

Building Sustainable NHS Teams

Welcome to The National NHS Workforce Summit!



5th November 2024
15 Hatfields Conference Centre,
London SE1 8DJ



Building Sustainable NHS Teams

Chair Opening Address



Patrick Mitchell
Healthcare Consultant
Lecanora Ltd & Convenzis Advisory Board
Member



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Panel Discussion



Fiona Hogg Chief People Officer, Health Workforce -Scottish Government



Dr Peter Brown
Aneurin Bevan University
Health Board - Assistant
Director Workforce and
Organisational Developement



Alan Duffell
Group Chief People Officer
The Royal Wolverhampton
NHS Trust and Walsall
Healthcare NHS Trust



Building Sustainable NHS Teams

Case Study





Building Sustainable NHS Teams

Case Study



Zita Stone

Associate Dean Graduate Studies and Postgraduate Student Experience Kent Business School, University of Kent



Senior Leader Apprenticeship (SLA) routes at

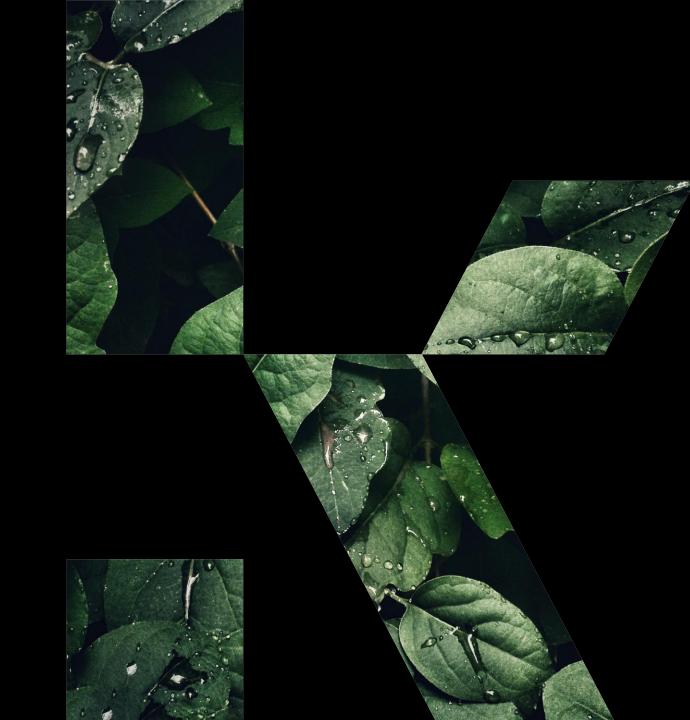
Kent Business School

Dr Zita Stone

Associate Dean of Graduate Studies and Postgraduate Student Experience

Kent.ac.uk/Kent-business-school





Kent Business School



- Triple Accredited Business School Top 1% of business schools in the world.
- 19th in the UK for Business and Management (Guardian Ranking 2024)
- Outstanding graduate employability with our career focused degrees
- Commitment to student enterprise ASPIRE
- Impactful research to address global challenges (REF2021 80% of KBS research deemed as 'world leading' or 'internationally excellent')
- Our Mission To develop the next generation responsible leaders and entrepreneurs who make a difference in the world











Top 20

in the UK for Business and
Management
(Guardian Ranking 2025)

89%

of Business students are in work and/or study within 15 months after graduation
(Graduate Outcomes Survey 2020/21)



For A Sustainable Tomorrow



































Sustainability matters - At KBS we embed the UN Sustainable development goals into every module – ensuring that what you learn is relevant for the future. Some modules use case studies to explore all 17 Goals!

Research Topics that matter - Many students choose to do research projects in their EPA and MSc/MBA top-ups on topics related to sustainability or ethical business practices.

Get Involved in Events - KBS subscribes to the UN's Principles of Management Education, meaning that we'll often host events with a sustainability theme – (e.g. A "Invest Competitively" with focus on sustainable financing and investment)

Get Involved in the campus - Our campuses are sites of ecological regeneration that are cocreated with learners (e.g. the Diamond Anniversary Orchard project) so you can get involved outside the classroom.

Senior Leader Apprenticeship



- KBS currently delivers the SLA standard in 2 locations, London and Canterbury. We do this via two different delivery modes.
- Journey:
- 1. Senior Leader Apprenticeship (16 24 months)
- 2. End Point Assessment (6 months)
- 3. MSc or MBA top-up (4-6 months)













Senior Leader Apprentice *Temi*



- Started the SLA in London in AY 23/24 September 2023
- Now taking the final module of Yr 2 the SLA is delivered in 16 months

Module
BUSX7500 Leadership Today
BUSX7501 Sustainable and Ethical Leadership
BUSX7502 Financial Responsibility and Leadership
BUSX7503 Strategic Leadership in the Global World
BUSX7504 Leadership and Marketing
BUSX7505 Leading Change through Collaboration and Teamwork
BUSX7506 Leading People
BUSX7507 Research and Consulting Methods

- each module lasting 6-8 weeks with in-person delivery across 3 days (Day 1 and Day 2 on a Thursday and a
 Friday of the first week of a module, and Day 3 on a Friday of the fourth week of the module)
- the remaining time spent on self-directed learning, group or 1:1 meetings with the tutor, work on assessments and submission of assessments.

Senior Leader Apprentice *Temi*



- After 16 months progressing onto the End Point Assessment (up to 6 months) March September **Qualification:** PG Diploma in Senior Leadership.
- An option to progress onto an MSc (4 months), this is no longer part of the apprenticeship.
- 2 options for a top-up to a Master's qualification

Qualification: MSc Senior Leadership in Management OR MSc Senior Leadership in Healthcare.

