

# Education team Performance report November 2023 – Education and Training Committee

Report date: 01 November 2023, data correct 19 October

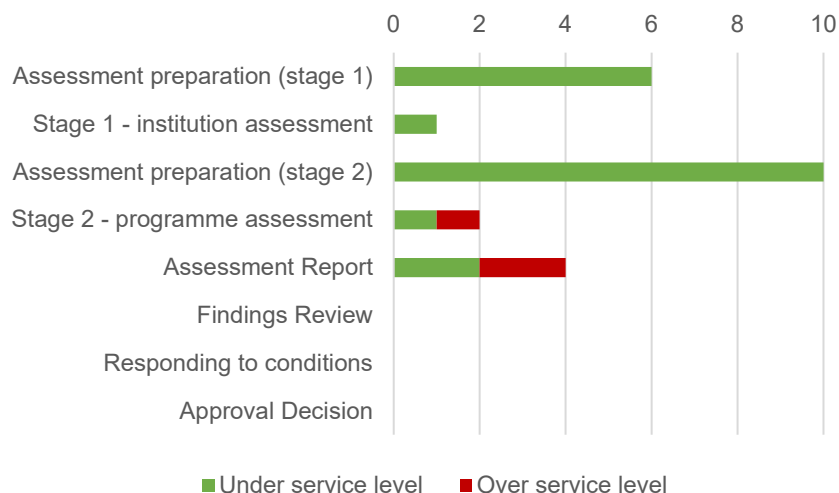
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# KPI summary and narrative

Performance measure	What does this tell us?	RAG rating description	Current performance	Commentary
Percentage of active case within service levels (live cases) ( <u>timeliness</u> )	Whether we are progressing <u>live cases</u> in a timely manner	Red <80% Amber 80-90% Green >90%	▲	90% of active cases are within our service levels, which is an increase from the last report (87%)
Observations across processes ( <u>quality</u> )	In the <u>last three months</u> , whether assessment outcomes have been objected to by providers	Red >10% Amber 5-10% Green >5%	▶	<ul style="list-style-type: none"> <li>In the last three months, 6% of cases had observations – in these cases, ETP did not make changes to visitors' recommendations</li> <li>This is slightly improved performance from the last report, where 7% of cases had observations</li> </ul>
<u>Time taken</u> through the approval process (stage conclusion)	In the <u>last three months</u> , whether we have delivered cases to conclusion in a timely manner	Red >5 months Amber 4-5 months Green <4 months	▶	Maintained performance at amber. The average figure for the 13 approval cases concluded was above the KPI at 4.6 months, but within the amber range. Programmes were approved for intended start dates. See slide 3 for further detail
Approvals subject to conditions ( <u>quality</u> )	In the <u>last three months</u> , whether we have supported providers to meet our standards through a frontloaded processes	Red >30% Amber 20-30% Green <20%	▶	We have not set any conditions on approving programmes in the last three months. See slide 3 for further detail
<u>Time taken</u> to complete the performance review process	In the <u>last three months</u> , whether we have delivered cases to conclusion in a timely manner	Red >6 months Amber 5-6 months Green <5 months	▶	<ul style="list-style-type: none"> <li>As reported in the previous two reports, we were expecting a drop in this area. We have maintained performance at amber in October (5.8 months compared to 5.6 in the last report), and will continue to monitor this moving forward</li> <li>This is due to a spike in reporting activity, creating a small bottleneck for concluding cases – a small number of cases are being finalised, which will impact the next report</li> <li>See slide 5 for further detail</li> </ul>
Percentage of <u>quality</u> checks completed	In the <u>last month</u> , whether we have ensured quality at key process points via mandatory quality checks	Red <95% Amber 95-99% Green 100%	▶	<ul style="list-style-type: none"> <li>We expect a high level of compliance with mandatory internal quality checks</li> <li>In the last month, 100% of quality checks were carried out at the required time</li> </ul>
Spot check outcomes ( <u>quality</u> )	In the <u>last three months</u> , whether checks undertaken have ensured the required level of quality	Red <80% Amber 80-90% Green >90%	▼	<ul style="list-style-type: none"> <li>From July, we used a new model to consider compliance with process through spot checks. The overall 'compliance level' is derived from detailed checks across process points, some of which were newly introduced with the quality monitoring model</li> <li>This month, the compliance level is down to 73% from 80% in the last report - although this is based on small numbers of cases (5), and although we will get a better sense of 'normal' for this performance figure as we run more checks and gather more data, we are using findings to make targeted interventions to ensure the quality of outcomes</li> <li>A regular problem was reports not being produced iteratively, which does not impact on the quality of reports themselves, but does impact on timeliness of delivery</li> <li>We will increase the number of checks undertaken in November, to ensure a small sample size is not skewing figures</li> <li>Any areas of non-compliance are routinely fed back to team members, and regularly occurring problems are fed into continuous improvement work</li> </ul>

