



## Background & Policy Context

The *National Health and Social Care Workforce Plan* highlighted opportunities for a more coherent provision/commissioning of education and development to secure a sustainable pipeline of skilled staff. The *National Board Collaborative Proposition 2018/19 – 2020/21* also clearly identified an opportunity for NHS Education for Scotland (NES) to lead on Once for Scotland activity around collaborative commissioning. This paper outlines a key set of principles and a high-level process which can underpin and inform the education commissioning role of NES and other organisations.

## Current NES Education Commissioning Activity

As the national NHS Board for education, training and workforce development for Scotland, NES already commission and directly provide training for healthcare staff. As the education commissioning role continues to grow, all Directorates within the organisation will adopt these principles and processes to all new education provision being commissioned. They have been designed in a way to enable flexibility and customisation for any discipline.

## Objective and Purpose of Education Commissioning

The objective of any centrally coordinated commissioning model is to provide maximum operational support to educational provision that addresses strategic imperatives for workforce development. The purpose is to ensure that funding and resource for education and training is targeted at the development of a workforce that is well trained, flexible and competent to meet the changing demands in the population health and care needs and to ensure governance, quality control, sustainability and improvement in a financially challenging context. Furthermore, it must do so in a manner that is cost-efficient and can be measured to demonstrate effectiveness in meeting set outcomes.

## Principles for Education Commissioning

As education commissioning is designed to support appropriate workforce development, it is important to be clear about the outcomes expected from workforce development:

- Ensure security of a supply pipeline of people with the right skills to ensure workforce sustainability.
- Support and develop transformational changes to the workforce to reflect the changing service models in health and social care in Scotland responsive to population need and innovation in healthcare.
- Ensure high quality education and training that supports safe, effective and person-centred care and greater workforce flexibility in line with changing policy and government guidance.
- Enable people to have the right skills, in the right place at the right time.
- Informed by service users, carers and third sector organisations, as appropriate, to access their specialist knowledge.
- Ensure fitness for practice and maximise employability of staff.

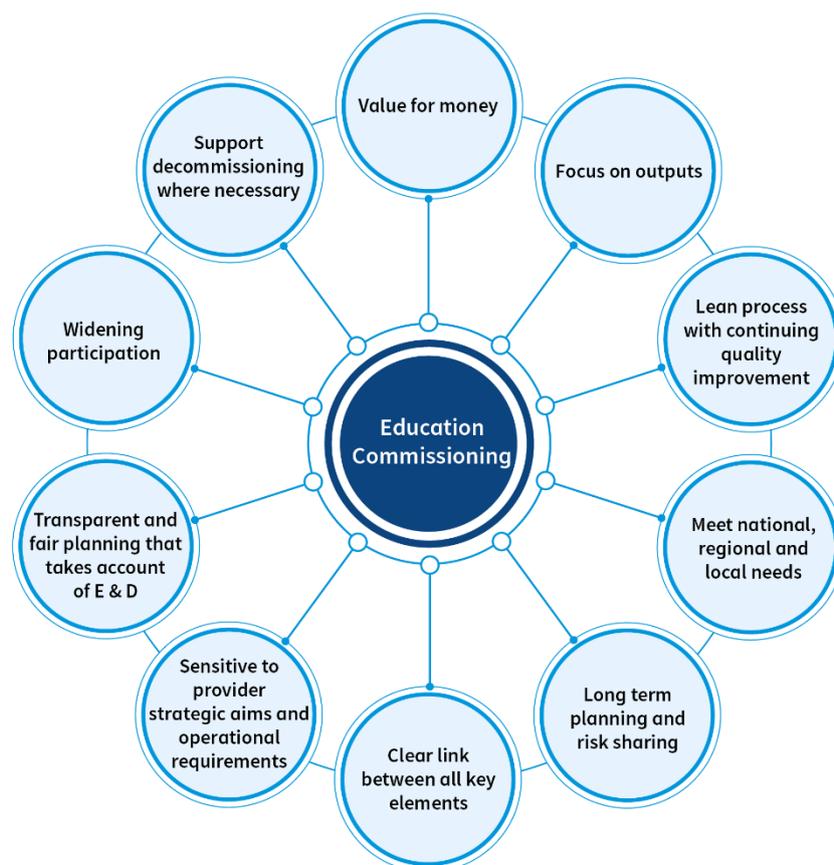
Based on the above, the key principles for education commissioning should be to:

- Put outputs at the heart of the strategic planning and commissioning process.
- Make all processes lean and aim for continuous quality improvement, including sound governance and effective and proportionate performance management.
- Communicate with a wide range of people and agencies in order to obtain feedback to review the effectiveness of the planning and commissioning process in meeting national, regional and local needs.
- Communicate with a wide range of people and agencies in order to ensure long-term planning and risk sharing to achieve efficiency and effectiveness.
- Provide value for money and maximum return on investment, meeting all statutory Procurement legislation, in order to ensure high standards of transparency, accessibility, probity and accountability.
- Link together the commissioning, funding and performance management infrastructure, processes and outcomes of education provision.
- Be sensitive to the strategic aims and operational requirements of education provider organisations.