MSc top-up courses MSc Senior Leadership in Healthcare (Top-Up) BUSBXXX Critical Perspectives on Global Sustainable Healthcare BUSBXXX Integrated Healthcare Systems and Collaborative Practices in Healthcare Management BUSBXXX Capstone Research Project MSc Senior Leadership in Management (Top-Up) BUSBXXX Cultural Intelligence BUSBXXX Innovation and Entrepreneurialism BUSBXXX Capstone Research Project

Senior Leader Apprentice *Temi*



Assessments for PG Diploma Senior Leadership

Module	Assignment A		Assignment B	
iviodule	Туре	Weighting	Туре	Weighting
BUSX7500 Leadership Today	Pre-recorded Individual presentation - 10 minutes	20%	Individual report - 3000 words	
BUSX7501 Sustainable and Ethical Leadership	Pre-recorded Group Presentation	20%	Individual report - 3000 words	
BUSX7502 Financial Responsibility and Leadership	Financial performance review (3000 words)	80%	Individual pre-recorded case study presentation - 10 minutes	
BUSX7503 Strategic Leadership in the Global World	Individual Written Report - A Strategic vow (2500 words)	60%	% Pre-recorded Individual Presentation - 10 minutes	
BUSX7504 Leadership and Marketing	Individual Pre-recorded Presentation (10 minutes)	20%	% Individual report (3000 words)	
BUSX7505 Leading Change through Collaboration and Teamwork	Pre-recorded Group Presentation	20%	Individual Written WBL Report (3000 words)	80%
BUSX7506 Leading People	Pre-recorded Group Presentation 15 minutes	20%	Individual Report 3000 words	80%
BUSX7507 Research and Consulting Methods	Individual Research Proposal (1500 words)	80%	Project Plan Presentation 10 mins	20%

Assessments for MSc – Top-ups

- Individual and group work assessments
- 8,000 10,000 words Research Project
- No taught classes
- Supported by academic supervisor

Senior Leader Apprentice Caroline



- Started the SLA in Canterbury in AY 22/23 September 2022
- Now in the MBA top-up
- shortlisted as 'Student of the Year 2024' at the AMBA excellence awards (only 6 shortlisted out of 1000's).
- AMBA Student of the Year Award 2025
- The AMBA Student of the Year Award plays a pivotal role in supporting AMBA's pledge to promote the MBA as the leading international business qualification.
- The AMBA Student of the Year Award recognises students who have shown exceptional career potential and who AMBA believes can act as ambassadors for the high quality of accredited MBAs and the opportunities these programmes provide for students.
- This award doesn't just recognise 'straight-A' students but also focuses on leadership potential and career progression.

Senior Leader Apprentice Caroline



After 24 months progressed onto the End Point Assessment (up to 6 months)

Qualification: PG Diploma in Business Administration

Module Code	Title
BUSN9410	Strategic People Management
BUSN9062	Leadership and Change
BUSN9143	Financial Analysis for Decision-Making
BUSN9430	Operations Management
BUSN9440	Strategic Marketing & Communication
BUSN9085	Corporate Social Responsibility and Sustainability Management
BUSN8870	Entrepreneurship
BUSN9099	Delivering Innovation
BUSN9088	Business Analytics
BUSN9144	Global Strategy and Economics

- Progressing onto MBA an intention stated at the outset (Interview stage)
- SLA has to be taken as part of the MBA journey

Qualification: MBA

Module Code	Title
BUSN9193	MBA Challenge

Enjoying the Journey...

Graduating at historic Canterbury or Rochester Cathedral













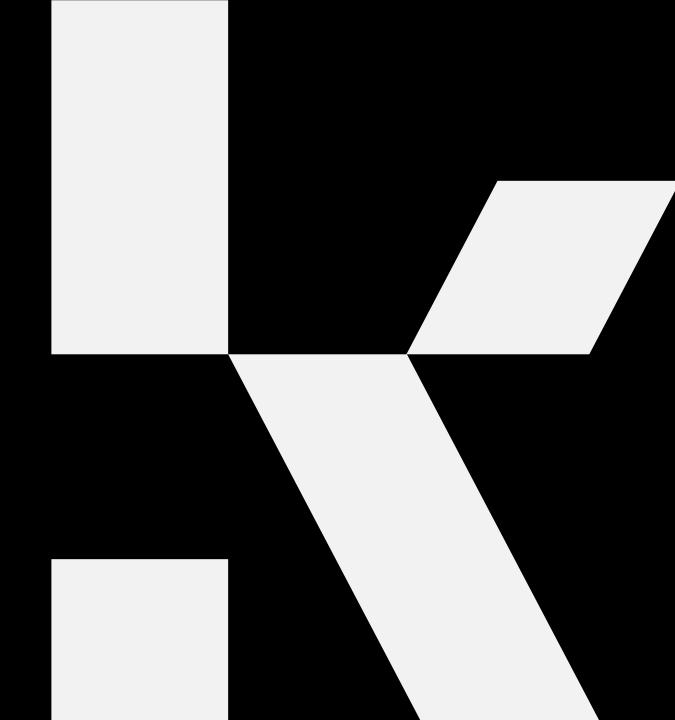




Thank You.

A Sustainable Tomorrow

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Refreshments & Networking



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Chair Morning Reflection



Patrick Mitchell
Healthcare Consultant
Lecanora Ltd & Convenzis Advisory Board Member



Case Study

Remedium



Building Sustainable NHS Teams

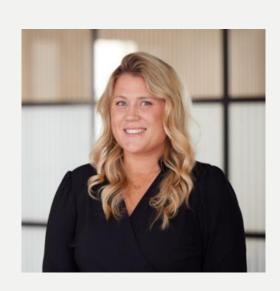
Case Study



Suveer Gill

Business Development and Commercial

Director - Remedium Partners



Chloe Cotter

Managing Director

Remedium Partners

Remedium

Suveer Gill Business and Commercial Director

I joined Remedium as the Business and Commercial Director after progressing through various roles operational roles within the NHS.

Over the course of 10 years in operational positions across NHS trusts in London, I witnessed firsthand the significant challenges that hiring managers in the NHS face.





Some of the key challenges I encountered included:

Lengthy Hiring Processes

Retention Issues

Competition for Talent

Difficulty in filling Niche Roles

Remedium has successfully diversified our services to address virtually any vacancy-related challenge

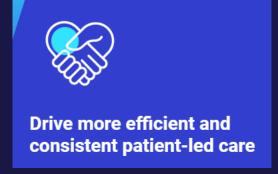




Remedium Overview

We are on a mission to help solve the NHS staffing crisis.

Remedium specialise in recruitment of permanent healthcare professionals to support the NHS workforce demands. Since 2013 we have supported our NHS partners to:





Address future healthcare workforce staffing demands



Reduce excessive agency locum spend



Remedium Overview

We have spent the past ten years developing a tailored support offering, which now includes:

Contingent Recruitment

Executive Search

International Projects

Digital relocation and onboarding platform

Workforce Consulting

Recruitment Process
Outsourcing and
Account Management

Employer Branding

CPD accredited
Communication Course



Key Statistics



4000+
Permanent placements into the NHS.

£400 million In savings for the NHS.





International Projects

15 completed with 14 Trusts





Recruiting from source



"Since professional training takes several years, the NHS will be highly dependent on recruiting from overseas for the next five years, and retaining current staff, if vacancies are to be filled."

