


# Agenda Item 8

		<b>THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b>	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Dr Adrian Brooke, Deputy Postgraduate Dean and Secondary Care Dean, Health Education East Midlands

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>20 May 2015</b>
Subject:	<b>Health Education East Midlands (HEEM) – Lincolnshire Workforce Development</b>

## Summary:

Health Education East Midlands (HEEM) undertakes a variety of activities to support development of a skilled healthcare workforce to meet the needs of the population of Lincolnshire. Education of the workforce is commissioned with Trusts and local Universities and ongoing review of training is taking place to align the share of trainees to the proportionate needs of the population of Lincolnshire. Supporting Lincolnshire remains a specific strategic goal of HEEM. In addition, HEEM is developing fellowships with partners in Lincolnshire to improve recruitment and increase retention of the healthcare workforce locally.

## Action Required:

The Health Scrutiny Committee for Lincolnshire is asked to consider and comment on the contents of the report.

## 1. Background

A key area of interest for the Committee is how Health Education East Midlands (HEEM) is developing and supporting the training of staff in Lincolnshire and how it uses its funding to achieve this in Lincolnshire.

Health Education East Midlands is part of Health Education England (HEE), a non-departmental public body constituted to train the future healthcare workforce. This includes non-qualified staff, nurses, associated health professionals (AHPs) and Doctors. Its agenda for training and workforce development follows from the HEE Mandate (*Delivering High Quality, Effective, Compassionate Care: Developing the Right People with the Right Skills and the Right Values - A Mandate from the Government to Health Education England: April 2015 to March 2016*), issued by the UK Government, and refreshed recently to reflect the emerging challenges to the health and wellbeing of the population of England. The mandate to Health Education England is available on the following website: -

<https://www.gov.uk/government/publications/health-education-england-mandate-april-2015-to-march-2016>

Health Education England receives £5 billion to train Healthcare staff across England. From this total, HEEM receives approximately £360 million to train staff in the East Midlands.

From the East Midlands total, Lincolnshire receives funding via the established learning development agreements negotiated with the County's trusts/providers in the following schedule:

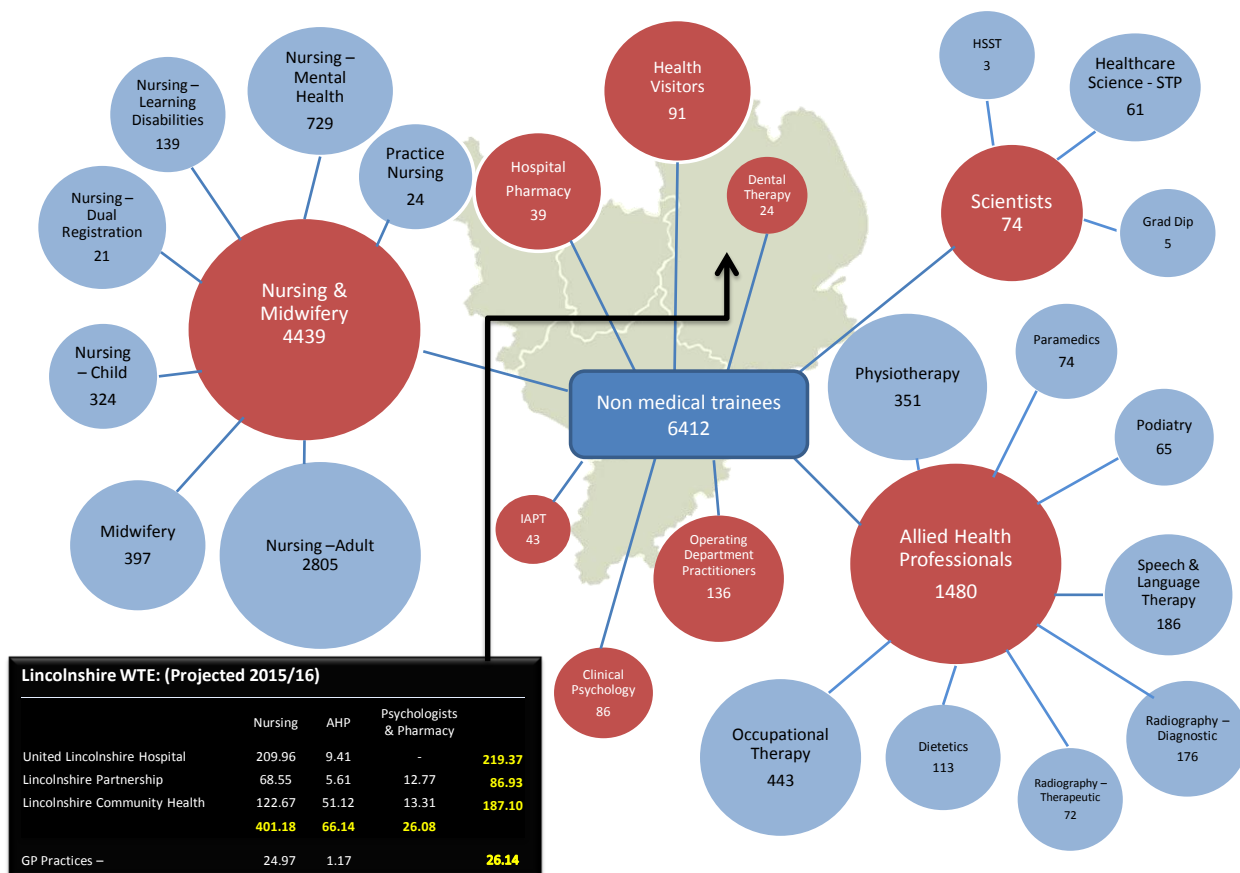
	<b>Non-Medical</b>	<b>Postgraduate Medical</b>	<b>Undergraduate Medical</b>	<b>Total</b>
United Lincolnshire Hospitals NHS Trust (ULHT)	£1,464,819	£10,612,517	£3,927,784	<b>£16,005,120</b>
Lincolnshire Partnership NHS Foundation Trust (LPFT)	£854,566	£731,116	£144,476	<b>£1,730,158</b>
Lincolnshire Community Health Services NHS Trust (LCHS)	£846,346	-	-	<b>£846,346</b>
<b>Total</b>	<b>£3,165,731</b>	<b>£11,343,633</b>	<b>£4,072,260</b>	

