

NHS England Self-Assessment for Placement Providers 2024

Region Selection

Please do not amend the region you have been allocated to. If you feel this is incorrect please continue to complete the SA and email your regional NHS England WT&E quality team.

South West

East of England

Please do not amend (EoE Provider)

No Response

London

Please do not amend (London Provider)

No Response

Midlands

Please do not amend (Midlands Provider)

No Response

North West

Q1. Please do not amend (NW Provider)

No Response

North East and Yorkshire

Please do not amend (NEY Provider)

No Response

South East

Please do not amend (SE Provider)

No Response

South West

Please do not amend (SW Provider)

Gloucestershire Health and Care NHS Foundation Trust

Training profession selection

Q2. Please select from the list below those professional groups your organisation currently train, please select all those which apply. Please select only one option for each row.

	Yes we train in this professional group	N/A we do NOT train in this professional group
Advanced Practice	X	
Allied Health Professionals	X	
Dental		X
Dental Undergraduate		X
Healthcare Science		X
Medical Associate Professions	X	
Medicine Postgraduate	X	
Medicine Undergraduate	X	
Midwifery		X
Nursing	X	
Paramedicine	X	
Pharmacy		X
Psychological Professions	X	
Social Workers	X	

Section 1 - Provider challenges

Q3. Example 1: Please choose the most appropriate category for your challenge.

Placement Management / Capacity

Please provide your narrative in the comments box

Medicine: Ask from Deanery is for Trust to support more trainees. Concern as half salary from NHSE Trust funding remainder – challenge to influence Trust to invest although recognised 50% salary of Dr is valuable (at all grades).

Social Workers: The requirements for Assessment and Supervision have changed with the HEI no longer able to support; this has put considerable additional (not factored) workload onto the Social Workers. The number who can assess is less than required, particularly when need to continue to support students for pipeline.

Nursing/AHP: Capacity given to HEIs is underutilised. Also the calculation and validation of hours to ensure honesty and transparency has been difficult with discrepancies with HEI's.

Q4. Example 2: Please choose the most appropriate category for your challenge.

IT Systems

Please provide your narrative in the comments box

Psychology: This year more difficulty than usual ensuring that clinical psychology trainees get up and running in a timely fashion at the start of their placements. We have had problems getting access to relevant drives and folders and also to RiO with multiple forms often having to be completed by supervisors and trainees. We are in the process of trying to sort out a more streamlined system but I understand that part of the issue is the response time from IT when issues are flagged.

With Nursing / AHP all of this has now been taken 'in team' - exceptionally time consuming.

Q5. Example 3: Please choose the most appropriate category for your challenge.

Supervisors / Educators (recruitment / retention)

Please provide your narrative in the comments box

Identifying and securing supervisors for trainee advanced practitioners working within MH and Community Trust has been difficult. Particularly where few medical colleagues to call upon. For both AP and medical students we have teams and supervisors within who have time to accept a trainee that can then directly supervise – i.e. capacity. People are willing to be supervisors, but job plans may not allow them to free up space and time.

Section 2 - Provider achievements and good practice

Q6. Example 1: Please choose the most appropriate category for your achievement.

Learner / Trainee Support or Wellbeing

Please provide your narrative in the comments box

Psychology: This year we have employed a Clinical Psychologist using the NHSE tariff to be a central point of contact for trainees, supervisors and Bath University, to develop more streamlined on-boarding processes and to assist with administration of placements. This has been really helpful and has allowed a number of practical issues to be highlighted and dealt with quickly.
Medicine: Postgraduate Medicine 'well being days' 1/4rly (3 monthly), trainee led (reps) – dictate what want day e.g. walks, crafts, escape rooms etc. RU and Guardian of safeworking set up and realise the day, reps take the lead.

Q7. Example 2: Please choose the most appropriate category for your achievement.

Collaboration / Partnerships

Please provide your narrative in the comments box

Nursing & AHP: Have invested in improving collaboratives and communications with HEIs

Q8. Example 3: Please choose the most appropriate category for your achievement.

New/Improved Strategy or Governance

Please provide your narrative in the comments box

Head of Practice Education & Chief AHP collaborated, shared to invite feedback resulting in robust Advanced Practice Governance and associated guidelines to ensure clear, consistent, easier to navigate processes for workforce planning, recruitment, ongoing support of trainee and AP's.

