NHS Education for Scotland (NES) / SFC Joint Action Plan

- This paper provides an update to Council on the 2014-2016 NES/SFC Joint Action Plan and highlights the main areas to be addressed in the 2017-19 NES/SFC Joint Action Plan. The paper also provides an update on the main healthcare provision related outcomes to be included as part of the “intensification” of the outcome agreement process.

Recommendations

The Council is invited to:

- Note the progress with the 2014-16 Joint Action plan and the main areas to be addressed in the 2017-19 Joint Action Plan.
- Note the introduction of specific health related outcomes in the Outcome Agreement process.

Financial implications

- The actions within the 2017-19 Joint Action Plan may require both organisations to commit resources to support the objectives. Both organisations will need to discuss and approve (through their respective governance systems) any associated financial implications. Elements of the plan are therefore subject to the availability of funding in both organisations.
NHS Education for Scotland (NES) / SFC Joint Action Plan

Purpose

1. This paper provides an update on the joint work between SFC and NHS Education for Scotland between 2014-2016 and outlines the focus of the 2017-2019 Joint Action Plan. The paper also outlines the specific health related outcomes which will be included as part of the Outcome Agreement process.

Background

2. At the NES/SFC Joint meeting held on 9 May 2008, the NES and SFC Chairs agreed to sign a Memorandum of Understanding between the two organisations and to develop a joint action plan. The Boards of NES and SFC agreed to renew the Memorandum of Understanding for a further 3 years in April 2016.

3. The Boards have received annual updates on progress with the joint action plans as agreed in the Memorandum.

4. The NES/SFC Chairs and Chief Executives met in May 2017 and reviewed the 2014-16 joint action plan and approved the 2017-19 draft joint action plan. While content to approve the draft plan, the Chairs and CEOs asked that there was a greater focus on some of the key outcomes sought by Ministers including developing specific plans with universities to meet the challenges around widening access, primary care and addressing significant gender imbalances.

5. The NES Board considered the Joint Action Plan in August 2017 and approved the plan but asked for an “intensification” of activities especially around widening access to medicine.

Summary of key issues and options

6. The key outcomes of the 2014-2016 Joint Action Plan were: continued support for the Government’s widening access ambitions to medicine, and support for the intended changes to the ACT levy for non UK and EU students. There has been less progress on putting in place effective intelligence exchange and analysis regarding trends in the NHS workforce, especially in relation to nursing.

7. The key priorities of the 2017-19 Joint Action Plan will continue to be on strategic liaison and support for Scottish Government in training for the existing and new roles in the health and social care workforce and in widening access. There is also reference to continuing work around the management, governance and funding arrangements of pre-registration Nursing and

Outcome agreements and Health related outcomes

8. To support the aspirations of the Chairs and CEOs of both organisations to intensify the outcome agreement process where it relates to health, SFC and NES officers have been in discussion with Scottish Government Health and Social Care Directorate (SGHSCD) to develop a set of specific outcomes related to health which focus on meeting the needs of the NHS.

9. Specific outcomes related to medicine, nursing and dentistry are prioritised because student intake into these courses is controlled and the funding of this provision is provided by SGHSCD (for nursing) and the undergraduate clinical training funding is managed by NES (for medicine and dentistry). These are attached at Annex B for information. However, SFC and NES officers are in discussion with Scottish Government colleagues responsible for social work, allied health professionals, and other health and social care groups to identify and develop any specific outcomes related to other NHS or social care workforce needs.

10. A key priority included in the outcomes will be to widen access, increasing the pool of applicants who may stay and work for the NHS and in the care sector in Scotland. These outcomes are in keeping with the widening access outcomes sought from the university sector in general.

11. In nursing, key outcomes include increasing retention, and ensuring that there is a reversal in the downward trend in the number of male applicants and acceptances to nursing. There is also the need for more collaborative working between the universities on adult nursing to support the integration of health and social care and across all four fields of nursing to meet the challenges of working in primary care settings, meeting the challenges of care homes, and supporting the regional collaboration of NHS Boards.

12. The outcomes also reflect the need to work in collaboration across institutions to clarify and simplify the application process so that it is not viewed as a barrier to students considering a healthcare career.

13. The outcomes include a focus on enabling medical students to gain more experience in primary care. General Practice is facing unprecedented challenges through increased workload and GP work will also need to respond to a need for greater team working. Research indicates that graduates are more likely to apply for GP training if they have had a positive experience in
primary care at undergraduate level. These outcomes also mirror the criteria set by SGHSCD in their letter to the medical schools regarding the announced increase to the intake to medicine.

14. The intention is to monitor all the outcomes with the support of the SFC/NES Group and SFC outcome agreement managers, revising and strengthening them as required.

Risk assessment

15. The key risks associated with the delivery of the Joint Action Plan are ensuring that the resources are available to undertake this work and that robust data is available to monitor progress towards key outcomes such as widening access.

16. To mitigate against these risks, the Joint Action Plan Group monitor all actions on a regular basis, and agree which actions should be prioritised. The joint action plan also includes greater collaboration on data collection and analysis, which should not only improve our understanding of equality and diversity issues but will also improve the evidence on which to base implementation of Government policies related to the health and social care workforce.