Non-medical trainees include nurses, associated health professionals (therapists), paramedics, psychologists and pharmacists. The expenditure on postgraduates far exceeds the expenditure on undergraduates because the funding allocated to postgraduate training comprises both a placement tariff and a salary component. There is no salary component for undergraduate trainees. In addition, approximately £40 million of bursary monies is spent across the East Midlands training and funding healthcare students. It is not possible to attribute a specific proportion of the total to Lincolnshire.



The total number of non-medical trainees for East Midlands as a whole and the numbers designated for Lincolnshire are shown in figure 3. It can be seen that non-medical trainees include nurses, AHPs (therapists), paramedics, psychologists and pharmacists.

East Midlands Non-Medical Trainees : Jan 2015



HEEM is currently engaged with a major redistribution project looking to put trainees in the future closer to the present disposition of the population. This will result in more medical trainees (in medical and surgical practice) being attached to provider units in Lincolnshire (for example, core surgical trainee numbers are currently modelled to increase from 3 to 12 apportioned to ULHT).

We have also invested in programmes to support recruitment to East Midlands. Money from shortfalls in recruitment is being put into a comprehensive fellowship programme. These include:

- Education Fellows, to improve the reputation and standard of medical education across Lincolnshire;
- Management Fellows, to help improve quality and safety of patient care and integrated care fellows, to pioneer new ways of learning by working with patients across the traditional silos of acute, community and primary care.

This latter approach is likely to be the model which NHS vanguard sites will pursue to deliver the Five Year Forward View proposed by Simon Stevens, the Chief Executive of

the NHS in England. It will also likely inform the future training patterns of doctors envisaged in the 'shape of training' review, which is currently with UK health ministers awaiting a decision regarding implementation. The Review entitled *Securing the Future of Excellent Patient Care Final - Report of the Independent Review (Led by Professor David Greenaway)* is available on the following website:

<http://www.shapeoftraining.co.uk/reviewsofar/1788.asp>

Recruitment to general practice training is a challenge nationally, and affects the East Midlands particularly acutely. In an attempt to improve the attractiveness of training across the counties of the region (including Lincolnshire), a pre-GP specialty training programme has been developed to offer potential general practice trainees the chance to sample and prepare for successful entry into GP training. Doctors on this scheme help manage patients in provider trusts and hence help reduce the locum and agency bill for healthcare provision across the county.

General practice trainees who have completed training are also being offered post qualification fellowships to give them additional experience, skills and attributes to contribute to their chances of pursuing a successful career once appointed as a fully qualified GP, and by doing so aim to improve the retention of this highly skilled section of the workforce.

The Governing Body of HEEM has adopted Supporting Lincolnshire as a specific strategic priority and is seeking to reduce reliance on locums and temporary staffing, especially at senior level. It is also trying to support delivering high quality care by working in integrated teams. It can be seen that HEEM is attempting to develop a well trained workforce with the appropriate skills and behaviours that are transferrable across employers.

The Lincolnshire local education training community (one of HEEM's links to the county) has developed a draft medical workforce strategy (July 2014), which follows the same principles outlined elsewhere within this paper.

By supporting the development of the medical educator faculty, HEEM is actively promoting the provision of high quality learning experiences with appropriate supervision and mentorship. In partnership with the local education providers we will continue to support development opportunities for all staff, in particular the future workforce.

Recruitment of trainees to East Midlands as a whole and Lincolnshire in particular remains challenging and we have explored this as a training authority. The remote and rural geography of Lincolnshire, poor transport links and a perceived lack of prestige in the higher education institutions and hospital trusts are cited by trainees as reasons for preferring other training locations.

## **2. Conclusion**

HEEM has adopted supporting Lincolnshire as a specific strategic priority and is, via the above and other plans, seeking to reduce reliance on locums and temporary staffing, trying to support delivering high quality care working in integrated teams, attempting to develop a well trained workforce in line with the needs of the population and with the Health Education England mandate.

### **3. Consultation**

This is not a consultation item.

### **4. Background Papers**

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Dr Adrian Brooke, Deputy Postgraduate Dean and Secondary Care Dean, Health Education East Midlands, who can be contacted via [adrianbrooke@nhs.net](mailto:adrianbrooke@nhs.net)