Section 3 - Contracting and the NHS Education Funding Agreement

Q9. Please confirm your compliance with the obligations and key performance indicators set out in Schedule 3 of the NHS Education Funding Agreement (EFA).
This should be completed once on behalf of the whole organisation. Please select only one option for each row.

	Yes	No
There is board level engagement for education and training at this organisation.	X	
The funding provided via the NHS Education Funding Agreement (EFA) to support and deliver education and training is used explicitly for this purpose.	X	
We undertake activity in the NHS Education Funding Agreement which is being delivered through a third party provider.	X	
The Provider or its sub-contractor did not have any breaches to report in relation to the requirement of the NHS Education Finding Agreement (EFA)	X	
We are compliant with all applicable requirements of the Data Protection Legislation and with the requirements of Schedule 5 of the NHE Education Funding Agreement.	X	
The Provider did not have any health and safety breaches that involve a learner to report in the last 12 months.	X	
The organisation facilitates a cross-system and collaborative approach, engaging the ICS for system learning.	X	
We have collaborative relationships with our stakeholders (e.g. education providers) which provide robust mechanisms to deliver agreed services.	X	

If 'yes' please add comments to support your answer; if 'no' please provide further detail:

Examples to support:

Within Gloucestershire we are well connected with HEI colleagues. The Head of Practice Education chairs a monthly ICB/ University of Gloucestershire placement capacity meeting.

1/4rly the University of Gloucestershire chairs a Strategic Workforce Partnership Board meeting.

Head of Practice Education attends the One Gloucestershire AHP Faculty meeting.

We are well connected with our Gloucestershire Hospitals colleagues - for medical undergrad this is via the Academy.

Regularly discuss placement and capacity with Associate Chief Nurse (and colleagues) Nurse Education and workforce and our Chief AHP links with Chief AHP.

Calendar of Meetings with school of Psychiatry- discuss trainee training, education, strategy, capacity

Q10. Please provide the name and email address of the board named individual responsible for education and training.

Name	Neil Savage
Email Address	Neil.Savage@ghc.nhs.uk

Q11. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in conjunction with colleagues.

Section 4 - Education Quality

Q12. Can you confirm as a provider that you...
Please select only one option for each row.

	Yes	No	N/A
We are aware of the requirements and process for an education quality intervention, including who is required to attend.	X		
We are reporting and engaging with the requirements and process to escalate issues, in line with NHS England's education concerns process.	X		
Have developed and implemented a service improvement plan to ensure progression through the Quality and Improvement Outcomes Framework for NHS Funded Knowledge and Library Services.	X		
Has the provider been actively promoting, to all learners, use of the national clinical decision support tool funded by NHS England?	X		
Have a Freedom to Speak Up Guardian and they actively promote the process for raising concerns through them to their learners.	X		
Have a Guardian of Safe Working (if postgraduate doctors in training are being trained), and they actively promote the process for raising concerns through them to their learners.	X		
Are aware of the Safe Learning Environment Charter (SLEC)	X		
Are actively implementing and embedding the SLEC multi-professionally.	X		

If 'yes' please add comments to support your answer; if 'no' please provide further detail:

Library: Service Improvement Plan in progress in collaboration with NHS England Knowledge Services staff.

National Clinical Decision Support Tool, promoted at inductions, meetings, via training sessions, the intranet, social media and emails

Q13. As an organisation, have you been referred to a regulator for education and training concerns in the last 12 months (with or without conditions) (e.g., GMC, GDC, HCPC, NMC , etc)

Note: we are not seeking information about the referral of an individual learner.

We have been referred to a regulator and the details are shared below.

If you have received conditions from a regulator please provide more details including the regulator, the profession involved and a brief description

A student learner on placement within our mental health services raised a safeguarding concern to the NMC. The Deputy Director of Nursing instigated a full investigation, and with Practice Education meetings with the HEI. The learning from the speaking up was shared.

Q14. Did you actively promote the National Education and Training Survey (NETS) to all healthcare learners?

Yes

Q15. Have you reviewed, at Board Level, and where appropriate, taken action on the outcome of the results of the National Education and Training Survey (NETS).