Alex Baylis, Assistant Director of Policy at The King's Fund

- The UK simply does not have the means to support the NHS at this moment in time.
- The combination of lack of medical placements domestically and current rates of attrition means that dependency on international clinicians will remain the same, if not increase.
- The NHS Long Term Plan aims to reduce the current heavy reliance on internationally trained staff by strengthening the domestic workforce
- The plan to develop a predominantly domestic workforce within the next 15 years faces significant challenges, particularly in light of current workforce shortages and the growing demand for healthcare services.
- With vacancies expected to rising to nearly 200,000 by 2036, it's clear that any feasible workforce strategy will need to rely heavily on continued recruitment from overseas.



Strategies for Attracting International Clinicians

- Strategic targeted recruitment at source
- Employer Branding Interviewing key stakeholders to understand key selling points, market perception and creating specific employer branding campaigns



Employer Branding

Relocation Packages





Strategies for Retaining International

Clinicians

- Induction and smooth transition
- Use of digital technologies to streamline onboarding
- Social events to support settling in period



Communications Course



Our pioneering, CPDaccredited induction course A communication and cultural integration course specifically designed for international healthcare professionals







Cost Savings Calculator

Grade	Locum Cost	Permanent Staffing Cost	Saving
ST1-2	£274,210	£167,449	£106,760
Registrar (ST3+)	£341,840	£201,217	£140,623
Specialty Doctor/Staff Grade	£531,545	£246,073	£285,472
Associate Specialist	£598,000	£321,689	£276,311
Consultant	£704,152	£384,067	£320,085

Cost savings worked out based on NHSi Locum capped rates and NHS salary bands over a 3 year period.



Case Study - Southern Health and Social Care

The Problem

Southern Health and Social Care Trust, located in Northern Ireland, had struggled with recruitment and retention. Emergency measures were put in place at the Daisy Hill site earlier that year to ensure safe levels of staffing were maintained, following the resignation of several consultants.

Services reduced at Daisy Hill Hospital due to staff shortages

DAISY HILL HOSPITAL



Home / News / Health

Doctor shortages 'exacerbating the hospital waiting list crisis'

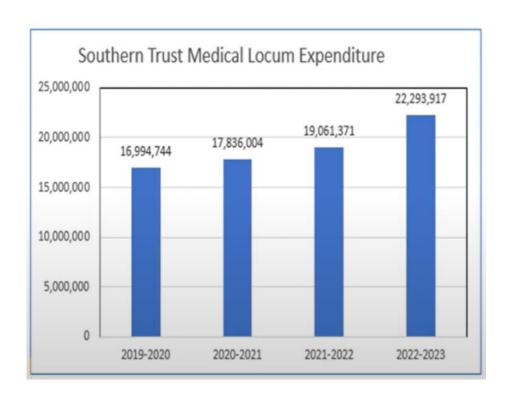




Case Study - Southern Health and Social Care

The Problem

- ➤ Agency Locum spend 22.3M (22/23)
- > 25,800 ad hoc locum hours filled
- ➤ 155 Long Term Locum Doctors (49 Consultant level)
- National, Regional and Local Medical Staff Shortages





The solution

Collaborative Recruitment Project Between Remedium and Southern Health

This project required close collaboration, with a dedicated account manager, regular meetings, and an onboarding plan set up before the recruitment drive began.

Key achievements:

- 100+ in-person interviews organised in India
- Covering a range of roles and specialties.
- Tailored pre-screening and meetings with each department ensured that sourcing was aligned with specific needs.
- An extensive digital campaign boosted the recruitment drive's visibility.
- Remedium's support freed up valuable admin time for Southern Health, enabling their teams to focus on pastoral care and onboarding.
- Remedium's expertise allowed Southern Health to continue daily operations smoothly while securing top talent for critical positions.





The outcome

70 doctors hired over one weekend Estimated savings: £3.8 million

100% job acceptance

Placements made:

16 Consultants16 Trust SAS/ST338 Resident Doctors







Thank You



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Case Study

iD Medical



Building Sustainable NHS Teams

Case Study



Joseph Topa
Director
ID Medical



David Newton

Managing Director

ID Medical



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Interview Session



Jyoti Mehan CEO - Health Care First



Building Sustainable NHS Teams

Case Study





Building Sustainable NHS Teams

Interview Session



Laura Hughes Head of Data Acquisition - Experian



I thought Experian provided my credit score...

Why are you at the NHS Workforce Conference?



Traditionally, Experian were a credit reference agency

But things have moved on.

We now need to use more data, in different ways, to help businesses and consumers.



- 1. Why and when it is needed
- 2. The problems with the system today
- 3. Financial exclusion
- 4. Experian's solution
- 5. How this benefits everyone
- 6. How you can participate (it's free!)
- 7. Credit education for employees



Through life's little and big moments – we must

prove where we work and what we earn

These aren't just one-off occurrences.

We estimate that the average consumer makes 1.4 applications every year that require income or employment verification.





Major purchase

Proof of income for a car loan or new sofa.





Getting a snazzy new mobile handset on finance





New job

Verifying employment history for new job.



Getting a credit card

Proof of income to ensure affordability.



Buying a home

Income verification for mortgage approval.





Leaving home

Proof of employment and income for renting a flat.





Different scenarios require consumers to share different levels of income and employment data

How this is done is often inefficient, inconvenient and insecure

George Income and employment



A mortgage lender requests evidence of George's income & employment

- 1. George requests employment letter from HR.
- 2. Downloads/requests payslips from payroll.
- 3. Sends to lender by post, email, or portal upload.
- 4. Lender receives and manually reviews.

Maria



While applying for credit online, Maria is asked for her income

Income

- 1. Maria inputs her salary she might need to verify it with payslips.
- 2. The application is processed.
- 3. A decision is made.



Egle

Employment

Egle applies for a new job and gets it

- 1. New employer contacts HR for referencing check.
- 2. HR verify the request is legitimate and that the employee is happy for data to be shared.
- 3. HR provides verification of employment and tenure, and may keep a copy of the consent.

"Role rotations mean a new ESR record and a loss of my payslip history for my previous role"





What this means for George? The real people affected

George

First-time homebuyer

SCENARIO



George is 28 and looking for his next property. He faces the risk of being 'gazumped' for the second time due to not being mortgage ready.

His mortgage product might be taken off the market while his application is being verified.



in 2023 (YBS)

6-weeks

additional time in the mortgage process, due to manual checks



37%

of UK homebuyers were gazumped in 2024, up 6% in just two years.



What this means for HR? The real people behind the process

Sophia

HR Manager of a large retail chain



• 20,000 staff on payroll – increasing for holiday seasons

- Reference requests come to a central inbox. Several team members have access to review and respond.
- · Requests are fulfilled manually.
- Consent must be manually obtained from the employee and logged.
- Employees often chase the references creating more work.
- · Risk of human-error in process.

