



# World Class Education and Training, for World Class Healthcare

*Introducing Health Education England*



**DH INFORMATION READER BOX**

Policy	Clinical	Estates
<b>HR / Workforce</b>	Commissioner Development	IM & T
Management	Provider Development	Finance
Planning / Performance	Improvement and Efficiency	Social Care / Partnership Working

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## Foreword

The Government has set out a clear vision for a modernised NHS that is focused relentlessly on improving outcomes for patients. To deliver this, the health service and public health needs its workforce to have access to education and training that is truly world class and quality assured. As we put the new education and training arrangements in place for the future, we have a great opportunity to build in capacity for continuous improvement. Our goal is to achieve the best possible system to develop people with the right knowledge, behaviours and training, so they can improve services and provide patients with compassionate, skilled care - both now and in the future.

Subject to Parliamentary approval, Health Education England will be the new national leadership body for education, training and development of the health workforce. Our vision is for a dynamic and professional organisation focused on a threefold mission:

- To develop a world class workforce capable of supporting a world class health service – meeting the needs of patients and communities
- To ensure excellence and continuous improvement in the education and training of the health workforce
- To deliver our objectives through a partnership approach that is underpinned by strong governance and accountability. It is only through a wide partnership - with employers, higher education, professional bodies and Royal Colleges, service commissioners, regulators, Local Authorities and patients – that we can ensure a strategic approach that meets changing needs.

Health Education England shall be formally established from 28 June, to work as a shadow Special Health Authority from October 2012, and take on full responsibilities from April 2013.

This document has been developed by the Health Education England Transition Team, working with stakeholders. It aims to raise awareness of the role of Health Education England and Local Education and Training Boards, and provides a basis for implementing the policy set out in *Liberating the NHS: Developing the Healthcare Workforce - From Design to Delivery*. The new Chair of Health Education England, and in due course the Board and executive team, will be responsible for building the new organisation and developing its operating model.

Your feedback on this document will be a helpful contribution to the development process. If you have any comments or require further information on Health Education England, please contact [hee@dh.gsi.gov.uk](mailto:hee@dh.gsi.gov.uk).



Christine Outram, Senior Responsible Officer, Health Education England

## Overview

The shape, skills and knowledge of the future health and public health workforce need to evolve constantly if we are to sustain high quality care, safe health services and continue to improve the nation's health.

The current NHS and public health reforms set out a clear vision for transforming service delivery and improving health outcomes. As the NHS and public health system in England changes, we must adapt the ways in which we educate, train and support learning in the workforce. It is crucial to invest in our staff who continue to be our most vital resource. We need to support clinicians and the teams they work with so that the experience and services available to patients and communities improve year on year.

A central aim is to set up a system that aspires to excellence in education and training. It shall produce a flexible workforce able to address future challenges and be supported by a transparent and responsive funding mechanism. The reforms provide a unique opportunity to place employers at the heart of the decision making process, in partnership with professional bodies and Royal Colleges, the higher education sector, Local Authorities, regulators, patients and the public.

Health Education England will have a key role to play during 2012/13 to create the new education and training system. It is essential that all NHS organisations prepare themselves for the reforms that come into place in 2013/14.

Over the next few months, Health Education England will need to provide leadership and strategic direction to develop the new arrangements for shaping the health and public health workforce. Key to this will be the creation and development of partnerships with relevant stakeholders.

Health Education England will not only be responsible for making sure staff are available with the right skills and knowledge, in the right numbers at the right time. It will also ensure that the shape, structure and location of the workforce evolves to meet changing needs.

As a partnership organisation, Health Education England will aim to:

- Provide a clear focus on the entire healthcare education and training system, and ensure greater accountability against service improvements
- Put healthcare providers firmly in the driving seat to plan and develop the workforce, within a coherent national framework and to consistent standards - professionally informed and with strong academic links
- Encompass, and deliver for, the whole health workforce with a true multi-professional approach

- Champion the involvement of patients and communities in planning and developing the local healthcare workforce
- Ensure that investments in education and training are transparent, fair and efficient, and achieve good value for money.

## Vision and Purpose

Health Education England will aim to deliver the vision of a world class healthcare education and training system.

Its purpose will be to ensure that the right numbers of health professionals are trained - with the right skills and behaviours - to support delivery of high quality service and health improvement across England.

To realise its purpose, Health Education England shall have an extensive range of functions. These are outlined in *Liberating the NHS: Developing the Healthcare Workforce - From Design to Delivery*. The key national functions of Health Education England will include:

- Providing national leadership for planning and developing the whole healthcare and public health workforce
- Authorising and supporting development of Local Education and Training Boards and holding them to account
- Promoting high quality education and training which is responsive to the changing needs of patients and local communities; ensuring education and training is delivered to the standards set by professional regulators
- Allocating and accounting for NHS education and training resources and the outcomes achieved; ensuring transparency, fairness and efficiency in investments made across England
- Ensuring security of supply of the professionally qualified clinical workforce – this shall necessitate strong strategic workforce planning for the medium and longer term, supported by the Centre for Workforce Intelligence
- Supporting development of the whole healthcare workforce, within a multi-professional and UK-wide context. This will involve working with the devolved administrations to ensure a coherent approach to healthcare education and training across the UK
- Assisting the spread of innovation across the NHS in order to improve quality of care; ensuring that education and training in England is at the forefront of innovation
- Delivering against the national Education Outcomes Framework to ensure the allocation of education and training resources is linked to quantifiable improvements

- Annually publishing and updating a Strategic Education Operating Framework for the whole health-related education and training system in England, setting out national priorities.