- Ensure planning processes are transparent, fair and take account of equality and diversity; building confident partnerships, including consideration of consortia building.
- Widen participation in education and development by enabling a flexible and supportive education and learning infrastructure that promotes equality and diversity.
- Support a process not just to retain existing or commission new provision but, where necessary, manages the decommissioning of provision which is no longer required, inefficient, ineffective, inequitable or unsustainable.

The diagram below provides a summary of the key principles for education commissioning.

**Key Principles for Education Commissioning:**



## Education Commissioning Process

The Department of Health (2009) provides a definition of education commissioning, making explicit reference to essential elements of the process:

*“Strategic education commissioning proactively considers future workforce education needs to meet the vision and strategy for future healthcare services. It is a process which identifies, defines, procures and evaluates the education and learning required to meet current and future healthcare service needs”*  
(Department of Health [DH], 2009).

A high-level cycle for education commissioning looks as follows. Examples of education commissioning in practice are show in Appendix 1 and 2.

### High- Level Cycle



## High level cycle in detail:

### Data intelligence gathering

This will draw on information available via NES' national data platform which consolidates a number of core workforce datasets into one location and enables greater insight into the labour market supply, demand and outcomes, to better target training strategies to deliver services.

### Assessment and prioritisation of need

This will involve engagement with external stakeholders e.g. Scottish Government, NHS Boards, to inform decision making on current and future needs; service and related education needs analysis; national, regional and local needs; pathways, programmes and CPD provision; commissioning and decommissioning; agreement on impact measurement (e.g. required numbers to be educated to satisfy role/meet regulatory requirements). Early engagement with Procurement is essential in ensuring that maximum value for money is achieved through adherence to all statutory and legislative requirements.

### Agreement on required provision

This will involve engagement with external stakeholders (as appropriate), e.g. education providers, and might involve brokerage around delivery via consortia of providers, agreeing consistent unit pricing, as well as discussion around decommissioning. Potential constraints (e.g. clinical placement and supervision availability) should also be considered at this stage.

## Procurement of required provision

In line with the Scottish Government Procurement Journey (full details are available on the following [link](#)), it would be normal to issue a Prior Information Notice (PIN) published on the Public Contracts Scotland website, inviting suppliers to actively contribute to a Supplier Information Day. Publishing a PIN is not a mandatory requirement, but it can alert the market that there is an opportunity coming up within the next 12 months, allowing research to be carried out and bid preparation to commence. Supplier Information Days are also a useful source of information gathering to help all involved to understand the market and develop the solution. A PIN, in certain circumstances, can also make it possible for the procurement timescales to be reduced.

In most cases public bodies will follow up the publication of a PIN with a Contract Notice (advert) when they are ready to carry out the procurement exercise.

Formally tendering the requirement will require adherence to the Procurement Journey and NES Standing Financial Instructions, whether that includes full programmes of education, part programmes of education, or CPD modules. An overview on how the routes are chosen within NES is outlined in the table below:

Spend/ Value of contract(s)	≥£118,133	OJEU*	OJEU*	OJEU*	OJEU*	OJEU*
	>£50,000 <£118,133	PCS-T	PCS-T	PCS-T	PCS-T	PCS-T
	>£25,000 ≤£50,000	PCS-T	PCS-T	PCS-T	PCS-T	PCS-T
	>£10,000 ≤£25,000	PCS Quick Quote	PCS Quick Quote	PCS Quick Quote	PCS Quick Quote	PCS
	>£0 ≤£10,000	VFM	VFM	VFM	VFM	PCS Quick Quote
		Very Low	Low	Medium	High	Very High
		Risk/Complexity				

KEY
Route 1 PCS (Public Contracts Scotland)
Route 2 – PCS-T (Public Contracts Scotland-Tender)
Route 3- OJEU (Official Journal of the European Union)
VFM (Value for Money) should be demonstrated

\* Please note – with reference to OJEU, the published government guidance states that if we are to leave the EU with no deal in place regarding any arrangement for access to OJEU, a replacement e-notification service will be made available for the UK. This will mean that contracting authorities and entities must publish their contract notice on the UK e-notification service rather than OJEU.