Experian research suggests...





The impact for Sophia...







UK adults face financial exclusion, and unnecessary costs in these life moments

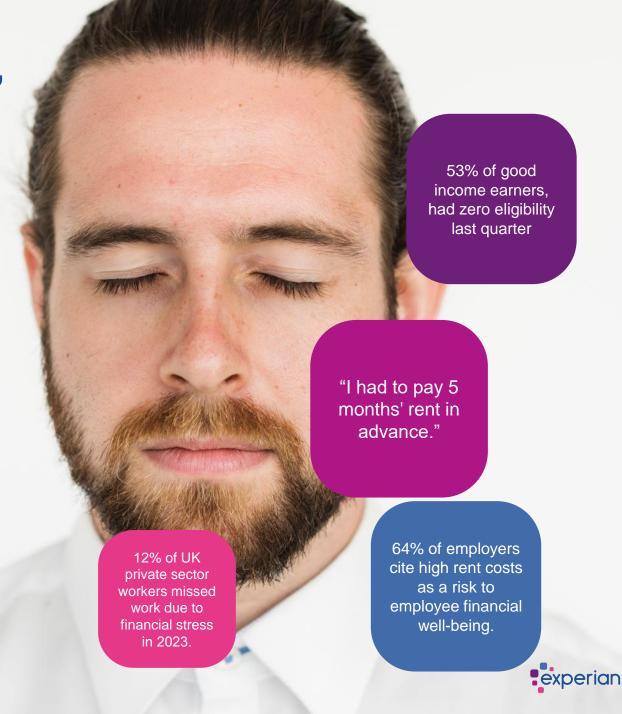
Millions of UK employees are 'financially and digitally' invisible. Which means struggling to rent or buy a home, get a phone contract, or access broadband.

10% of the UK population are credit invisible

Including 2.9 million young people

And 1.2 million new-to-country professionals

It's not just those with thin credit files, half of people are paying more, or being rejected



New-to-country professionals struggle when starting out,

often refused products, or getting worse deals



1 in 5 NHS workers are non-UK nationals, rising to 30% amongst nurses.

NHS DIGITAL, FEB 2024



Accessing benefits

Income proof for pensions, health care, and benefits.



Major purchase

Proof of income for a car loan or new sofa.



A new handset

Getting a snazzy new mobile handset on finance



New job

Verifying employment history for new job.



Getting a credit card

Proof of income to ensure affordability.



Buying a home

Income verification for mortgage approval.



Leaving home

Proof of employment and income for renting a flat.





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Lunch & Networking



Building Sustainable NHS Teams

Chair Afternoon Address



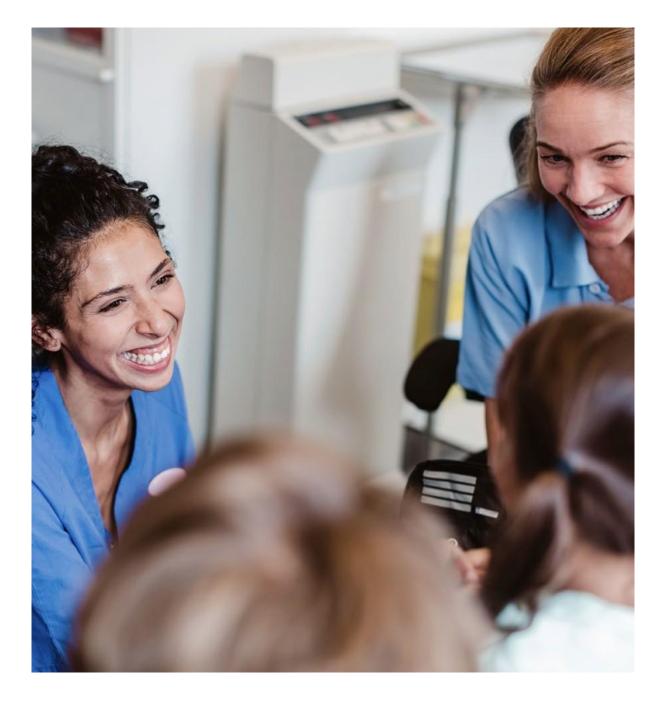
Patrick Mitchell
Healthcare Consultant
Lecanora Ltd & Convenzis Advisory Board
Member



Building Sustainable NHS Teams

Case Study







NHS Workforce Alliance:

Convenzis – National workforce summit, November 2024.

NHS Workforce Alliance

Delivered by:

Crown Commercial Service
NHS Commercial Solutions
NHS East of England Collaborative Procurement Hub
NHS London Procurement Partnership
NHS North of England Commercial Procurement Collaborative

workforcealliance.nhs.uk

Agenda



- 1. Commercial practice in an NHS workforce context
- 2. Collaborative working with HR professionals
- 3. The NHS Workforce Alliance



Workforce Alliance

Commercial Practice in the NHS workforce context.

Delivering sustainable workforce models through strategic planning, stakeholder engagement and effective contract management.

Procurement v Commercial: an important distinction.

Context

NHS workforce challenges, 5 key pillars of the NHS Long term workforce plan

Financial pressure – Productivity and Efficiency targets, agency expenditure caps.

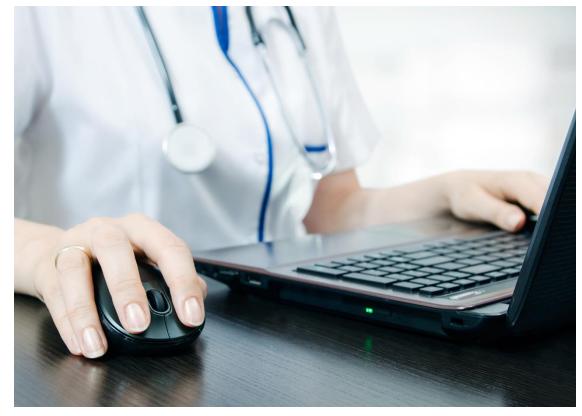
Quality assurance – Need to deliver safe and auditable care.

Market size and complexity – Workforce technology suppliers.

Supplier relationships – strategic and operational.