# Approval process – performance

Number of active cases - by case stage



## Active cases

- For most cases, we are preparing for assessments for January 2024 and September 2024 starts
- Overdue cases are in the programme assessment and assessment report stage – we are currently prioritising delivering cases for programmes due to start in January 2024

## Conditions applied on approval

- An explicit aim of moving to our current quality assurance model was to frontload regulatory burden and reduce the number of formal 'conditions' applied when approving programmes
- We still hold providers and programmes to the same high standards, but work with them to fix problems early, rather than resorting for formal requirement setting through conditions
- We have not set conditions on any cases in the last three months

## Observations

- Low levels of observations show process outcomes are acceptable to providers, and that we have undertaken a fair assessment
- We have not received any observations in the last three months

## Approval duration

- We did not conclude any approval cases in September – this is normal at this point in the academic year, as programmes normally start in September or January, and must be approved before they start
- The last three month stage completion figure has increased by 0.1 months from the last report

## Completed cases

Period	Number completed	Conditions set (% of cases)	Observations received (% of cases)	Stage 1 age at stage conclusion (months)	Stage 2 age at case conclusion (months)
Last month	0	N/A	N/A	N/A	N/A
Last 3 months	13	0	0	N/A	▲ 4.6
Target		Less than 20%	Less than 5%	3 months	4 months

# Professional pipeline

- We include this information to provide insight about learner number changes into the professions we regulate
- Through our processes, we capture proposed learner numbers for each programme – figures presented through this table are not actual learner numbers, but are the maximum capacity we would expect programmes to be operating at
- This data and information can be used by commissioning organisations and others to understand capacity within approved and proposed programmes

## Programme capacity

- All professions have increased, and / or are increasing capacity, with the notable exceptions of ODPs
- We increased the required threshold level of qualification for ODP programmes to BSc (hons) – although we have given providers several years to close existing provision below this threshold and open new provision should they wish, this change may have impacted approved programme capacity
- Within current commissioning systems, there is a potential overall increase in capacity of 4% over two years

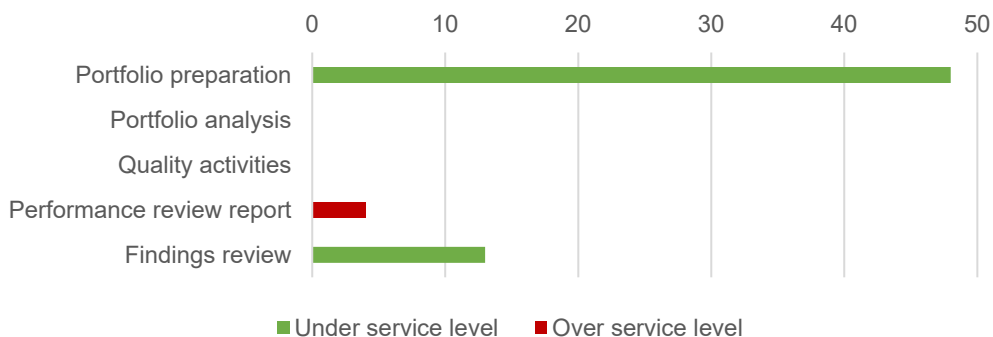
## New programmes

- New programmes are currently only being developed in some of the AHPs
- There are no programmes currently proposed in Northern Ireland, Scotland or Wales