## Shared Principles

The Department of Health and the Health Education England Transition Team have agreed to work to a set of shared principles. The purpose is to strengthen working relationships throughout the health and social care system by defining common objectives against which Health Education England and the Department of Health can hold each other to account. The agreed shared principles are:

- Working together in the interests of patients, people who use services and the public to maximise the health and well-being of the population, in line with the values set out in the NHS Constitution
- Respecting the importance of autonomy throughout the system. The Department of Health will respect Health Education England's autonomy and shall not interfere in its day-to-day operations or decision making
- Working together openly and positively. This includes working constructively and collaboratively with other organisations within and beyond the health and social care system, demonstrating a commitment to wider societal goals
- Recognising that the Secretary of State is ultimately accountable to Parliament and the public for the system. Health Education England shall support the Department of Health in the discharge of its accountability duties, and the Department of Health shall support Health Education England in the same way.

These principles will be reflected in the partnerships and relations that Health Education England shall establish with Local Education and Training Boards and key stakeholders.

## Values and Culture of Health Education England

The values embedded across Health Education England shall support its goal to develop a flexible and compassionate workforce focused on high quality care that is responsive to changing needs. Health Education England's culture shall embody particular characteristics from the outset, including:

- Clear accountability arrangements which are predicated on freedom for local decision making to develop the local healthcare workforce
- A commitment to partnership working which promotes a responsive education and training system, bringing together the interests of providers of NHS care, professional bodies and Royal Colleges, regulators, Local Authorities, patients, staff and trade unions to improve quality

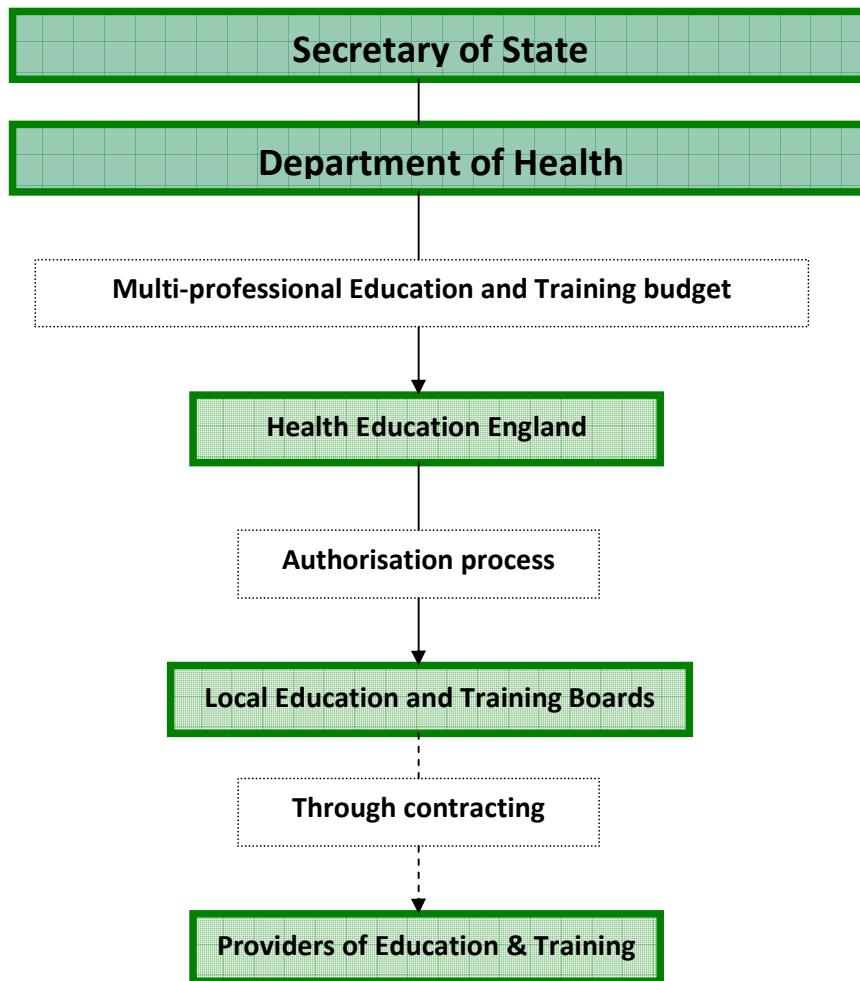
- Commitment to a multi and interprofessional approach to achieve goals
- An evidence-based and innovative organisation focused on national measurable outcomes, ensuring intelligent use of data to inform decisions
- A relationship with Local Education and Training Boards that is mutually supportive based on trust, respect and clarity of expectations. This working relationship is central to the success of the new system
- A professional organisation which is open and transparent and committed to developing a whole system approach to training and education
- An organisation loyal to supporting NHS values and behaviours to provide patient-centred care.

As Health Education England develops to take on its full range of responsibilities, it will be important to develop values that are unique to the organisation, widely shared, relevant to its purpose and strategy and reflected in internal and external working relationships. Once Health Education England is established, the Board will want to develop a clear set of values and a distinct culture. Nurturing a positive working environment will take time but the initial aim shall be to develop an exciting and proactive culture, with strong partnership working with stakeholders across health, education and research.