## Delivery of provision

Following a procurement process, contracts will be agreed which will allow delivery of agreed provision whether that be full programmes of education, part programmes of education, or CPD modules.

## Monitoring and reporting

Robust governance and performance management arrangements will be in place via contracts with education providers which will include requirements for regular reporting/meetings on intake numbers, progression rates, completion rates, student evaluations, etc.

## Outcome measurement and review

Review of measurement of impact and return on investment in terms of outputs. This stage could also involve process review.

## Appendix 1

### Case study: Operating Department Practitioner (ODP)

Over several years, workforce data has highlighted a decline in the number of registered ODPs in Scotland and is seen to represent a key risk to NHS Scotland's ability to deliver safe and effective care in operating theatres. This risk was compounded by Scotland's sole provider of ODP education announcing plans for a final intake to the programme in September 2017. There was no indication that the gap would be filled by other universities.

This prompted a nationwide collaborative of NHS Boards, to identify their ODP workforce training needs over a five-year period and work with NES NMAHP Directorate and Procurement colleagues on a specification for education provision that would meet their needs. Service Level Agreements signed by each participating NHS Board confirmed their commitment to paying the agreed course fee and the number of training places per year with NES agreement to manage the funding on their behalf.

A tender released on Public Contracts Scotland (PCS), Public Contracts Scotland –Tender (PCS-T) and the Official Journal of the European Union (OJEU), attracted interest from several potential suppliers and following due process a supplier that met all the required criteria was selected. A flexible, work based ODP Diploma of Higher Education was developed by the programme team which included representatives from the NHS collaborative group and NES. This has recently gained approval from the university and the Health and Care Professions Council and will be delivered from January 2020.

Contractual arrangements with the supplier include evidence of their adherence to the supplier's quality assurance processes and submission of an annual programme report to each NHS Board. This report will support a quality assurance function and reflect on ways in which the programme might be enhanced in future years.

This example demonstrates how the NES commissioning process was used to secure quality education provision to meet service requirements equitably and cost effectively.

## Appendix 2

### Case study: Psychology

The Scottish Government Mental Health Strategy 2017 -27 aims to improve access to treatment and joined-up, accessible services. NHS Boards are working hard to reduce waiting times for access to psychological therapies for all ages. The Scottish Government offers national support to Boards with a programme of improvement and learning from good practice to help them meet the treatment target: ‘at least 90% of Psychological Therapies patients to start treatment within 18 weeks of referral’.

Workforce data highlighted the need to increase capacity within the NHS workforce to deliver safe and effective, evidence based psychological therapies, such as Cognitive Behavioural Therapy (CBT). National censuses carried out by Information Services Division (ISD) highlighted gaps in staffing, inconsistencies in qualifications and the availability of clinical supervision.

NHS Education for Scotland worked in collaboration with NHS Boards to carry out a national scoping exercise to identify whether the Boards had capacity to release multidisciplinary staff to undertake the Diploma in Cognitive Behavioural Therapy, and subsequently deliver CBT within their Boards. NES Psychology Directorate and Procurement colleagues worked on a specification for education provision that would meet the needs of the NHS Scotland.

A Contracts Notice was published on PCS (Public Contracts Scotland) and an open tender released on Public Contracts Scotland –Tender (PCS-T) which attracted interest from several potential suppliers and following due process a supplier that met all the required criteria was selected. Two work-based CBT Diplomas of Higher Education were selected that offered flexible access to education for staff working in remote and rural parts of Scotland.

Contractual arrangements with the suppliers included evidence of their adherence to UK quality assurance processes in Cognitive Behavioural Therapy and submission of an annual programme report to NHS Education for Scotland. This report supports a quality assurance function and reflection on the progression of staff within the programmes.

Letters and Purchase Orders for a backfill contribution were issued to NHS Boards to confirm their commitment to release the multidisciplinary staff to undertake the training, deliver 0.40WTE sessions of CBT and contribute to the supportive infrastructure required within the NHS Boards for the safe and effective provision of CBT.

NES measures the number of CBT therapists graduating from the CBT programmes and monitors the impact of the therapists through national surveys based on Implementation Science.

This example demonstrates how the NES commissioning process was used to secure quality education provision to meet service requirements equitably and cost effectively.

November 2019