Yes

Please provide a brief description of the action you have taken as a result; if 'no' please provide further details including your plans to use the NETS data for quality improvement activity in the future:

Sharing of results at Workforce Management Group which feeds into Great Place to Work Committee. Discussion with Heads of Profession

Sharing of results through 'Learning and Development Newsletter and Updates'
Feedback to placement areas where possible to identify specifics

Q16. 2024's NETS will be open from 1 October 2024 until 26 November 2024. How will your organisation increase their NETS response rate for 2024?

Global communications

Targeted emails to all learner groups by respective discipline leads

Reminders within Practice Assessor and Supervisor training and through the L&D updates

Q17. Patient Safety and the promotion of a Patient Safety culture is integral to the Education Quality Framework. Please provide the following information:

Name and email address of your Board representative for Patient Safety	Dr Amjad Uppal (Medical Director) jan.marriott@ghc.nhs.uk
Name and email address of your non executive director representative for Patient Safety	Jan Marriott (Quality Committee Chair) jan.marriott@ghc.nhs.uk
Name and email address of your Patient Safety Specialist/s	Rebecca Hodge (Head Of Patient Safety And Learning) rebecca.hodge@ghc.nhs.uk
What percentage of your staff have completed the patient safety training for level 1 within the organisation (%)	98.8%

Q18. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 5 - Equality, Diversity and Inclusion

Q19. Please confirm whether your organisation has an Equality, Diversity and Inclusion Lead (or equivalent):

Yes

If 'yes' please add comments to support your answer sharing details of governance and links with education and training alongside the nominated name of your EDI lead for education and training; if 'no' please provide further detail

Tania Hamilton (FCIPD)

Equality, Diversity and Inclusion Lead.

This post is within our Learning and Development Team structure. Tania attends Workforce Oversight Management Group and Great Place to Work Committee. Tania connects readily regarding our student and apprentice workforce.

Q20. Please confirm that you liaise with your Equality, Diversity and Inclusion Lead (or equivalent) to...

Please select only one option for each row.

	Yes	No
Ensure reporting mechanisms and data collection take learners into account?	X	
Implement reasonable adjustments for learners with a disability?	X	
Ensure policies and procedures do not negatively impact learners who may have a protected characteristic(s)?	X	
Ensure International Graduates (including International Medical Graduates) receive a specific induction into your organisation?	X	
Ensure policies and processes are in place to manage with discriminatory behaviour from patients?	X	
Ensure a policy is in place to manage Sexual Harassment in the Workplace?	X	
Do you have initiatives to support reporting of sexual harassment?	X	
Has your organisation signed up to the NHS England Sexual Safety in Healthcare - Organisational Charter?	X	
Does your organisation have a designated sexual safety lead, such as a Domestic Abuse and Sexual Violence (DASV) lead?	X	

If 'yes' please add comments to support your answer; if 'no' please provide further detail:

Medicine: International Graduates, the Deanery informs of learner prior to arrival, informs of regional / national induction which is supported and encouraged to attend if individual chooses. Additional local induction and support.

All learners - applying for revalidation of Disability Confident leaders status (ahead of Aug 2025). Proactively linking Practice Education / Apprenticeships and Widening Participation / Recruiting Managers and EDI lead to ensure have considered and include reasonable adjustments from recruitment to induction and throughout employment.

Ongoing awareness raising of the Trust's Purple passport (captures all reasonable adjustments - tell us once).

Q21. How does your organisation manage sexual harassment reports?

As they arise, reporting mechanisms include Freedom to Speak Up, Datix, learner raising a concern to staff within the host team or the education departments, in accordance with Diversity and Inclusion Policy and Sexual Safety policy.

Incident Road Map, collaboratively produced and developed with key stakeholders (including Networks, Internationally Educated Nursing Council, FTSU and Risk Management) launched March 24.

Q22. Postgraduate Deans and their teams are keen to consider responses and initiatives and share good practice. Please share details on EDI initiatives that are specific to or have an impact on education and training in your organisation and the email address for someone we can contact to discuss this further.

Incident Road Map - as described above.