### Accountability and Transparency

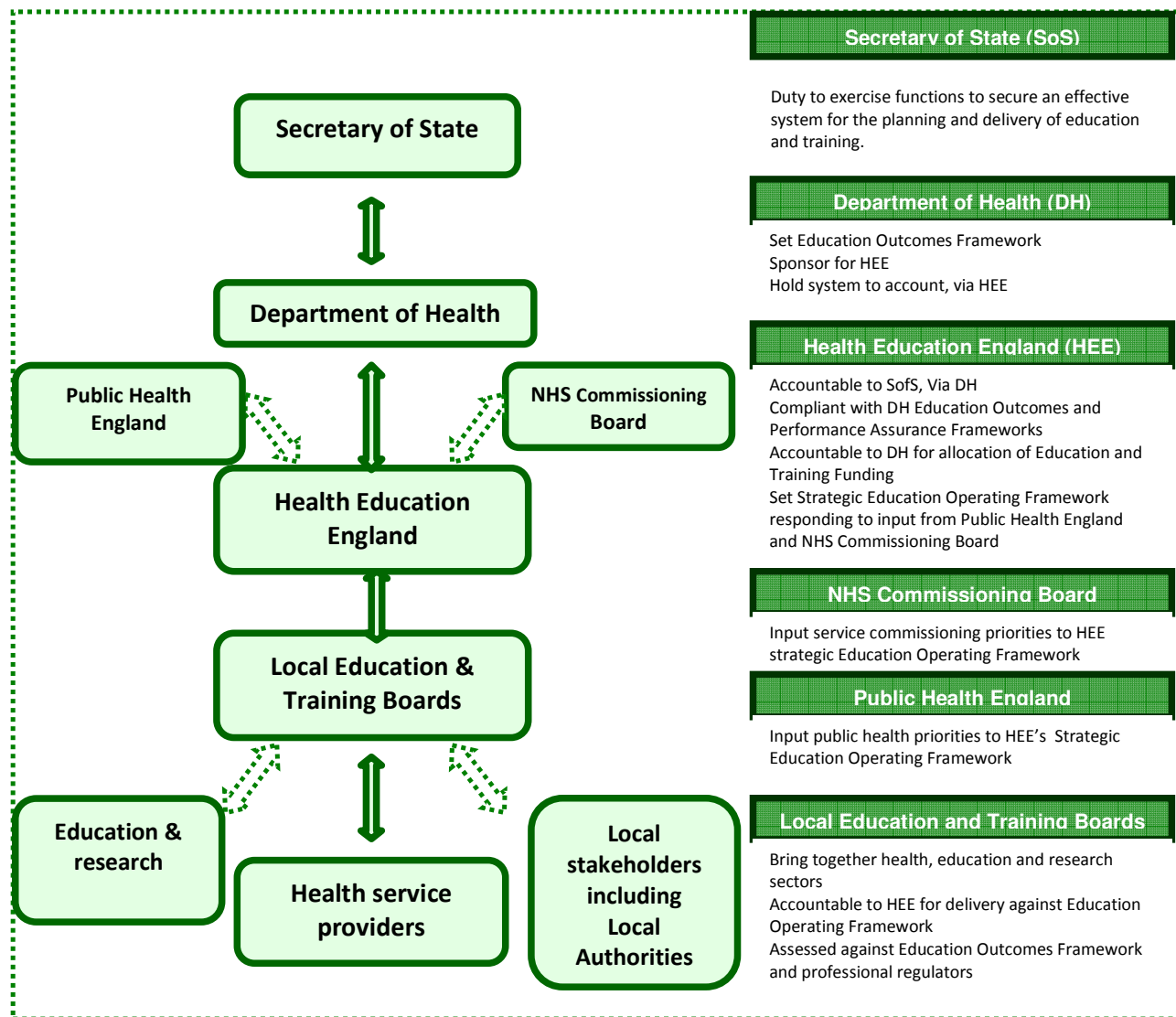
The Secretary of State for Health is responsible to Parliament for securing an effective education and training system for people who are employed or who will be employed in the health service and public health system. Health Education England will be accountable to the Secretary of State for delivering an effective system and for wise stewardship of the investment of central funding for education and training. The lines of accountability in the new education and training system are illustrated below:





In the new system greater responsibility and accountability for decision making will rest with healthcare providers, those best placed to understand the communities they serve and the needs of the workforce. Health Education England shall develop a clear scheme of delegation to Local Education and Training Boards in accordance with the education and training system being led by providers, working in partnership with professional bodies and Royal Colleges, education and research institutions, patients and lay representatives.

Once fully established, Health Education England will need to work with a range of organisations, which can be categorised as those that are accountable to Health Education England and those with whom Health Education England needs to work in partnership. The relationships and dependencies of the new education and training system are illustrated below:



As the diagram illustrates, Health Education England will work in partnership with the NHS Commissioning Board and Public Health England, to ensure that anticipated future developments in health and health care are reflected in plans for workforce development. The work of the Local Education and Training Boards shall be underpinned by strong partnerships with colleagues in the education sector and local government, commissioning groups, and with Academic Health Science Networks and clinical senates as they develop.

Health Education England shall demonstrate transparency through:

- Developing its strategic plans with open debate and consultation, through its advisory structure
- Reporting on levels of achievement against the performance measures set by Government
- Publishing an annual report and accounts

- Publishing strategic reports and analysis on the future shape of the health workforce.

## Health Education England Board

The Health Education England Board will be collectively responsible for:

- Defining the vision and values, culture and strategy of Health Education England
- Agreeing appropriate governance and internal controls
- Ensuring sound financial management and good value for money
- Embedding controls to manage financial and performance risks and ensuring Health Education England has the capability to deliver
- Using information appropriately to drive improvements
- Supporting the executive management team and holding it to account.

Health Education England's Board will be led by a Non-Executive Chair, appointed by the Secretary of State. The Chair will need to ensure that Health Education England's affairs are conducted with probity, and that the Board's policies and actions support the organisation in discharging its functions and duties economically, efficiently and effectively. The Chair will need to ensure that Health Education England meets the objectives and requirements set by the Secretary of State. The Chair shall oversee the annual evaluation and appraisal of the Chief Executive and Non-Executive Directors. The Board will need to include at least five non-executive members independently appointed on the basis of their expertise and skills, and not to represent particular organisations or professions.

The Chair and Non-Executive Directors will be responsible for appointing the Chief Executive, with approval from the Secretary of State. The Chief Executive will be accountable to the Board for operational delivery against Health Education England's objectives and strategic priorities.

The Chair will need to play a central role in identifying the Non-Executive Directors and appointing a Chief Executive and senior executive team. The Chair shall lead the Board as it works with the Chief Executive and key members of the team to establish Health Education England as a Special Health Authority and help build relationships externally during the period of transition.