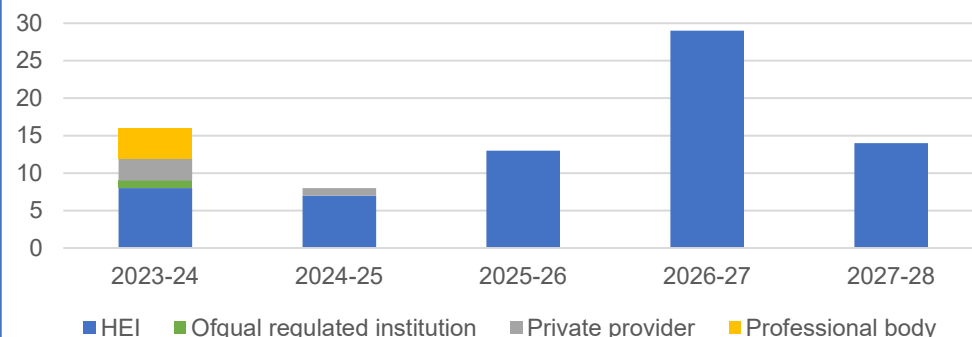
Profession	Yearly capacity of approved and open programmes	Capacity change in the last 12 months (new programme numbers - closed programme numbers)	% change	Proposed programmes	Difference between future closures and proposed programmes	Potential capacity change, 12 months ago to future	% potential change
Arts therapist	917	30	3%	0	10	40	4%
Biomedical scientist	2,012	-	0%	0	-	-	0%
Chiropodist / podiatrist	1,038	30	3%	0	12	42	4%
Clinical scientist	970	-	0%	0	-	-	0%
Dietitian	1,574	50	3%	3	49	99	6%
Hearing aid dispenser	1,007	25	2%	0	-	25	2%
Occupational therapist	5,788	24	0%	5	125	149	3%
Operating department practitioner	2,144	-141	-7%	0	-61	-202	-9%
Orthoptist	235	20	9%	0	-	20	9%
Paramedic	6,685	80	1%	5	440	520	8%
Physiotherapist	7,908	110	1%	5	75	185	2%
Practitioner psychologist	3,471	-	0%	0	-	-	0%
Prosthetist / orthotist	140	-	0%	0	-	-	0%
Radiographer	4,986	130	3%	5	271	401	8%
Speech and language therapist	2,608	164	6%	1	50	214	8%
Total	41,483	522	1%	24	1,032	1,554	4%

# Performance review process

Number of active cases - by case stage



Next review period outcomes



## Completed cases

Period	Completed	Observations received (% of cases)	Age at case conclusion (months)
Last month	4	▲ 25%	▲ 6.4
Last 3 months	23	▲ 9%	▲ 5.8
Target		Less than 5%	5 months