EDI initiatives including Networks, Campaigns, attendance at events

Collaboration with One Gloucestershire Organisations and colleagues e.g. Reciprocal Mentoring and Allyship

Q23. For education and training, what are the main successes for EDI in your organisation?

Medicine: EDI specific sessions have been added within the teaching programme. This includes a E,D and I Workshop facilitated by Dr Eng Kwee Ong, Associate Dean ED&I, NHS England South West
Dr Hana Bashir, Advanced Trainee and IMG Trainee Representative, Peninsula School Board and Dr Nathan Collicot, Trainee and E, D & I Fellow

Psychology: Involvement in the Aspiring Clinical Psychology programme, providing paid placements for people interested in a career in the psychological professions. The scheme is designed to increase inclusion and diversity across psychological professions. The second cohort of assistant psychologists from this programme have recently been welcomed. Our previous assistants have gone on to further NHS employment and 2 were successful in obtaining places on DClinPsych courses this year.

Teams and departments are reaching out to the EDI lead to have bespoke session directly to team; this is agreed on the proviso they develop an EDI action plan as an outcome. Directly embedding EDI at a team level.

Q24. For education and training, what are the main challenges for EDI in your organisation?

Staff attendance - time to attend and perception of the value of this training; this impacts on the number of attendees and the quality of the discussion and learning or training may be cancelled.
This training is not essential to role or mandatory and therefore considered less relevant (compared to specific clinical teaching).
Often those who attend training are already allies or have an understanding of cultures, inclusivity or reasonable adjustments.

Q25. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 6 - Assurance Reporting: learning environment and culture

Q26. Thinking about the learning environment and culture of your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like to share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

- Completion of 'Thumbs up Friday' submission to share any feedback received from learners regarding the practice educators/ assessors / supervisors or placement areas of good experience
- Through conversation verbal feedback gained from learners at laptop collections / returns
- Positive Learning from concerns/complaints raised- avoiding blame culture
- Sharing of new ways to think about placements differently/creatively to come away from the traditional 1:1 model
- Sharing of verbal/written feedback through the systems – both up to board level and back directly to workforce.

Q27. Quality Framework Domain 1 - Learning environment and culture
Please select only one option for each row.

	We meet the standardfor all professions / learner groups we train	We have exceptions to report and provided narrative below
The learning environment is one in which education and training is valued and championed.	X	
The learning environment is inclusive and supportive for learners of all backgrounds and from all professional groups.	X	
The organisational culture is one in which all staff, including learners, are treated fairly, with equity, consistency, dignity and respect.	X	
There is a culture of continuous learning, where giving and receiving constructive feedback is encouraged and routine.	X	
Learners are in an environment that delivers safe, effective, compassionate care and prioritises a positive experience for patients and service users.	X	
The environment is one that ensures the safety of all staff, including learners on placement.	X	
All staff, including learners, are able to speak up if they have any concerns, without fear of negative consequences.	X	
The environment is sensitive to both the diversity of learners and the population the organisation serves.	X	
There are opportunities for learners to take an active role in quality improvement initiatives, including participation in improving evidence led practice activities and research and innovation.	X	
There are opportunities to learn constructively from the experience and outcomes of patients and service users, whether positive or negative.	X	
The learning environment provides suitable educational facilities for both learners and supervisors, including space and IT facilities, and access to knowledge and library specialists.	X	
The learning environment promotes multi-professional learning opportunities.	X	
The learning environment encourages learners to be proactive and take a lead in accessing learning opportunities and take responsibility for their own learning.	X	

Q28. Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

All professions

Please provide the details of the learner groups (and site if applicable) in the comments box e.g. mental health nursing, undergraduate dental training, operating department practitioners, pathology, dental nurses

Library: access to knowledge and library specialists and facilities are available to all.

Q29. For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barriers you are facing and what (if any) support do you need from WT&E.

Psychology: IT facilities as described.

Nursing & AHP: Under utilisation of placement capacity by partner HEIs is a significant concern; our staffing and resources for students (laptops and associated licences) have been factored against a past and projected future recurrent income. If this income is not sustained our resource and support for Practice Educators/ Assessors and supervisors is jeopardised.