## Partnerships and Advisory Structure

A key role of the Board shall include supporting, developing and holding to account a comprehensive network of Local Education and Training Boards. Health Education England will need to work with the provider-led Local Education and Training Boards to create a partnership forum for collaborative work. The forum shall develop joint action and responses to

national issues so that there is complete alignment on workforce development and the needs of providers.

As well as its partnership arrangements with Local Education and Training Boards, Health Education England will need to set up an advisory structure to bring together all stakeholder groups and provide professional and patient input.

The advisory structure shall be built on a number of important principles:

- The Health Education England Board shall ensure it has clear and coherent advice on matters affecting individual professions. It will need to ensure continuity of the work of the Department of Health's Professional Advisory Boards for nursing and midwifery and allied health professions, as well as Medical Education England's four Programme Boards for dentistry, healthcare science, medicine and pharmacy
- Health Education England shall secure lay and patient input and advice, with respective representatives on all its advisory groups, and through a separate lay forum. It will need to work with Local Education and Training Boards to strengthen arrangements through greater provider input and stronger lay involvement.

The Health Education England Board will need to establish a source of strategic advice that transcends the boundaries between individual groups and professions, in all its areas of operation. A Strategic Advisory Forum is proposed to support the Board to this effect. It shall bring together a key group of leaders with expertise and credibility, drawn from across all stakeholders including healthcare providers, education representatives, staff representatives, lay representatives, professional bodies and Royal Colleges, regulators and service commissioners. The Strategic Advisory Forum shall provide strategic advice and insight on future direction, key decisions and plans for workforce development, education and training.

*Work to develop advisory structures is currently in progress. Health Education England will seek wide input and put forward proposals in Autumn 2012 to enable a smooth transition to the new structure by April 2013.*

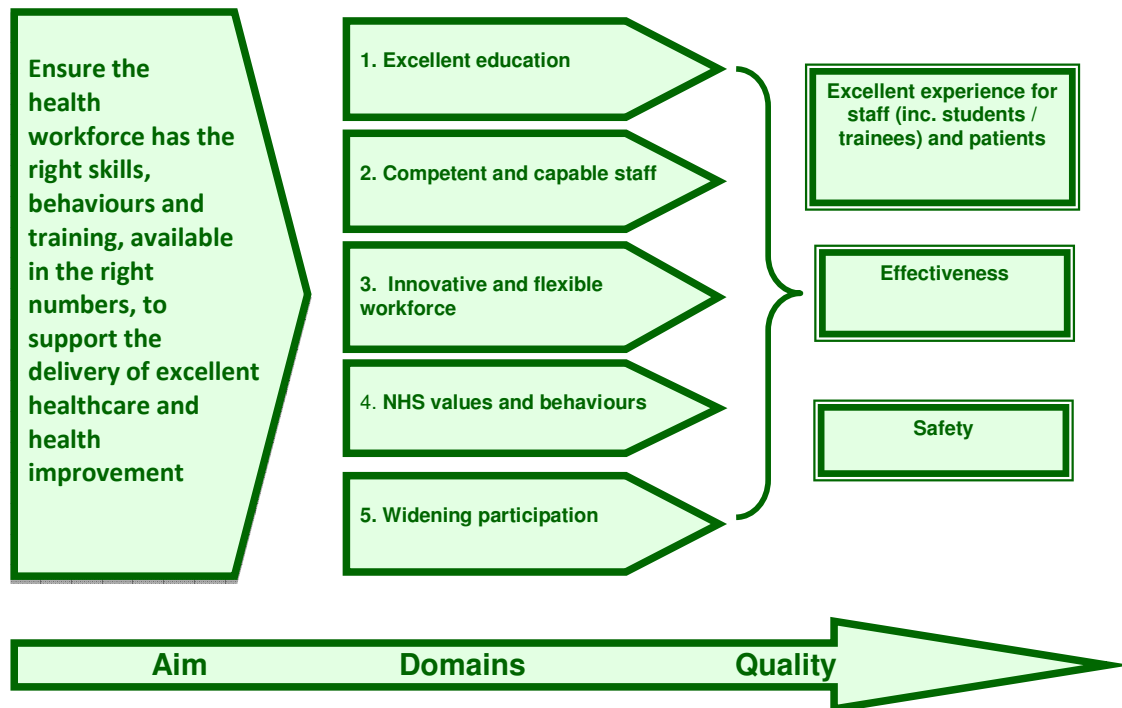
## Quality and Innovation

Health Education England will need to ensure continuous improvement in the quality of education and training. Specifically, it shall seek to achieve the clear outcomes defined by the Department of Health's Education Outcomes Framework, as set out in *Liberating the NHS: Developing the Healthcare Workforce - From Design to Delivery*.

The Education Outcomes Framework and Health Education England's approach to quality will directly link education and learning to improvements in patient outcomes. By providing clarity on quality objectives and performance, variations in standards can be identified and addressed.

An illustration of how the framework will set outcomes for the education and training system is shown below:

### Education Outcomes Framework



The development of an Education Outcomes Framework is an inaugural national-level endeavour to provide a comprehensive system for quality governance of educational provision and explicit educational outcomes. Working with key stakeholders, the Department of Health and Health Education England will develop a suite of measures to demonstrate education quality outcomes as they affect the quality of care across the three aspects of patient experience, health outcomes and safety.

The national framework will provide an outline of what high quality education and training looks like, so that Health Education England, Local Education and Training Boards and education providers know the standards they are expected to meet in order to improve quality and achieve excellence.

Health Education England will need to develop strong relationships with the professional regulators who have a statutory role in setting standards across the UK. Work to determine the appropriate relationship between Health Education England and the professional regulators is ongoing. Health Education England will put forward proposals this summer to ensure a smooth transition.