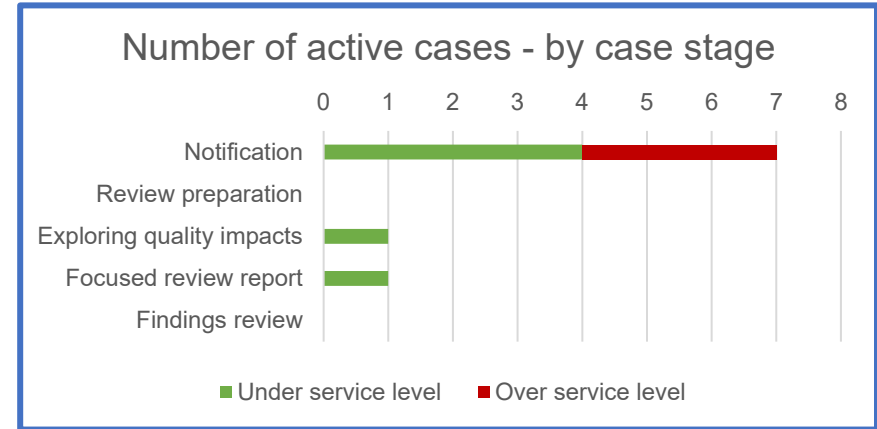
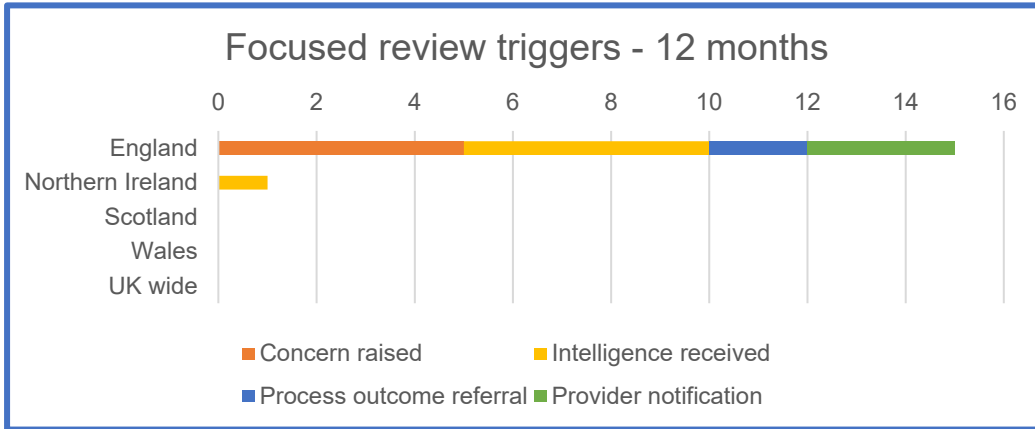
### Current activity

- Most cases are in the portfolio preparation stage. This means we are working with providers on our requirements, and setting deadlines for portfolio submission
- Remaining assessments from 2022-23 are in the report or findings review stage. This means we are either finalising our reports, or submitting reports to the Education and Training Committee (Panel)
- There are four cases overdue in the report stage – all cases in this stage should be finalised in the coming weeks, which will close off our assessment activity for the 2022-23 academic year
- This is a much-improved position from 2021-22 academic year cases, most of which were finalised in March and April of this year

### Review outcomes

- The figure for the 23 cases concluded in the last three months was above the KPI – as expected, there was an increase in this figure for this report, and we expect this to be maintained for the November report with cases being concluded. The spike in reporting activity has created a small bottleneck but as expected this should be unblocked this month, which is slightly later than expected from the last report
- We will get a much better sense of performance in the November report, which will show performance for all 2022-23 cases
- Variance in outcomes is driven mainly by provider type - variance seen is mainly driven by providers not being included in HEI data returns, and not establishing a data supply through the process
- To remain confident with provider performance, we rely on regular supply of data and intelligence to help us understand provider performance outside of the periods where we directly engage with them
- Two providers supplied observations as part of the process in the last three months, which has meant we are above the target in this area. No changes to outcomes were made as a result of these observations

# Focused review process





## Cases – received and completed

Period	Triggers received	Review required %	Number competed (full process)	Observations received (% of concluded cases)	Age at case conclusion (months)
Last month	2	50	0	N/A	N/A
Last 3 months	5	▼ 31	1	▶ 0	▲ 11.6
Target		50%		5%	5 months

- Number of cases remains small, but for the first time 'intelligence received' is the most frequent reason for setting up a focused review case. This may be due to us recording more information out of updates made to the focused review process to ensure we record intelligence and information in a more structured way, enabling a clearer triage point
- The percentage of cases referred to review was below the target in the last three months
- Cases are taking longer than they should to conclude – as noted above, we have refreshed the focused review process to ensure we are applying our decision making framework to investigate and conclude cases, in a timely manner

