Business Case/Investment Proposal - Template

Highlighted text for amendment/deletion as appropriate for your organisation and particular proposal

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| **Project /Programme Name:** | Developing Physician Associates within our workforce through degree apprenticeships |
| **Author:** |  |
| **Directorate/Service/****Department:** |  |
| **SRO:** |  |
| **Date:** |  |
| Recommendation: *The Board is asked to…* |
| To invest and support with training a sustainable future workforce, utilising the apprenticeship levy to secure a pipeline of qualified professionals through Physician Associate degree apprenticeships. The Board is asked to support the following expenditure:1. XX Physician Associate Apprentices to commence in post from September 2023 at a cost of £XXX for 2023/24 and £XXX for 2024/25
2. Funding to support the recruitment of apprentices and the funding profile for the study time as follows…

The apprenticeship training costs of £XX per person will be claimed against the levy contribution (tax) that all large employers are required to contribute to HM Treasury.This proposal enables xx to deliver its strategic expectations in harmony with its values of xx  |
| 1. **PURPOSE** – Clearly state your business proposal and what situation/issue it will resolve or help with. Consider what would happen in the absence of this proposal.
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| To support with meeting challenges in the medical workforce and to promote the benefits apprenticeships bring to the NHS, a Physician Associate (PA) Degree Apprenticeship standard has been introduced. This postgraduate apprenticeship route will potentially widen access and participation through a new flexible entry route into the PA profession. Apprenticeships can be viewed as a sustainable funding model for training and workforce growth.  This programme can accessed from XX university from XX/XX date. Apprenticeships are work-based training programmes, designed to help employers train people for specific job role. Apprentices receive a paying job with valuable training while they work towards a nationally recognised apprenticeship standard or framework. Apprenticeships bring several tangible benefits to NHS organisations in creating skilled, motivated and qualified employees. Our workforce planning has identified that PA Apprentices could help to address skills shortages across our workforce. We have identified the following specialities/locations where PA Apprenticeships could address workforce challenges… PA Apprenticeships have the potential to make a positive impact on recruitment and retention in these areas, adding to our productivity and skill mix. ?detail around challenges in identified areas  |
| 1. **OBJECTIVES -** Clearly identify the key objectives which this bid seeks to deliver, defining them in SMART terms (e.g. to employ xx PA Apprentices by [date])

*(SMART acronym stands for Specific, Measurable, Achievable, Realistic and Timely)* |
| To commence a cohort of xx Physician Associate apprentices per year (from Sept 2023/24).? breakdown of which directorate/department/location/specialities |
| 1. **STRATEGIC FIT -** Outline how your proposal will contribute to delivering service objectives/business planning and the wider organisational objectives of overall clinical/corporate strategy.
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|  Demand is growing for PAs to be able to support delivery of new service models outlined in the NHS long-term plan, particularly in primary care. PAs have a key role in supporting the new primary care workforce, as reflected in the GP Contract 2020/21 Additional Roles Reimbursement Scheme (ARRS). Creating a more flexible and adaptable workforce are ambitions set out in both the NHS Long Term Plan and NHS People Plan.  The NHS Interim People Plan highlights that apprenticeships will continue to be critical in attracting people to the NHS from less well represented groups and supporting the development of new roles. The government is therefore committed to significantly increasing the quantity and quality of apprenticeships in England. The NHS Interim People Plan also highlights the significance of apprenticeships in the Integrated Care Systems (ICS) approach to whole-system workforce planning and development to deliver the NHS Long-Term Plan. The apprenticeship route is a funding route for education used increasingly across health and care. The offer of a PA (Degree) apprenticeship plays an important part in decreasing educational inequalities, while supporting social mobility and levelling up. Supporting implementation of the apprenticeship route is of particular benefit to employers in underserved areas in England, therefore effectively responding to the Health Disparities White Paper.  Link to local clinical strategy/business planning |
| 1. **INVESTMENT REQUIREMENT SUMMARY**
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| Start date: |  | End date: |  |
| **Estimated Budget** |
| Include financial breakdown of proposal – to refer to funding sources including Levy details if applicable |
| 1. **BENEFITS/IMPACT –** Describe the benefits that your proposal will deliver for learners/apprentices, other staff, patients and others
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| Identify key workforce groups/specialities affected. Outline operational benefits in terms of additional workforce/skill mix (during Apprenticeship period and once qualified); consider the Apprentice’s input and any reduced workload of their colleagues/supervisors (allowing for superivison). Consider current vacancy rates/turnover or others challenges within medical workforce. Consider benefit of PA role in terms of consistency within team – unlike medical trainees who move periodically. Consider financial benefits including Levy utilisation if applicable. Identify any regulatory benefits such as legal compliance.To consider how these benefits may appear or develop over time. Consider the impact of having a PA workforce established, in terms of future developments for that group – incoming GMC regulation/registration with protection of title. Prescribing rights anticipated thereafter.Summary of the key drivers underpinning this business case (further elaborated in Section 3 – Strategic Fit) are:  1. **Medical workforce supply and retention challenges**, presenting a risk to safe services, meeting patient demand and delivery of the Long-Term Plan and NHS People Plan. There is evidence that where NHS organisations are enabled to adopt and embed the apprenticeship route to train and develop their clinical workforce and attract new talent to meet identified skills gaps, this has a positive impact on recruitment and retention.
2. **The NHS as an anchor institution.** Using the apprenticeship route to make a difference to people through widening access to education, quality work and working more closely with local education partners are ways through which NHS organisations can positively contribute to local communities beyond providing health care, towards addressing social and economic disparities and revitalising local communities.