This is a unique opportunity for the Health Education England Transition Team to create a system where quality and outcomes drive the new education and training arrangements. In supporting better clinical outcomes and health improvements, the Education Outcomes Framework will be fundamental in shifting the culture of the education and training provision.

The Education Outcomes Framework will set out the improvements against which Health Education England will be held to account from 2013/14. Health Education England will need to work with shadow Local Education and Training Boards to prepare for this approach during 2012/13.

Innovation has a vital role to play if health education outcomes are to continually improve and deliver value for money. Strong leadership is required at all levels to identify and promote the spread of effective innovation and good practice. The NHS report, *Innovation, Health and Wealth: Accelerating adoption and diffusion in the NHS*, sets a clear ambition to improve the spread of innovation throughout the NHS at a time of rapid change and budget pressures. The report recognises the role of the education and training system and identifies two key contributions to assist the spread of innovation. The first is for Health Education England and the Local Education and Training Boards to work in partnership with the proposed Academic Health Science Networks and clinical senates. The second is for professional curricula and Continuing Professional Development to increase take up of important innovations and consider how services can be delivered more effectively.

The NHS Future Forum highlighted the importance of developing the whole health workforce to support effective team working. Health Education England will allocate a limited amount of central funding for Local Education and Training Boards to invest in Continuing Professional Development, to support innovation and develop the wider healthcare team. The expectation is that Local Education and Training Boards and providers will be able to build on this investment to support local innovation and service priorities.

## Local Education and Training Boards

Strong relationships between Health Education England and the Local Education and Training Boards will be vital to ensure the successful delivery and development of the new system. The employer-led Local Education and Training Boards will be the vehicles for healthcare providers and professionals to work with Health Education England to improve the quality of the processes and outcomes in education and training. Health Education England will host the Local Education and Training Boards and provide national leadership and oversight for strategic planning and development of the local health and public health workforce.

Health Education England shall support development of Local Education and Training Boards, creating a culture of devolved responsibility with clear lines of delegation. Local Education and Training Boards shall set up a formal, decision making board accountable to Health Education England, with an Independent Chair, and derive membership from a full range of healthcare and education providers.

The Local Education and Training Boards shall work in collaboration with local government and the new Academic Health Science Networks, ensuring that local interests are reflected and supported by research and innovation.

Health Education England will support Local Education and Training Boards to develop locally applicable operating models, which will enable them to focus on local priorities and function in the most appropriate way for their area. A set of ten core operating principles have been agreed to provide a nationally consistent framework. The ten operating principles co-produced with Health Education England and refined in collaboration with key stakeholders are:

- i. Local decision making
- ii. Inclusive approach of providers
- iii. Good governance
- iv. Sound financial management
- v. Stakeholder engagement
- vi. Transparency
- vii. Partnership working
- viii. Quality and value – year-on-year improvement
- ix. Security of supply
- x. Accountability

Health Education England will hold Local Education and Training Boards to account for:

- Investments made in education and training delivery against the Education Outcomes Framework
- Delivery against the national priorities set out in the Strategic Education Operating Framework
- Delivering value for money and financial savings.

Local Education and Training Boards will need to demonstrate they are fit for purpose and able to effectively invest their Multi-Professional Education and Training budget. An authorisation process will take place from October 2012, prior to Local Education and Training Boards being authorised and operational from April 2013. Once established, Local Education and Training Boards will report annually to Health Education England on their progress.

The approach to authorisation will be developmental to ensure Local Education and Training Boards are fully prepared to assume their new responsibilities. The creation of Local Education

and Training Boards provides an opportunity for innovation and improvement in the system, and the authorisation framework shall acknowledge, value and encourage Local Education and Training Boards to take that opportunity.

Health Education England will have the powers to intervene if:

- A Local Education and Training Board fails to meet the authorisation criteria to become established or fails to continue to meet the criteria once authorised
- A Local Education and Training Board does not operate to the standards expected in the accountability framework
- A Local Education and Training Board fails to properly discharge its functions
- It believes a Local Education and Training Board's investment plan will lead to a shortage of workforce supply.

Conflicts and competing interests within Local Education and Training Boards shall be managed through governance controls, overseen by the Independent Chair. Having effective governance arrangements in place to manage potential conflicts of interests will be a requirement of the authorisation process.

If Health Education England determines that a Local Education and Training Board is not operating effectively, it will work with the organisation to develop a plan to resolve and monitor shortcomings. Health Education England will be able to intervene to ensure fulfilment of the obligations of the Local Education and Training Board and, where appropriate, seek the support of the Care Quality Commission and Monitor.

There will be further guidance during 2012/13 on the operational requirements for the transfer of education and training responsibilities from Strategic Health Authorities to Health Education England and the subsequent devolved responsibilities of Local Education and Training Boards.

Specific guidance has been published to assist emerging Local Education and Training Boards in establishing individual arrangements that best meet the needs of their locality, and to support them in producing their own operating models. It is this guidance which shall provide clarification on more specific aspects of Local Education and Training Board development, such as the roles and responsibilities of mandated posts within the executive teams.

## Workforce Planning Process and Information Flow

Changes to the workforce information landscape will be required to help organisations undertake workforce planning and education and training commissioning in the changing NHS environment. The main source of information about the healthcare workforce is the Electronic Staff Record (ESR), which provides data on directly employed staff groups within hospital and community health services. In addition to the ESR, workforce information is drawn from a range of other local and national sources.