# Assurance and current focus

Current focus	Risks and issues	QA audit ratings		Recommendations delivered
<ul style="list-style-type: none"> <li>• Delivery of last set of reports for performance review assessments from the 2022-23 academic year</li> <li>• Planning for performance review activities for the 2023-24 academic year</li> <li>• Undertaking approval assessments for programmes with January 2024 planned start dates</li> </ul>	<ul style="list-style-type: none"> <li>• End of the spike in reporting activities in the performance review process</li> <li>• This led to a bottleneck in assessing and producing reports – but this is minor compared to 2021-22 cases</li> <li>• We are finalising final reports, which will impact on reporting in this and the next performance report</li> </ul>	Approval		✓
		Performance review	Pending 2023-24 (Q3)	
		Focused review	Pending 2024-25	
		Programme records		✓

Continuous improvement activity		
Planned	In progress	Completed (last three months)
System for new clinical scientist modalities updated (Q3)	Recording and sharing of partner availability information (Q3)	Spot check development (August)
		Feedback mechanism for supporting partners (August)
		Achievability of intended service levels / KPIs (September)
		Learner concerns threshold of acceptance (September)
		Programme records change process definition (September)
		Application of focused review process (September)
		Developing supporting information for support visitors (September)
		Report improvements (September)

# Stakeholder engagement highlights



Contacted all education providers with our requirements for the revised Standards of conduct, performance and ethics



Delivered a well-attended webinar for providers to prepare them for implementing the revised Standards of conduct, performance and ethics



Continued work to establish formal information sharing with professional bodies and NHS England



25 1-2-1 meetings with 16 professional bodies in the last six months



247 meetings with education providers and other sector stakeholders - primarily focused on case assessment, and information sharing arrangements, in the last 12 months



Continued to develop how we engage stakeholders well, on a regional basis



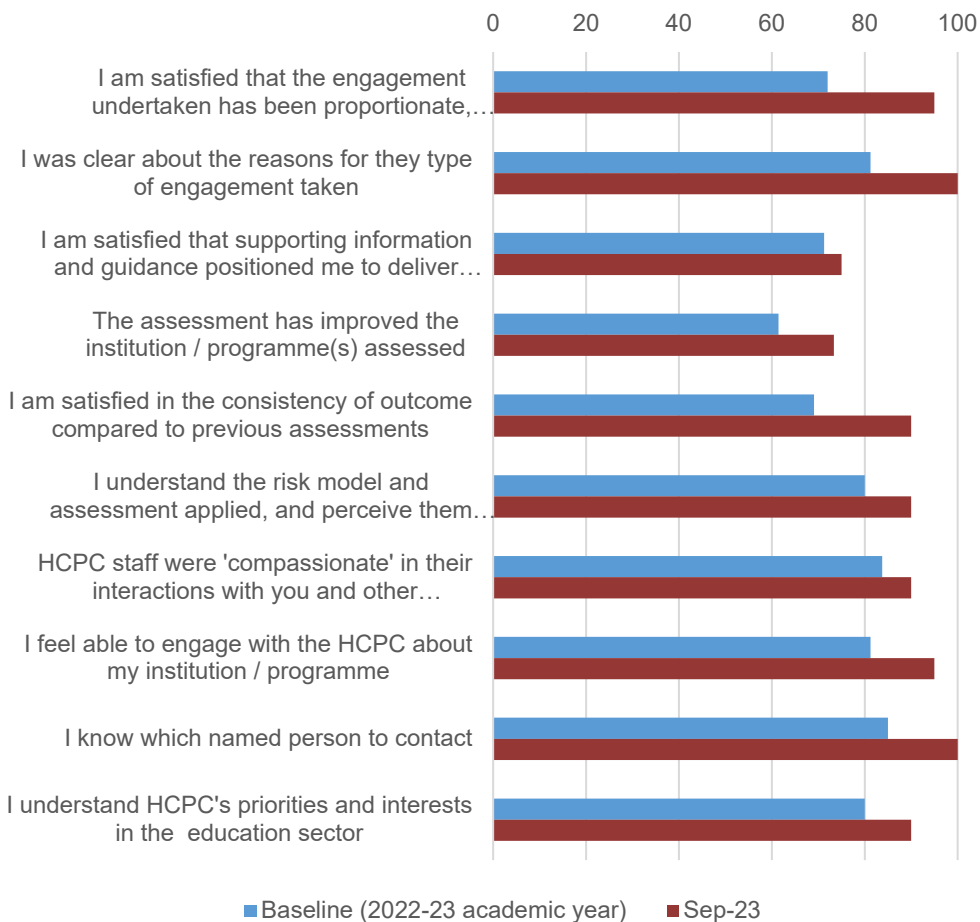
HCPC co-leading work with the NMC to establish formal information sharing with other regulatory bodies