Internal buying policies, practices and processes

An effective commercial strategy can help you manage risk AND achieve your workforce policy objectives



NHS workforce supply:

900+ suppliers

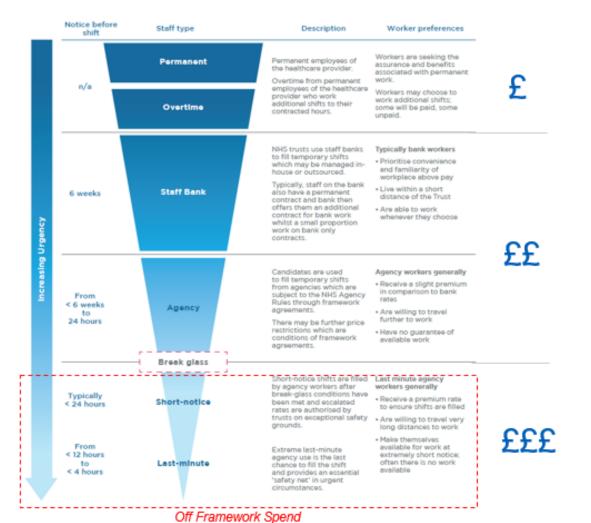
Adapting to changing NHS needs

Strategically working with the supply market to develop new solutions that meet the everchanging needs of the NHS

A fragmented approach to workforce planning



Workforce Alliance



"Why does this model exist in the NHS?"

A recent report from PwC on the use of Contingent Workers in London showed that 29.4% of all temporary placements through Bank and Agency are above the NHSI/E Rate Caps. This not only puts pressure on framework providers, but increases the reliance on off-framework spend. The reason for this is three-fold;

- · Increasing demand in clinical workforce
- Poor Strategic Workforce planning
- Limited technology and planning to address staffing shortages

In addition to the above almost 1/3rd for the nursing workforce is over 50 and there is expected to be shortages of c.250,000 in England by 2030.

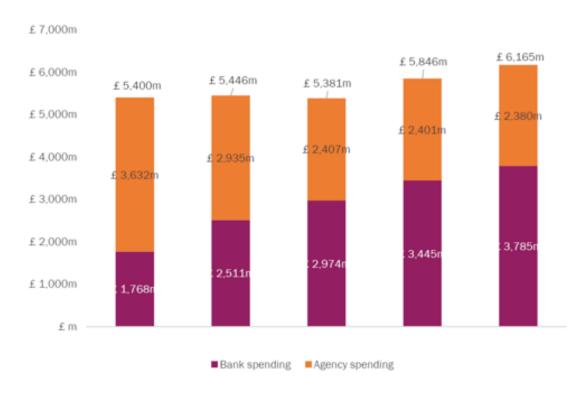
Robust Strategic Workforce Planning across the NHS – with the appropriate systems in place – will ensure the NHS is able to better manage their workforce and reduce reliance on agency / off-framework spend. However, active management will not address the shortages and new ways of working to address the short-fall would need to be actioned, this includes;

- International Recruitment (Short-Term)
- Apprentices and Retraining taking advantage of new talent pools e.g. hospitality (Medium-Term)
- Bursary / Nursing Degree (Long-Term)

The cost of agency versus bank rates in England.



Bank and Agency spend NHS England



LaingBuisson issued a "Healthcare Workforce & Recruitment UK Market Report". The report details that whilst spend in agency remained static during full financial year, bank spend for the same period rose by 27%.

Whilst Workforce Alliance understand there is a national desire to move spend from Agency to Bank, this increase in spend does not directly correlate to an increase in shifts during this period and is simply a cost pressure to the NHS due to one area of spend being regulated and the other not.

In order to fully manage the cost of temporary staffing a uniform approach to pay rates across all routes to market needs to be applied. Furthermore, by managing spend in one place information can be fed to HR decision makers related to total workforce strategies.

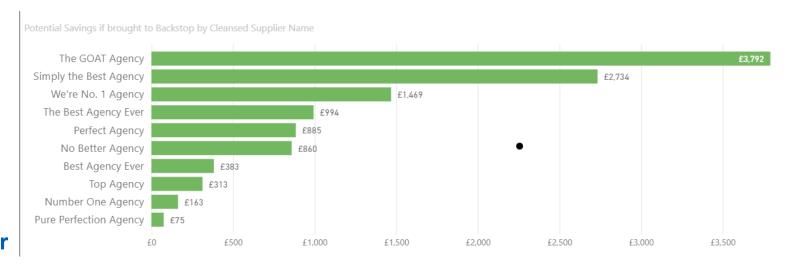
Identify Efficiencies by supplier, shifts and bands





Workforce Alliance

Band and Shift Type	Total Cost	Total Hours	Total Shifts	% of hours over Backstop	Potential Savings if brought to Backstop	Potential Savings if brought to Level 3	Potential Savings if brought to Level 2	Potential Savings if brought to Level 1	Potential Savings if brought to NHSI Cap
AfC Band 5_Day	£3,352,083.15	80,516.87	7,728	16.2396	£8,240	£13,167	£18,814	£24,448	£48,979
AfC Band 5_Night / Saturday	£4,348,801.51	99,429.79	8,766	8.89%	£3,000	£9,829	£14,003	£29,535	£43,363
AfC Band 5_Sunday / Bank Holiday	£944,591.96	20,467.74	1,839	5.40%	£427	£1,427	£3,706	£6,649	£5,732
AfC Band 2_Day	£531,284.14	33,658.11	3,267	0.0096	£0	£0	£120	£123	£837
AfC Band 2_Night / Saturday	£376,380.66	16,758.99	1,462	0.0096	£0	£0	£463	£592	£683
AfC Band 2_Sunday / Bank Holiday	£106,288.75	4,059.52	351	0.0096	£0	£0	£51	£94	£81
AfC Band 3_Day	£12,483.40	758.31	72	0.0096	£0	£0	£0	£0	£21
AfC Band 3_Night / Saturday	£4,125.78	172.30	16	0.0096	£0	£0	£1	£4	£4
AfC Band 3_Sunday / Bank Holiday	£1,841.96	78.74	6	0.0096	£0	£0	£0	£1	£1
AfC Band 4_Day	£6,346.72	304.83	36	0.0096	£0	£0	£0	£6	£24
AfC Band 4_Night / Saturday	£6,305.72	235.56	18	0.0096	£0	£0	£7	£24	£57
AfC Band 4_Sunday / Bank Holiday	£1,312.94	38.61	4	0.0096	£0	£0	£3	£8	£7
Total	£12,799,311.82	323,895.86	31,086	7.10%	£11,667	£27,495	£47,395	£80,050	£129,435