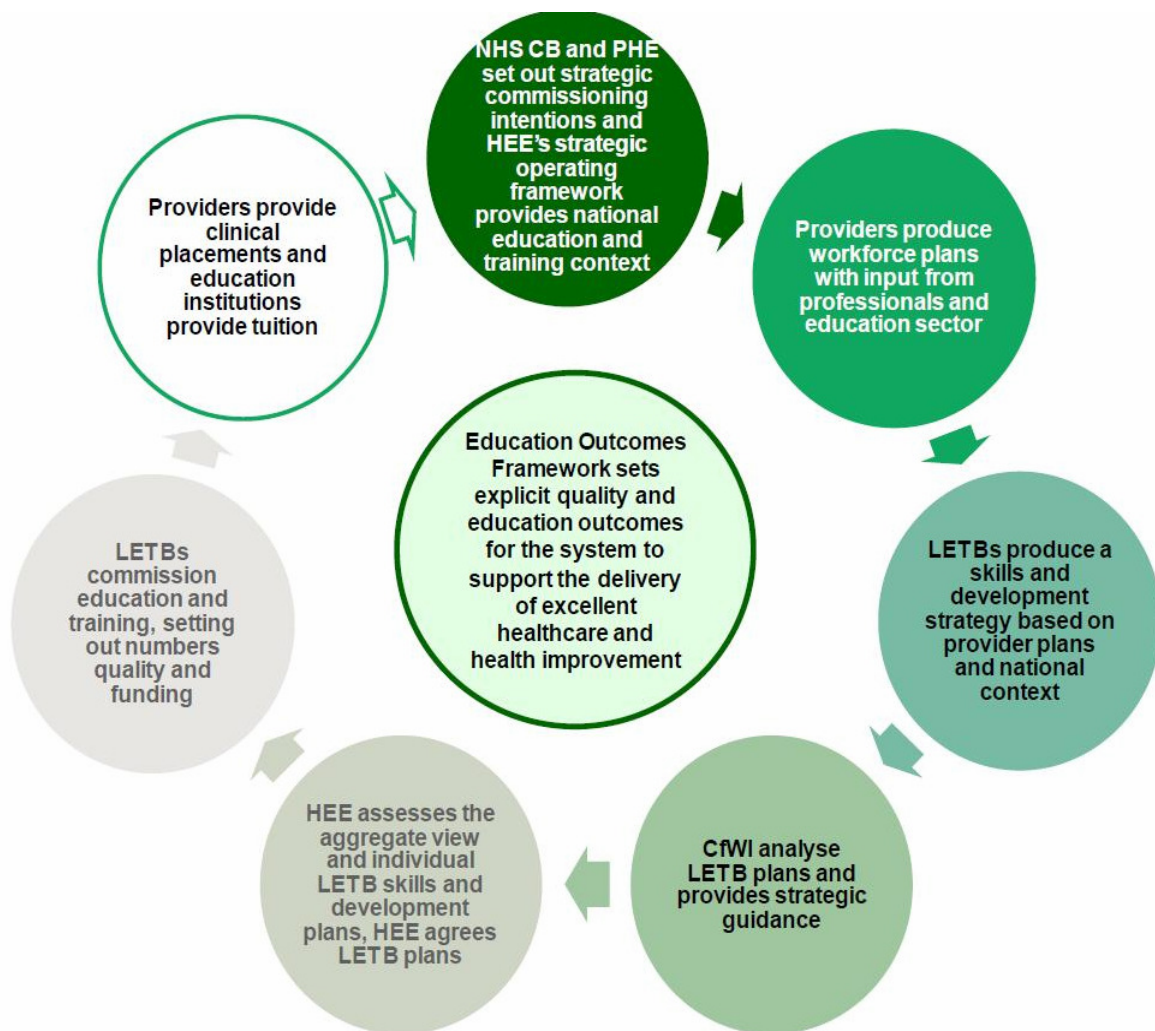


In collaboration with the Department of Health, Health Education England is reviewing future requirements for workforce information to support the workforce planning cycle. More detailed proposals for the necessary architecture will enable accurate, comprehensive and timely reporting of workforce information.

In the new system, there will be a range of users of workforce information:

- Local Education and Training Boards will need information from local organisations providing NHS and public health services and from higher education to develop a robust education commissioning plan
- Health Education England will use workforce information to plan and allocate investment in education and training
- The Department of Health will require information to support public accountability.

A high level overview of the workforce planning process and flow of information through the education and training system is illustrated below.



The Centre for Workforce Intelligence will provide expert advice to Health Education England and support workforce planning and commissioning at a national and local level. It will support and advise Local Education and Training Boards on the delivery of their workforce plans and provide information to the Department of Health to inform resource allocation.

Health Education England will work with Public Health England, local government and the Centre for Workforce Intelligence to secure a relevant minimum data set of workforce information about the public health workforce. Local Education and Training Boards and Health Education England will be informed about the current and planned workforce across public health services to take into account in workforce and education commissioning plans.

## Funding

The Multi-Professional Education and Training budget allocation is a significant budget. The scope of the allocation coverage will be set out in the Strategic Education Operating Framework. It includes flexibility for education for the current and future professional workforce.

It is important that the NHS arrangements for funding healthcare education and training are robust and transparent, and that there is a clearer link than hitherto between funding and the quality and quantity of activity. Without that link, it will be hard for Health Education England to achieve its aim of improving the quality and value of education and training for the workforce.

The geographical allocation of Multi-Professional Education and Training budget, and the introduction of education placement tariffs, have been the subject of work by the Department of Health and the Strategic Health Authorities over the last five years. A Strategic Education Funding Expert Group is continuing this work. The aim is to ensure the best possible basis for Health Education England to build on, gain support from stakeholders, and develop manageable implementation plans that are phased in a way that will achieve changes without destabilisation.