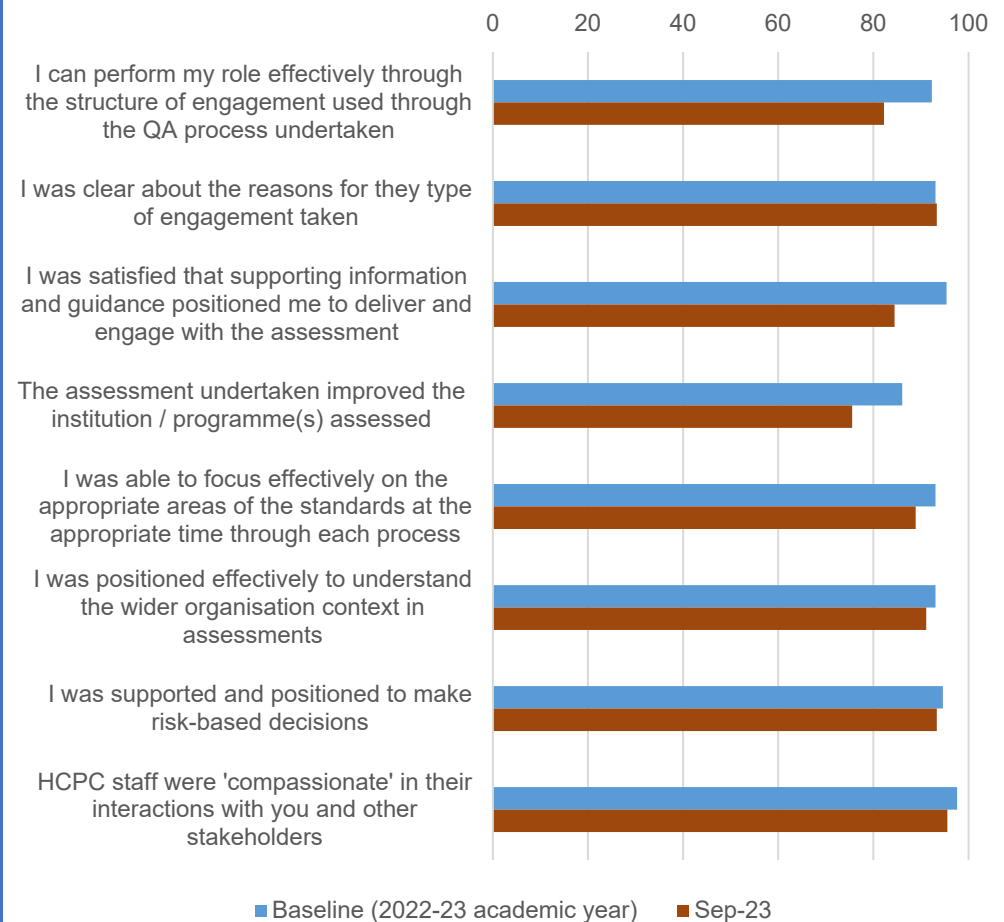
# Stakeholder feedback

- We have included this information to show stakeholder experience and views of our processes – the generally high satisfaction ratings should be seen as a positive
- This data is from a post-process survey, and is collated since we started running in September 2022
- We have used results from the whole of the 2022-23 academic year as a baseline, which we compare recent results against in real time

## Education provider satisfaction rating



## Partner satisfaction rating



# Appendix – historical performance