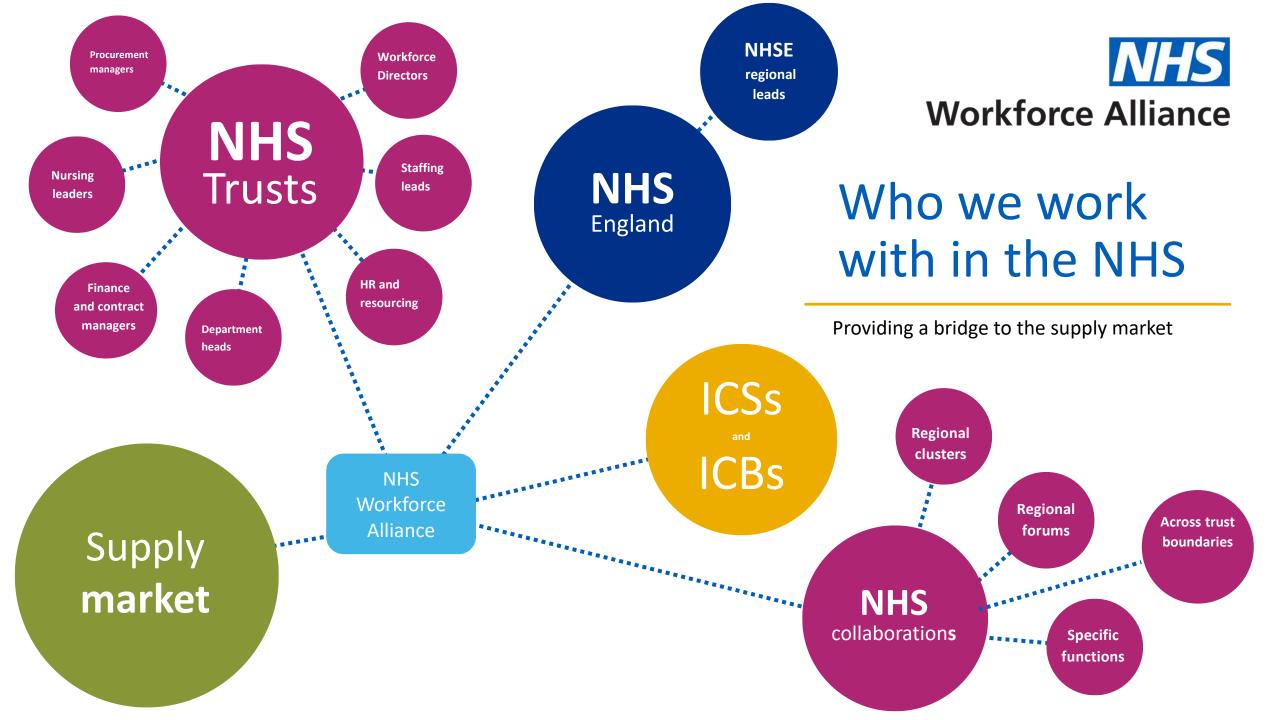
Strategic Supplier Management.



Key priorities

- 1. Release value from key strategic suppliers and partner with those suppliers who support NHS workforce strategies.
- 2. Regular and Proactive engagement with critical markets, including contract and performance management functions.
- 3. Strategic supplier identification also considers the scope of the relationship and future opportunities.
- 4. A structured assessment using the supplier segmentation criteria through robust processes and governance.





North East & Yorkshire **REGIONAL LEAD: Joanne Barton** joanne.barton@noecpc.nhs.uk **East Midlands REGIONAL LEAD:** North West **David Downey REGIONAL LEAD:** david.downey@eoecph.nhs.uk **Lucy Upton** lucy.upton@crown commercial.gov.uk East of England West Midlands **David Downey** david.downey@eoecph.nhs.uk **REGIONAL LEAD: Angela Donohue** angela.donohue@crownco London mmercial.gov.uk **REGIONAL LEAD: Stephanie Alexander** stephanie.alexander@lpp.nhs.uk South East South West **REGIONAL LEAD:** Frances O'Grady **REGIONAL LEAD:** frances.o'grady@nhs.net **Jessica Emmett** jessica.emmett@eoecph.nhs.uk



A national solution,

delivering regionally

Over 30 regional NHS experts with decades of experience in workforce and procurement, many of whom have worked within trusts and on the frontline themselves.

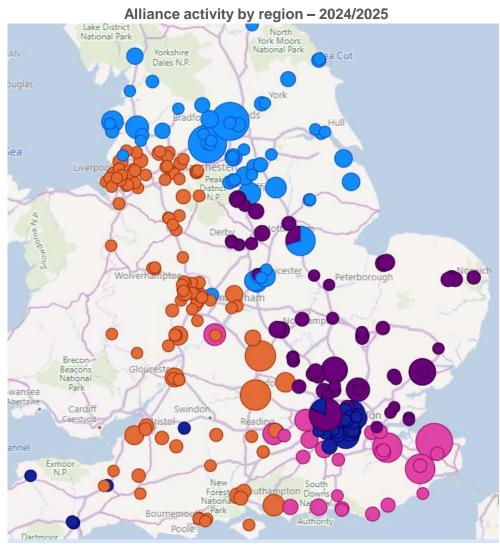
A combined strength covering eight regions working as one team operating at national scale whilst providing a flexible, dedicated service to our NHS colleagues at local and regional level.

Reducing complexity in the market by working with a common national strategy, procuring once and focusing on supplier quality and value to the NHS.

Relieving pressure on trust's internal resources by partnering with functions to support the implementation of NHS England national policies.

A national solution, delivered regionally.

- Workforce Alliance
- An NHS not-for-profit organisation and largest NHS Framework operator
- The NHS Workforce Alliance works with Trusts across all 42 ICSs
- **90** workforce commercial specialists across the 5 partnership organisations
- Portfolio of solutions covering recruitment, flexible and temporary staffing, clinical insourcing, workforce technology and support services
- National category and market management strategy, delivered via strong local relationships with Trusts and ICSs
- Advisory support to NHS to implement workforce strategies
- Social value built into solutions and advice
- Structured SRM programme across suppliers and 40%+ spend via SMEs
- 209 supplier audits completed annually to ensure worker compliance and supporting patient safety