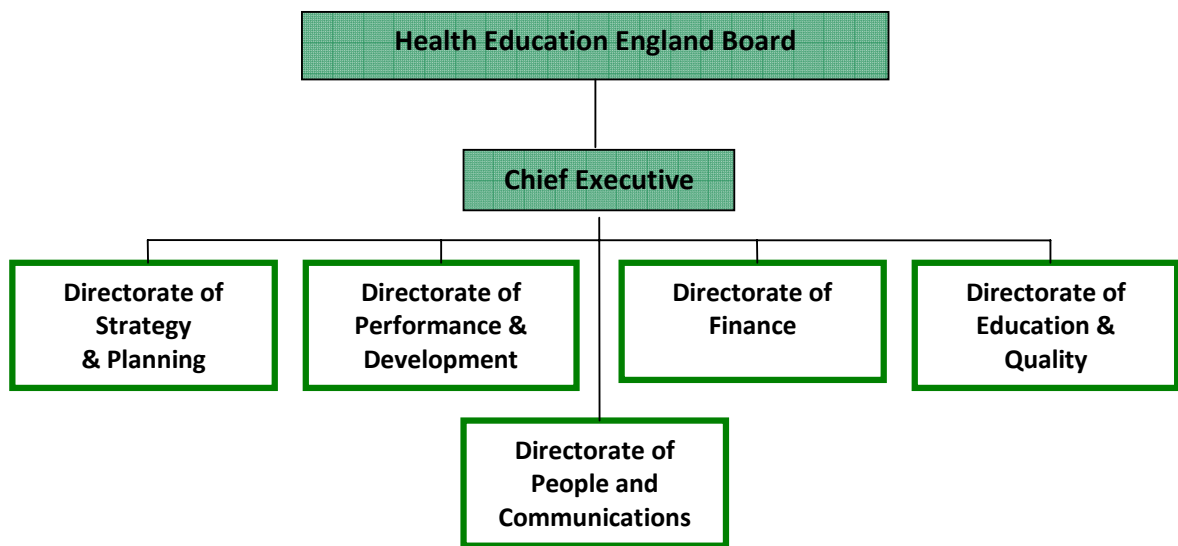
Standard tariffs already exist for contracts with Higher Education Institutes. From April 2013, Health Education England shall start to implement new national tariffs for education placements with service providers, allowing an appropriate transition period. Different tariffs will be set for different professions. The tariffs will be further developed through the inclusion of education within the annual reference costs exercise. Over time, parts of both tariffs will be aligned to quality payments similar to Commissioning for Quality and Innovation payments for service tariffs.

The size of the Multi-Professional Education and Training budget from 2013/14 will be determined by the Department of Health during 2012/13. Running costs for workforce and education activities currently undertaken by Strategic Health Authorities will reduce by one third from a 2010/11 baseline, by 2014/15, and running costs ceilings for Local Education and Training Boards will be set.

Health Education England shall provide a central finance function with the necessary systems, annual accounts, audit requirements and Treasury management. There will need to be local financial management and local finance staff accountable to the Local Education and Training Boards. The finance and business rules will ensure that there is a consistent and transparent financial framework applied across NHS organisations. The key for 2012/13 is to provide continued financial stability.

## Organisation Structure

The suggested high-level organisational design of Health Education England, subject to the views of the new Chief Executive designate Ian Cumming, is outlined below.



**Directorate of Strategy and Planning** - to lead the development of Health Education England's strategic framework to reflect the long term strategy needs of the health and public health service.

**Directorate of Performance and Development** - to provide national leadership for the development and performance management of Local Education Training Boards.

**Directorate of Finance** - to develop and deliver a national finance strategy for Health Education England.

**Directorate of Education and Quality** - to provide clinical leadership for Health Education England and ensure high quality education and training for the health care workforce in England. To ensure that education and training reflects the needs of patients and communities.

**Directorate of People and Communications** - to lead and direct the people, communication strategies and other corporate development strategies so that all partners and stakeholders are fully engaged with the organisation's plans and can support delivery of a workforce which meets the needs of the service.

*These structures will apply in the initial stages of the development of the Special Health Authority but will be subject to change as the organisation develops and Health Education England takes on its full responsibilities.*

*The structures in this document cover Health Education England centre only; they do not reflect all the functions previously undertaken by Strategic Health Authorities; these will be incorporated into Local Education and Training Boards.*

## A Stable and Phased Transition

Initial work with shadow Local Education and Training Boards has confirmed that providers want to take greater responsibility for education and training and support the new approach to workforce development. The staged timescales for transition and oversight from Health Education England shall give providers time to build leadership within Local Education and Training Boards and develop partnership working.

Strategic Health Authority clusters will continue to be accountable for planning and commissioning education until they cease to exist in March 2013. The new provider-led arrangements shall be in place to start operating from April 2013.

Until April 2013, Strategic Health Authority clusters will work with local employers to manage the transition and work towards setting up Local Education and Training Boards. Local Education and Training Strategic Health Authority sub-committees are the precursor to Local Education and Training Boards. The scope and level of independence of these will depend on the progress made in building commitment, capacity and capability to meet the Health Education England authorisation process. Strategic Health Authority clusters will be responsible for ensuring a high level of business continuity during the reforms. Strategic Health Authorities are required to plan for the novation of education and training contracts and other agreements, both formal and informal to successor bodies.

The relationship between Local Education and Training Boards and Health Education England will be a developmental one. Local Education and Training Boards will be able to determine the pace they wish to progress, in line with wider system reforms and local priorities. The extent to which the arrangements enable greater employer accountability for decision making and development of the workforce will be kept under review.

The Human Resources Transition Framework underpins wider system reforms that will apply to Strategic Health Authority cluster staff who are engaged in education and training functions. In collaboration with their Education and Training sub-committees, Strategic Health Authority clusters will need to implement processes to ensure staff are treated consistently and fairly. This shall support Local Education and Training Boards in retaining the skills of staff currently working in workforce planning, education and training in the Strategic Health Authorities and Postgraduate Deaneries.

During transition, those working in Strategic Health Authority workforce teams and Postgraduate Deaneries, as well as those undertaking a national education and commissioning role, will continue to provide operational management for education and training. This will include responsibility for recruitment to medical and other education programmes, contract and quality management, and education planning and commissioning in 2013/14.