The strategic benefits propelling this case are:  * Increasing routes into the PA (medical associate) workforce through use of apprenticeships will benefit the local healthcare system by improving social mobility. The benefits to widening participation through an ‘earn and learn’ apprenticeship offer are likely to be significant for prospective learners against a backdrop of Covid-19 economic recovery, including an escalating cost of living crisis
* By embedding an additional, flexible, entry route to train as a PA, our organisation will be able to improve our recruitment offer, attracting a more diverse pool of people into the medical associate workforce, a highly evidenced key contributor to better care outcomes for patients.
* Through being supported to adopt and embed this apprenticeship route, we will be able to demonstrate effective utilisation of the apprenticeship levy linked to workforce issues and risk (increasing the number of apprenticeship opportunities linked directly to long-term workforce planning).
* Initial investment in the adoption and embedding of the PA Apprenticeship route locally will enable sustainable development of educational infrastructure, growth in local placement capacity and building/maintaining placement quality; allowing this new route to train become firmly embedded and enabling a skilled, transferable and sustainable supply of PAs into the future workforce within our organisation and wider system.

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| 1. **PROPOSED KPIs –** how will the impact of this investment be measured – identify metrics
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| 1. **EVALUATION –** how else will the impact of this investment be captured?
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| 1. **EQUALITY IMPACT ASSESSMENT -** describe any anticipated positive or negative impact the proposal may have on patients and staff (with reference to the protected characteristics within the Equality Act)
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| 1. **STAKEHOLDER ENGAGEMENT -** Outline any relevant engagement undertaken with NHS partners (at national, regional, ICS level), workforce groups/leads and other stakeholders. What was their view?
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| 1. **DELIVERABILITY & INTERDEPENDENCIES –** how easily achievable is the proposal to be delivered within the timescales specified above?What needs to happen for this proposal to be delivered?
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| Consider issues such as procurement, legislation, consultation, staffing/supervision requirements, funding etc. |
| 1. **OVERVIEW OF OPTIONS –**  provide summary of available positions with preferred option (include appraisal of financial and non-financial benefits)
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| i) Option 1: Do nothing | Advantages: No evidenceDisadvantages: Status-quo does not deliver a sustainable workforce and supply issues mean staffing levels become unsafe. Paying premium cost for bank and agency including increasing reliance on temporary workforce. Talented potential PAs who cannot/do not wish to access the Direct Entry study route will be prevented from joining workforce. |
| ii) Option 2 (preferred option, contained in this proposal) | Advantages: Increased supply and skill mix to PA workforce, attracting talented staff with existing healthcare experience, supporting the upskilling and retention of existing staff, reduction in turnover, reduced reliance on overseas recruitment. Other Trusts competing for labour market entrants. Utilisation of apprenticeship levy. Cost effective (no unsocial hours payments for apprentices in training). Development of new service pathways. Supporting quality. Increasing patient outcomes/experience. Freeing up supervisors for more clinical/training/research time. Improving wellbeing of colleagues/team. Embedding the PA profession further into he organisation. Disadvantages: Cost, service impact of study-time time. Increased pressure on placement and supervision capacity. |
| 1. **RISK ASSESSMENT –** describe identified risks with any of the options
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| Including clinical risk, risk of activity loss / loss of reputation, risk to business continuity, risks related to recruitment/retention, financial risks |