenda and initiatives.
- Commencing the review of junior doctor training on a specialty by specialty basis alongside Service Line strategy planning.

10. SUMMARY

The Education, Training and Workforce Development strategy is to support the Trust’s wider workforce and other strategies by ensuring the skills, competence and abilities of Trust staff are maximised and are aligned with high quality, clinically effective and safe care and that education and training delivery is coordinated and overseen effectively on behalf of the Trust Board. It is also intended to promote a collaborative approach to delivery of learning and development given the Trust’s scale and because joint working will in most cases prove more cost effective and sustainable. Key partners in this will be other providers, HESL and local education providers.
## Appendix 1

### Education and training SWOT

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<th><strong>Strengths</strong></th>
<th><strong>Weaknesses</strong></th>
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<td>Good facilities</td>
<td>Some negative outliers in GMC surveys</td>
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<td>Good information systems and infrastructure in place</td>
<td>Lack of coordination and silo working</td>
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<td>Good medical training experience</td>
<td>No combined oversight</td>
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<td>CQC standards met</td>
<td>Income and expenditure not transparent</td>
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<td>Core training delivered</td>
<td>Mandatory training uptake low</td>
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<td>Positive staff survey on training and development</td>
<td>Capacity to expand training and develop/devise new programmes</td>
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<td>High DNAs</td>
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<td>Local ‘ownership’ of training and development responsibilities (PDR and MT compliance etc)</td>
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<td>Communication and understanding of training offerings</td>
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<th><strong>Opportunities</strong></th>
<th><strong>Threats</strong></th>
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<td>New ‘markets’ (eg GPs/community)</td>
<td>Expanding quality control and reporting</td>
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<td>HESL collaboration</td>
<td>Loss of junior doctor trainee posts</td>
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<td>Coordination of training may deliver efficiencies</td>
<td>Increasing service pressures preventing release of staff for training</td>
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<tr>
<td>e-learning and joint projects</td>
<td>Reduced central education budgets</td>
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