Key next steps include:

- May/June 2012- Health Education England Chair, Chief Executive and Non Executive Director's appointed
- June 2012 - Health Education England established as a Special Health Authority
- July 2012– Local Education and Training Board authorisation documentation published
- By July 2012 – Shadow Local Education and Training Boards operational
- October 2012 – Medical Education England decommissioned
- October 2012 - Health Education England commences operating as a shadow Special Health Authority
- October 2012 onwards - Local Education and Training Board authorisation process
- April 2013 – Health Education England fully operational and Local Education and Training Boards authorised

### Success Indicators – Year on Year Improvement

*“The patient, service user or citizen within their community is the ultimate stakeholder for whom improved outcomes must be realised”*

Within three years Health Education England will aim to have made significant progress in leading and developing the new whole system approach to training and education. Key success indicators have been identified as follows:

- Health Education England and Local Education and Training Boards will have enabled a demonstrable shift to demand-led workforce planning led by employers working with staff and patient representatives
- There will be effective professional engagement at local and national levels, with professional bodies and Royal Colleges taking a lead role on safety and quality issues
- There will be clear links between service and workforce planning leading to safer, high quality healthcare
- Supply of the healthcare workforce, in terms of numbers of staff and skills, will be secure
- There will be clear levels of improvement within the domains of the Education Outcomes Framework - through a link between education and training and improvements in patient care

- Arrangements for planning and developing the healthcare workforce will be integrated with the approaches to planning and developing the public health and social care workforce
- The distribution of funding will be transparent and equitable across providers, with the right accountabilities and incentives at a local and national level
- Increased confidence in the workforce development, education and training system from the public, professional bodies and Royal Colleges, employers, the education sector, local government, Parliament, the Department of Health, NHS Commissioning Board, Clinical Commissioning Groups and Public Health England.

*Achieving the above indicators will be subject to the funding available.*

## Annex 1 – Health Education England’s relationships with other bodies

### **NHS Commissioning Board**

Health Education England will work with the NHS Commissioning Board to ensure that its strategic framework for education, training and workforce planning reflects service commissioning priorities. It will ensure that workforce development issues and changes in services are identified and addressed in a timely and effective manner.

### **Public Health England**

Health Education England and Public Health England will work together to ensure appropriate investment in education and training for public health professionals. Health Education England will ensure that Public Health England and the rest of the public health system has the scientific and professional specialists needed.

### **NHS Employers**

Health Education England will work with NHS Employers supporting their role as HR experts, enabling employers to put the voice of patients first.

### **National Institute for Health Research**

Health Education England will work with the National Institute for Health Research to ensure appropriate investment in education and training, to develop the clinical research workforce. This shall help to create a wider

health service workforce receptive to research and innovation.

**Monitor**

Health Education England will be involved in the development and setting of education and training tariffs. This will include working with Monitor and the Department of Health to ensure that processes reflect the wider roles and responsibilities for the development and setting of service tariffs.

**Care Quality Commission**

Health Education England will be responsible for the quality assurance framework around education and training commissioning. It will work with the Care Quality Commission to ensure education and training outcomes support the delivery of service quality outcomes. The Care Quality Commission will ensure standards are met and share specific intelligence with Health Education England on staffing standards and competences.

**Centre for Workforce Intelligence**

The Centre for Workforce Intelligence will provide authoritative and objective advice on workforce planning to the education and training system. It will provide national oversight and leadership on workforce planning and commissioning education and training. The Centre will support and advise local provider-led partnerships on the delivery of their workforce plans and provide information to the Department of Health/Health Education England to inform resource allocation.

**NHS Information Centre**

The NHS Information Centre will provide national oversight and leadership to Health Education England on workforce planning and commissioning of education and training. The centre will support Health Education England by collecting, analysing and supplying workforce data.

**Professional regulators**

Health Education England will develop strong working relationships with the independent



professional regulators. Strong relationships with these key stakeholders will support effective mutual working, and promote quality in education and training and responsiveness to innovation and changing service models.

### **Professional bodies and Royal Colleges**

Health Education England will develop strong working relationships with the professional bodies and Royal Colleges. Strong relationships with these key stakeholders will help promote quality in education and training and responsiveness to innovation and changing service models.

### **Local Education and Training Boards**

Health Education England will develop constructive working partnerships with Local Education and Training Boards. It will allocate multi-professional education and training budget funding and hold Local Education and Training Boards to account for their investments against the Education Outcomes Framework and national priorities set out in the Strategic Education Operating framework.

### **Higher Education Funding Council for England**

Health Education England and Higher Education Funding Council for England are responsible for planning and funding all higher education for the healthcare sector and the key health professions. The relationship between the two bodies will develop as Health Education England takes on its full national leadership role and the Council adapts in response to higher education reform. Health Education England, Higher Education Funding Council for England, Higher Education Institutions and Local Education and Training Boards will need to share information and deliver a joined-up approach to managing risks associated with investments in health education.

**Sector Skills Councils**

Health Education England will work with Sector Skills Councils - particularly Skills for Health and Skills for Care - to develop competences across the health and social care workforce and to support the development of the wider healthcare team.

**Academic Health Science Centres / Networks**

Health Education England and Local Education and Training Boards will need to ensure they have a close, effective working relationship with the present Academic Health Science Centres, and the emerging Academic Health Science Networks. This shall include cross-membership at Board level.

**Devolved administrations**

Health Education England will work with devolved administrations to establish appropriate pan-UK workforce, education and training arrangements. This will include consideration of changes to the terms of reference of the UK Scrutiny Group and any other relevant UK-wide bodies.

Health Education England anticipates publishing details of such pan UK arrangements as soon as is practicable.

**Local Authorities**

Health Education England will develop strong working relationships with Local Authorities. Strong relationships with these key stakeholders will help promote quality in education and training and responsiveness to innovation and changing service models.