Nursing & AHP: Practice Education receive feedback of staff burnout and impact on their wellbeing. This and the workload priorities often impact on team abilities to host and support students, impacting on NHSE toolkit calculated capacity and potential increases in student capacity.

Q30. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 7 - Assurance Reporting: educational governance and commitment to quality

Q31. Thinking about the educational governance and commitment to quality of your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

Study leave is now administered by Rebecca Upton, Medical Education Manager, Department of Medical Education.

Learners have a more positive experience than when held by Deanery and NHSE

Q32. Quality Framework Domain 2 - Educational governance and commitment to quality
Please select only one option for each row.

	We meet the standard for all professions / learner groups we train	We have exceptions to report and provided narrative below
There is clear, visible and inclusive senior educational leadership, with responsibility for all relevant learner groups, which is joined up and promotes team-working and both a multi-professional and, where appropriate, inter-professional approach to education and training.	X	
There is active engagement and ownership of equality, diversity and inclusion in education and training at a senior level.	X	
The governance arrangements promote fairness in education and training and challenge discrimination.	X	
Education and training issues are fed into, considered and represented at the most senior level of decision making.	X	
The provider can demonstrate how educational resources (including financial) are allocated and used.	X	
Educational governance arrangements enable organisational self-assessment of performance against the quality standards, an active response when standards are not being met, as well as continuous quality improvement of education and training.	X	
There is proactive and collaborative working with other partner and stakeholder organisations to support effective delivery of healthcare education and training and spread good practice.	X	
Consideration is given to the potential impact on education and training of service changes (i.e. service re-design / service reconfiguration), taking into account the views of learners, supervisors and key stakeholders (including WT&E and Education Providers).	X	

Q33. Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

All professions

Please provide the details of the learner groups (and site if applicable) in the comments box e.g. mental health nursing, undergraduate dental training, operating department practitioners, pathology, dental nurses

Transformation of services (particularly Mental Health and Learning Disabilities) is gathering pace. In relation to 'Consideration is given to the potential impact on education and training of service changes (i.e. service re-design / service reconfiguration), taking into account the views of learners, supervisors and key stakeholders (including WT&E and Education Providers)'. Learning and Development and Medical Education colleagues connect through Quality Assurance Group, Governance meetings and other specific task and finish groups, to connect with programme / service changes. This may not be possible at an early stage. 'Heads up' insider information also gained during PA/ PS and practice Educator interactions. This may not be early enough to adjust capacity planning leading to escalation measures across teams and directorate and last minute changes for HEIs and ultimately learners.

Q34. For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barriers you are facing and what (if any) support do you need from WT&E.

It is not established whether transformation of services e.g. LD provision will impact on existing capacity (and future availability of speciality clinical placement).

Q35. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 8 - Assurance Reporting: developing and supporting learners

Q36. Thinking about how you develop and support learners within your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like to share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

Following the investment of CPEP funding into Remote Assessor / Supervisor provision for the University of Gloucestershire. GHCHSFT have substantiated a Practice Education Facilitator role with a remote element within the JD. This will enable the rich placement and clinical experience to continue to be gained in LD facilities where there is no registrant on site and maintain LD placement capacity.

The Trust has employed 2 learners on the May 2024 MARJON Aspire cohort. It is hoped they will progress to the Masters RNDA programme with MARJON. We have committed to taking responsibility for the clinical placement rotations over the course of their 18mo programme.

Q37. Quality Framework Domain 3 - Developing and supporting learners
Please select only one option for each row.

	We meet the standard for all professions / learner groups we train	We have exceptions to report and provided narrative below
There is parity of access to learning opportunities for all learners, with providers making reasonable adjustments where required.	X	
The potential for differences in educational attainment is recognised and learners are supported to ensure that any differences do not relate to protected characteristics.	X	
Supervision arrangements enable learners in difficulty to be identified and supported at the earliest opportunity.	X	
Learners receive clinical supervision appropriate to their level of experience, competence and confidence, and according to their scope of practice.	X	
Learners receive the educational supervision and support to be able to demonstrate what is expected in their curriculum or professional standards to achieve the learning outcomes required.	X	
Learners are supported to complete appropriate summative and/or formative assessments to evidence that they are meeting their curriculum, professional and regulatory standards, and learning outcomes.	X	
Learners are valued members of the healthcare teams within which they are placed and enabled to contribute to the work of those teams.	X	
Learners receive an appropriate, effective and timely induction and introduction into the clinical learning environment.	X	
Learners understand their role and the context of their placement in relation to care pathways, journeys and expected outcomes of patients and service users.	X	
Learners are supported, and developed, to undertake supervision responsibilities with more junior staff as appropriate.	X	
Learners are encouraged to access resources to support their physical and mental health and wellbeing as a critical foundation for effective learning.	X	

Q38. Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

No Response

Q39. For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barriers you are facing and what (if any) support do you need from WT&E.