NHS frameworks



Save time and resource of running your own procurement

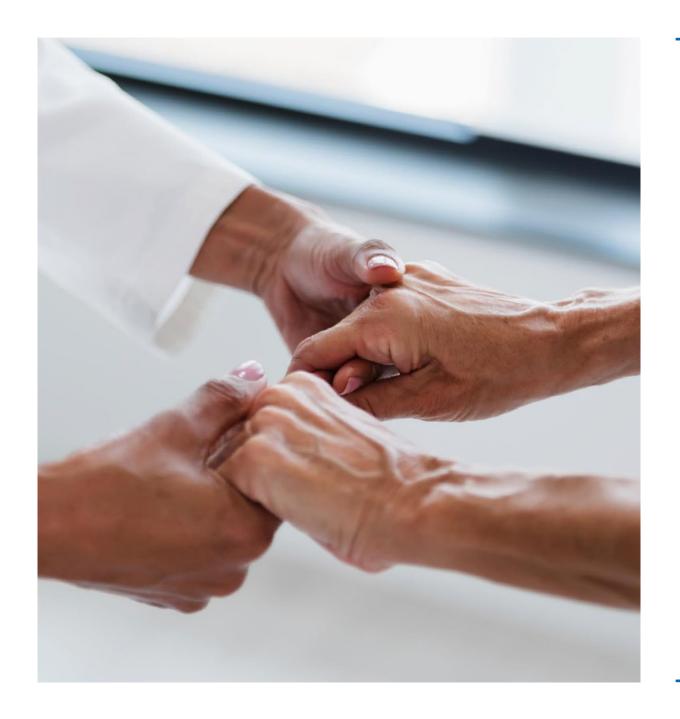
- Free to access framework agreements that cover all NHS staffing requirements.
- NHS England compliant clinical and non-clinical agency staff
- Recruit internationally
- Engage with insourced service providers and managed staff bank providers
- Connect with suppliers that can support HR management, wellbeing or learning & training
- Identify improvements to NHS workforce models.

Supplier spend via frameworks **£1.6** billion

Hours via Clinical
Staffing framework **26 million**

Contingent labour savings
£200 million







Thank You



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THE NATIONAL NHS WORKFORCE SUMMIT

Building Sustainable NHS Teams

Keynote Presentation



Sue Brent
Head of School of Nursing
and Health Sciences University of Sunderland



Emma Dawes
Head of NMAHP Education and
Workforce Development Northumbria Healthcare NHS
Foundation Trust



Success in partnership

Emma Dawes

Northumbria Healthcare

Sue Brent
University of Sunderland





Our partnership

Formal partnership to enable to trust to deliver a range of pre and post registration academic programmes

Built on existing partnership working

Unique in ambition

Shared vision for future healthcare education



Why we did it

Northumbria Healthcare

Future workforce challenges

Using a variety of providers for apprenticeships and programmes

Geography

Community promise and desire to grow our own

University of Sunderland

Partnership development opportunity

Innovation and impact

Commitment to enhance the training and education of healthcare professionals









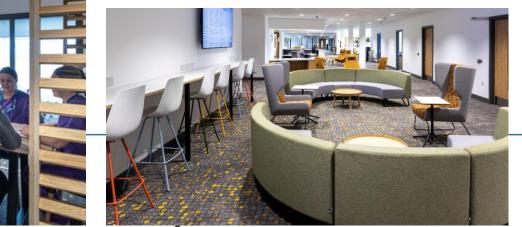




































Our programmes

Trainee Nursing Associate Foundation Degree

Non-medical prescribing qualification

BSc pathway

Enhanced Clinical Practitioner, PGCert

Registered Nurse Degree Apprenticeship (not yet approved)







Our success

Navigating unchartered waters

Doing it our way

NMC praise

First cohorts

Still friends











Our challenges

Differing working practices and assumptions

Navigating the 'rules'



Bringing our respective organisations along with us

Being comfortable with uncertainty



What we've learnt

Keep talking

Keep your eye on the end goal

There is always an answer

Don't be afraid to do it your way







Our future together

Governance and oversight

Learning with and from each other

Building on joint expertise and experience





Questions



THE NATIONAL NHS WORKFORCE SUMMIT

Building Sustainable NHS Teams

Keynote Presentation



Professor Mary (Beth) Mancini PhD, RN, NE-BBC, FAHA, ANEF, FSSH, FAAN

Professor - The University of Texas at Arlington, USA

Expanding University Capacity to Meet Nursing Workforce Demands: A Case Study in Radical Transformation

Beth Mancini RN, PhD, NE-BC, FAHA, FSSH, ANEF, FAAN

Professor Emeritus

The University of Texas at Arlington College of Nursing & Health Innovation

Factors Impacting Universities' Response To The Nursing Shortage

- Limited Access to Clinical Practice Experiences
- Underdeveloped Understanding of Digital Deployment in Education



"Every System Is Perfectly Designed To Get The Results It Gets."



W. Edwarde Dening

Begs the question....

What do we need to change in our current educational programs if we want a different result?

W. Edward Deming Father of Quality Management

https://deming.org/deming-the-man/

INSANITY....

Doing the same thing and Expecting a different result.



http://buda-b.com/2012/09/12/welcome-to-medical-school/



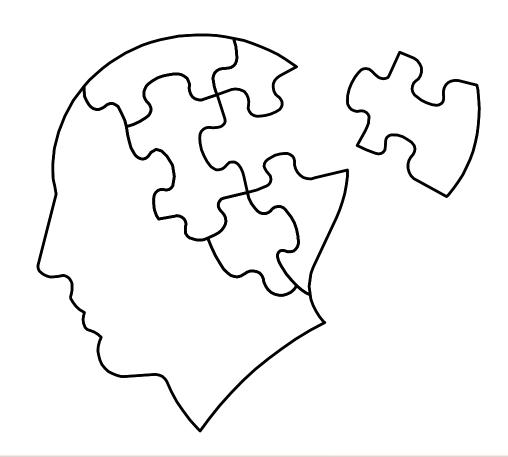
http://www.biosciences.uga.edu/facultystaff/lecture-halls-cabinets-and-keys

"The Challenge Isn't Getting New Ideas Into Our Heads...

It's Getting The Old Ideas Out!"

"Disruptive Innovation" makes it possible for simple, affordable, and accessible products to replace products that are complex, expensive and inaccessible.

Clayton Christensen et al in "Disrupting Class: How Disruptive Innovation Will Change the Way the World Learns" McGraw Hill. 2008



By "Thinking Outside The Box," UT Arlington Developed The Largest & Fastest Growing College of Nursing In A State University In The United States



Pre-registration BSN Program
From 170 graduates/year to >800/year



SO HOW DID WE DO IT?

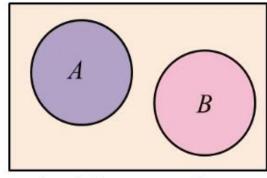
We First Needed To Address Two Commonly Held Beliefs.

- "High volume programs can't provide a quality education."
- "Online (blended) programs are low quality programs."

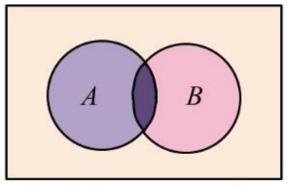


https://www.herzing.edu/blog/how-hard-nursing-school

We Started With The Premise That "High Volume" & "High Quality" Are <u>Not Mutually Exclusive Terms</u>



A and B are mutually exclusive



A and B are not mutually exclusive

The Question We Had To Answer-

Under what set of conditions do "High Volume" & "High Quality" intersect?