Equality and diversity assessment

17. The revised joint action plan set out the high level strategic direction for partnership working between NES and the SFC. Analysis of the relevance of this work to the equality duties and the wider inequalities agenda highlights some specific areas where NES and the SFC can work together to support improvements:

- Activities related to data collection will improve the capacity for equalities analysis.

- Data collection will help to provide the evidence required to ensure that the action plan supports the principles included in the BMA's 'Ensuring fairness in clinical training and assessment', which was developed in response to the judicial review of differential outcomes in the RCGP's Clinical Skills Assessment, and has recommendations for both undergraduate and postgraduate education.

- Partnership work in a range of areas, and specific actions relating to widening access to education in medicine will further support the Scottish Government’s aims of reducing health inequalities, as well as widening access to education.
• The development of plans with current providers of pre-registration nursing to address gender underrepresentation.

Financial implications

18. The actions within the 2017-19 Joint Action Plan may require both organisations to commit resources to support the objectives. Both organisations will need to discuss and approve (through their respective governance systems) any associated financial implications. Elements of the plan are therefore subject to the availability of funding in both organisations.

Recommendations

19. The Council is invited to:

• Note the progress with the 2014-16 Joint Action plan and the main areas to be addressed in the 2017-19 Joint Action Plan.

• Note the introduction of health related outcomes in the outcome agreement process.

Publication

20. This paper will be published on the Council website.

Further information

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NES/SFC Joint Action Plan 2017-2019

1. Jointly advise and support SG in progressing key policy areas.

Actions include:

1.1 Medicine:

- Advising on intake to Scottish Medical schools and the impact this has on post-graduate training, in particular foundation training, and addressing medical workforce supply.

- Continue to advise SGHSCD on effectiveness of 50 additional widening access places in medicine.

- Implement SG policy related to international students studying medicine in Scotland and the payment of clinical placement costs (ACT-M).

- Strategic liaison and development of joint response to issues raised at the Board for Academic Medicine and the Medical Undergraduate Group and UKHEAC.

1.2 Nursing and Midwifery:

- Providing advice and support to SGHSCD in relation to nursing and midwifery education policy development and implementation, building on the progress achieved through ‘Setting the Direction’. In particular, this will include:

  i. Continue supporting the development of the key principles for commissioning pre-registration education and the development of an improved commissioning model that takes full account of nursing and midwifery workforce development and education, commissioning, including flexible routes, levels of study and governance.

  ii. The development of a new process for the management and governance of pre-registration commissioning, including an enhanced data set.

  iii. Strategic liaison on issues raised at the Nursing and Midwifery Student intake model reference group.
1.3 Dentistry:

- Strategic Liaison on issues raised at the Board for Academic Dentistry.

1.4 UK Wide:

- Liaison on issues raised at UKHEAC and other UK healthcare partners.

2. **Support the health and education sectors in addressing changes to the NHS workforce across all professional and occupational groups.**

Actions include:

- Development of a coherent and collaborative response to any policy changes that affect the training and education of the primary care workforce.

- Liaison on the development of a common approach to changes to the training for pharmacists.

- Supporting and advising the education sector in responding to changes in the training for healthcare support workers.

- Supporting the development and implementation of the CNO’s Commission and representation on the Widening Access Group.

- Development of a coherent and collaborative response to any policy changes that affect the training and education of healthcare support workers.

3. **Put in place effective intelligence exchange and analysis regarding trends in the NHS workforce and educational provision.**

- Work with SGHSCD on understanding differences in data collection on the controlled subjects in particular and the healthcare subjects in general.

- Adjustment of reporting of data to meet the needs of SGHSCD.
4. **Continue monitoring of jointly funded Quality Improvement Project.**

- Reporting to senior managers on progress with project (project duration 2014-2019).
Health related outcomes

Dentistry Outcome:

- To widen and improve access to dental education across all dental schools in Scotland.

Specific actions:

- To provide evidence of collaborative activities (including developing contextualised admissions processes) between Scottish dental schools to simplify and clarify the admissions process and widen access to dentistry.
- To provide evidence of an increase in activities with schools and colleges with the aim of increasing the number of applicants to dentistry, and in particular from SIMD 20%.

Medicine Outcomes:

- To retain more graduates of Scottish medical schools in Scotland and working for NHS Scotland throughout their careers.
- Encouraging more of our young doctors to enter GP and other shortage specialities.
- To simplify and clarify the admissions process across all the medical schools in Scotland.
- To increase the number of Scottish domiciled applicants to medicine.

Specific actions:

- Increase the percentage of teaching that takes place in general practice to at least 25% of the clinical curriculum.
- Provide evidence that all students are regularly taught by GPs (e.g. clinical skills teaching or leading seminars) from the beginning of first year.
- To provide evidence of collaborative activities between and with Scottish medical schools to simplify and clarify the admissions process.
- To provide evidence of an increase in activities with schools and colleges with the aim of increasing the number of Scottish domiciled applicants to medicine and in particular from SIMD 20%.
Nursing and Midwifery Outcomes:

- To increase the retention and completion rates in nursing and midwifery.
- To improve the gender balance across all fields of nursing.
- To increase regional collaboration between universities across all fields of nursing and midwifery provision.
- To increase collaboration with Scotland’s Colleges to strengthen access and articulation into pre-registration programmes.