Practice Educators, Practice Assessors and Supervisors can find it difficult to support learners if the learner's preference is not to share their learning needs / reasonable adjustment requests at an early stage / the outset of their placement.

Q40. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 9 - Assurance reporting: developing and supporting supervisors

Q41. Thinking about how you develop and support supervisors within your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like to share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

Nursing & AHP: The development of Struggling Student training for Practice Educators, Assessors and Supervisors, this has been revised to incorporate Safer Learning Environment Charter principles. Available as an attended session or recorded presentation accessed via the Learning Management System.

Recording of Student Induction to enable those not able to attend in person to receive consistent induction information.

Development of a 'Busy Box' to support Practice Educators, Assessors and Supervisors to provide students with productive activities and engage.

Psychology: Now subscribing to 'Bespoke' (Not for profit training provider of training & CPD around psychological practice). All supervisors have access to this resource which has been well used this year and provides high quality training to complement the other CPD activities. Following a recent meeting with the Lead for Psychological Services access to Bespoke will be shared with other supervisors.

Q42. Quality Framework Domain 4 - Developing and supporting supervisors
Please select only one option for each row.

	We meet the standard for all professions / learner groups we train	We have exceptions to report and provided narrative below
Formally recognised supervisors are appropriately supported, with allocated time in job plans/ job descriptions, to undertake their roles.	X	
Those undertaking formal supervision roles are appropriately trained as defined by the relevant regulator and/or professional body and in line with any other standards and expectations of partner organisations (e.g. Education Provider, WT&E).	X	
Clinical Supervisors understand the scope of practice and expected competence of those they are supervising.	X	
Educational Supervisors are familiar with, understand and are up-to-date with the curricula of the learners they are supporting. They also understand their role in the context of learners' programmes and career pathways, enhancing their ability to support learners' progression.	X	
Clinical supervisors are supported to understand the education, training and any other support needs of their learners.	X	
Supervisor performance is assessed through appraisals or other appropriate mechanisms, with constructive feedback and support provided for continued professional development and role progression and/or when they may be experiencing difficulties and challenges.	X	
Supervisors can easily access resources to support their physical and mental health and wellbeing.	X	

Q43. Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

No Response

Q44. For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barriers you are facing and what (if any) support do you need from WT&E.

No Response

Q45. Thinking about the Educator Workforce Strategy, please confirm that your organisation

	Yes	No
Is aware of the Educator Workforce Strategy.	X	
Ensures educators/supervisors undertake a skills gap / learning development needs analysis for this role.		X
Ensures educators/supervisors have formal development to undertake this role.		X
Considers the educator workforce in wider clinical workforce planning.	X	

If 'yes' please add comments to support your answer; if 'no' please provide further detail:

Learning and Development Business Objective 24/25 owned by Associate Director LD&OD and Head of Practice Education and WA. To review current practice and introduce changes to practice and approach to ensure the Trust's Learning and Development Team is aligned with the requirements of the HEE/NHSE Educator Workforce Strategy.

We have commenced our scoping work on the Educator Workforce Strategy and are continuing to make progress. Our work, however has focussed on an identified Educator cohort, specifically those working in our Learning and Development Teams, as a pilot group before we expand our initiatives to a wider group. For this reason, for example, formal development is available to some staff groups but is not yet fully embedded for all educators.

- T&F group established
- Skills Gap analysis pending circulation

Contributors to One Gloucestershire Education & Training Steering Group Plan on a Page commitment 2024-25: Implementation of the Educator Workforce Strategy

Q46. Implementation of the Educator Workforce Strategy

We have partially implemented the recommendations of the Educator Workforce Strategy.