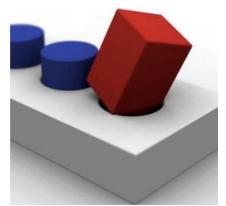
High Quality, High Volume Blended Programs Are Not A Matter Of Chance

To assure student engagement and achievement of program and course outcomes requires a solid curriculum with courses <u>intentionally</u> designed to be "fit for purpose" by leveraging technology (simulation) and using the best practices in online education.

"But we are already doing online programs."

Doing online programs using <u>all</u> the best practices was a different issue.

We had to admit what we didn't know.



We All Want To Do The Right Things. We Need To Make Sure We Do Them Right.



Our Radical Transformation: Starting in 2008, We Developed A Unique Collaborative With Others Who Had Complementary Competencies

- UT Arlington College of Nursing
 - With recognized expertise in nursing education
- Employers of Registered Nurses
 - With a vested interest in the quality & quantity of nurses we produced
- Students
 - Who can and will "vote with their feet"
- Online Program Management Company
 - A company with recognized expertise in coordinating scalable, technology-enriched, online content delivery, and marketing

Key Elements to Our Success

- Focused on making the innovation a "win" for everyone --
- Leveraged technology: Embedded simulation and optimized instructional design
- Worked with an OPM who had expertise in helping universities build scalable programs. In particular, we designed a multi-pronged approach to academic retention:
 - Designed data-driven strategies that allowed for early recognition and intervention with at-risk students.
 - Dedicated Enrollment & Retention Specialists

And, Yes, Planning Matters....



Key Elements To Our Success

- Acknowledged that faculty needed assistance with this new teaching methodology.
- Provided faculty development and instructional designers who worked with faculty to assure courses were designed to be high quality and "fit for purpose."



In 2008, We Started With The Most "Translatable" Program First To Build An Efficient Infrastructure

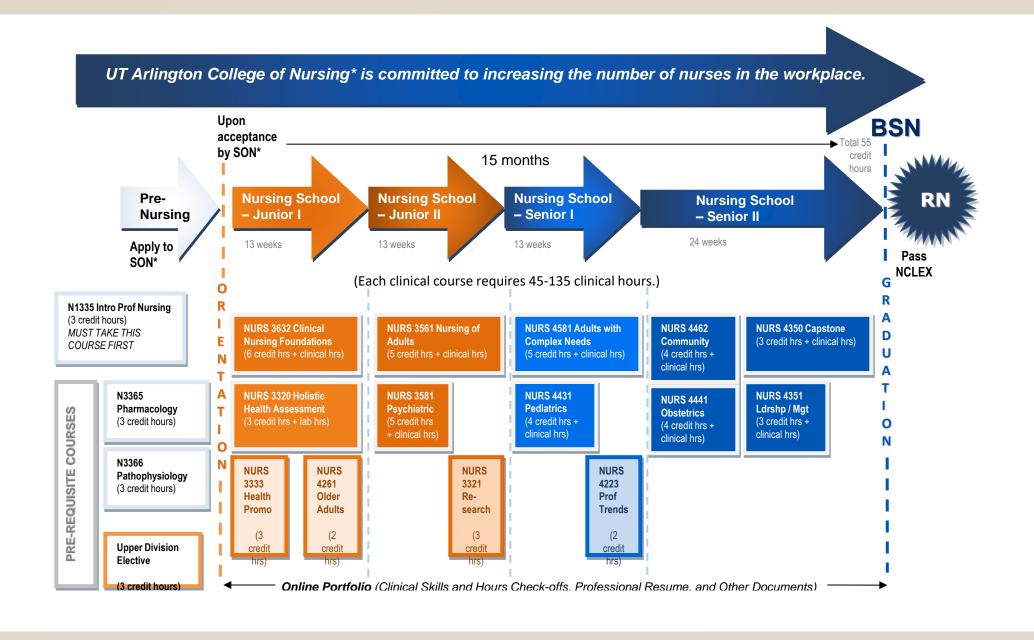
RN to BSN – Degree Completion Program

- Built on the established curriculum
- We worked together to <u>TRANSFORM</u> the delivery of our proven curriculum using instructional designers experienced in developing effective online programs.
- We embraced a technology-enriched modular approach.

In 2010, Building On Our Success With The Completion Program, We Opened A New Blended BSN Program.

An Accelerated Blended Pre-Licensure Program Designed To:

- Significantly increase the number of new RNs by providing a convenient, affordable alternative to on-campus BSN programs.
- Expand geographic catchment areas across the state...capturing rural and nontraditional students...by partnering with hospitals and health systems (In 2024, ~50 sites)
- Create a seamless transition and enhanced readiness-to-practice as cohorts of students are assigned to service (employer) partners.
- Online course delivery combined with faculty-supervised clinical experiences... comparable to those of on-campus students.



Outcome Measures For Prelicensure BSN Program

- Progression to Graduation
 - Blended and on-campus pre-licensure BSN = 90%
- First Time Licensure Rates
 - Blended and On-campus = 90%
- Overall Increase in BSN Graduates
 - ~200 in 2008 to >800 in AY22-23
- Admissions
 - ~200 in 2008 to 958 in AY23-24





Clinical Practice Placements

- Recruiting and retaining clinical practice sites and partners is difficult and requires dedicated support
- The use of simulation embedded multiple methods targeted to clinical objectives and required level of engagement & supervision.





In Summary Moving Forward Requires...

- Visionary leadership Leaders who can envision and execute a new way
 of teaching/learning that is evidence-based and designed with best practices.
- Active involvement of entities with expertise and vested interests
- Faculty buy-in Essential but not everyone has to agree to participate
 - Initial and ongoing faculty development is <u>critical</u>
- Evaluation & process improvement Systematic, robust, and data-driven
- Not being afraid to fail Don't let your past successes get in the way of your future innovations.



"Never doubt that a small group of thoughtful, committed people can change the world. Indeed, it is the only thing that ever has."

-Margaret Mead



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Keynote Presentation



Diane Danzebrink
Founder & CEO
Menopause Support



Drinks and Networking



THE NATIONAL NHS WORKFORCE SUMMIT

Building Sustainable NHS Teams Scan here for the next NHS Workforce Conference...



6th May 2025 etc venues Manchester, 11 Portland Street M1 3HU



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Scan here to claim your CPD Certificate...



5th November 2024 15 Hatfields Conference Centre, London SE1 8DJ