Q47. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 10 - Assurance reporting: delivering programmes and curricula

Q48. Thinking about how you deliver programmes and curricula to support training within your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like to share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

No Response

Q49. Quality Framework Domain 5 - Delivering programmes and curricula
Please select only one option for each row.

	We meet the standard for all professions / learner groups we train	We have exceptions to report and provided narrative below
Practice placements must enable the delivery of relevant parts of curricula and contribute as expected to training programmes.	X	
Placement providers work in partnership with programme leads in planning and delivery of curricula and assessments.	X	
Placement providers collaborate with professional bodies, curriculum/ programme leads and key stakeholders to help to shape curricula, assessments and programmes to ensure their content is responsive to changes in treatments, technologies and care delivery models, as well as a focus on health promotion and disease prevention.	X	
Placement providers proactively seek to develop new and innovative methods of education delivery, including multi-professional approaches.	X	
The involvement of patients and service users, and also learners, in the development of education delivery is encouraged.	X	
Timetables, rotas and workload enable learners to attend planned/ timetabled education sessions needed to meet curriculum requirements.	X	

Q50. Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

No Response

Q51. For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barriers you are facing and what (if any) support do you need from WT&E.

No Response

Q52. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section

Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 11 - Assurance reporting: developing a sustainable workforce

Q53. Thinking about developing a sustainable workforce within your organisation, we are keen to hear about initiatives and good practice that are specific to or have an impact on education and training. If you would like to share any examples, please provide a very brief description of the initiative/good practice, the professional group(s) this relates to and the email address for someone we can contact to discuss this example further.

The Trust Multi-professional Preceptorship programme includes a Practice Educator, Practice Assessor / Supervisor interactive session to engage preceptors in the support of learners on placement with their teams.

Preceptorship for Healthcare Practice (AP7026) postgraduate module accredited and validated by the University of Gloucestershire which runs alongside the preceptorship programme

Q54. Quality Framework Domain 6 - Developing a sustainable workforce
Please select only one option for each row.

	We meet the standard for all professions / learner groups we train	We have exceptions to report and provided narrative below
Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.	X	
Does the provider provide opportunities for learners to receive appropriate careers advice from colleagues	X	
The provider engages in local workforce planning to ensure it supports the development of learners who have the skills, knowledge and behaviours to meet the changing needs of patients and service.	X	
Transition from a healthcare education programme to employment and/or, where appropriate, career progression, is underpinned by a clear process of support developed and delivered in partnership with the learner.	X	

Q55. Areas of exception

From the professional groups you train, please select which professional group(s) are impacted from the list below.

Where you have multiple sites, if the issue is site specific, please select 'site specific' and enter the site name in the comments box.

If required you can add the details of the sub professions / specific specialties in the comments box.

No Response

Q56. For the exceptions listed above, please provide further details including; a brief summary of the issues and challenges that are impacting your ability to meet the standard, any barriers you are facing and what (if any) support do you need from WT&E.

No Response

Q57. Signature

I confirm I have completed this section accurately and can provide evidence to support my responses if requested by NHS England Workforce, Training and Education.

Name, email address and role of the person completing this section
Lucy Blandford, Head of Practice Education and Widening Access, lucy.blandford@ghc.nhs.uk in collaboration with colleagues

Section 12 - Final Submission

Q58. Board level sign-off (Premises, Learning Environment, Facilities, and Equipment)

I confirm that our premises, learning environments, facilities and equipment are: suitable for the performance of the Services; accessible, safe and secure; comply with any applicable Health and Safety Legislation, any other Applicable Law, Guidance, appropriate risk management clinical guidance, good healthcare practice and the requirements of any relevant Regulator; and are sufficient to enable the Services to be provided at all times and, in all respects, in accordance with the NHS Education Funding Agreement.

Q59. Board level sign-off

I confirm that the responses in this SA have been signed off at board level

Name, email address and role of Board representative for education and training
Neil Savage, Executive Director of Human Resources and Organisation Development

Q60. Please confirm the date that board level sign off was received:

* 22/10/2024

Q61. Final Submission (please only tick this box when you ready to submit your self-assessment)

I confirm that all sections of this self-assessment have been completed and that this is the final version for submission