

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**  
**BOARD OF DIRECTORS**  
**THURSDAY 24 OCTOBER 2019**

<b>Title:</b>	<b>6 MONTHLY PROGRESS REPORT – NURSING, MIDWIFERY AND ALLIED HEALTH PROFESSIONALS (AHP) STAFFING</b>	
<b>Responsible Director:</b>	Lisa Stalley–Green , Executive Chief Nurse	
<b>Contact:</b>	Davina Thomas ( Deputy Chief Nurse People & Standards )	
<b>Purpose:</b>	To provide the Board of Directors with assurance of Statutory requirements.	
<b>Confidentiality Level &amp; Reason:</b>	None.	
<b>Annual Plan Ref:</b>	Aim 1. Always put the needs and care of patients first.	
<b>Key Issues Summary:</b>	<p>Building on the actions taken since the last paper in April 2019, this paper will provide an overview of the key initiatives and work streams being undertaken in the light of sustained national registered nurse staffing landscape. It will reference the actions in place and those planned to support the overall nursing, midwifery and AHP workforce across the Trust to attract, retain and develop the right people with the right skills in the right roles. Key areas of focus are:</p> <ul style="list-style-type: none"> <li>• Alignment with national strategy</li> <li>• The nursing and midwifery registered workforce position and compliance</li> <li>• Identification of the individual clinical areas with high registered nurse vacancy rates</li> <li>• Implementation of the Nursing Associate programme</li> <li>• Reduction in the usage of external agency nursing</li> <li>• Implementation of the UHB School of Nursing, Allied Health Professions and Midwifery</li> </ul>	
<b>Recommendations:</b>	<p>The Board of Directors is asked to :</p> <ul style="list-style-type: none"> <li>• Note the improving registered nursing workforce position</li> <li>• Note the growth in the Nursing Associate workforce</li> <li>• Note the continuing risk management required to achieve safer staffing</li> <li>• Discuss and endorse further development of the School of Nursing, Allied Health Professions and Midwifery</li> </ul>	
<b>Approved by:</b>	Lisa Stalley-Green	<b>Date:</b> 16 October 2019

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST**  
**BOARD OF DIRECTORS**  
**THURSDAY 24 OCTOBER 2019**  
**PROGRESS REPORT – NURSE, MIDWIFERY AND ALLIED HEALTH**  
**PROFESSIONALS (AHP) STAFFING**  
**PRESENTED BY THE CHIEF NURSE**

**1. Introduction**

The bi-annual, nursing, midwifery and AHP staffing report details the Trust position against the requirement of the National Quality Board (NQB) Safe Sustainable and Productive Staffing Guidance 2016, the NQB Speciality Guidance 2018, and the NHS Improvement (NHSI) Developing Workforce Safeguards guidance published October 2018. As part of “safe staffing” governance the guidance recommends that the Board of Directors receive a bi-annual report on nursing, midwifery and AHP staffing in order to comply with CQC fundamental standards across the five domains of Safe; Effective; Caring; Responsive and Well-led.

This paper will provide an update on the nursing, midwifery and AHP workforce position at the end of August 2019 and reflect the changes since February 2019; outline and discuss actions being taken; and provide assurance on the effectiveness of the actions to support the overall nursing, midwifery and AHP workforce across the Trust by attracting, retaining and developing the right people with the right skills in the right roles.

**2. National Context**

Nationally nursing and midwifery workforce supply remains challenging with the shortfall in registered nurses being a well-documented challenge for all NHS providers. The main contributing factors include:

- The Nursing & Midwifery Council ( NMC ) have agreed to modify the English language test which potentially could enable more overseas nurses to meet the criteria for entry onto the UK NMC register.
- The New pre-registration standards for nurses come into effect in September 2019 , higher education providers have had to revalidate their programmes of training and alongside this new standards for student supervision and assessment have come into effect.
- The number of nursing vacancies nationally is now reported as approximately 43,000
- The impact of the removal of the bursary for pre-registration training has continued to affect the number of applicants nationally and there is reporting that attrition during the first 12 months of training is increasing due to financial hardship. Data for the calendar year to August 2019 indicates that there are 1,360 (8%) less people having been accepted onto undergraduate nursing degree courses in England than in 2016

- There is a national shortage of Podiatrists and also Occupational Therapists and Physiotherapists at Band 6 level.

The Interim People Plan for the NHS was published in June 2019 by NHS Improvement (NHSI). This sets out the collective vision for how people working in the NHS will be supported to deliver the NHS Long Term Plan and identified the immediate actions NHSI will take in 2019/20 to make improvements and also build a plan for people that is fully integrated with those for financial and operational delivery. The plan was developed with a focus on immediate actions needed to be taken and reflects the need for continued growth and transformation of the overall NHS workforce to develop a more varied, richer skills mix with new types of roles working in different ways. The plan reflects the requirement for a more systematic approach to planning and coordinating workforce transformation

### **NHSI Interim People plan Key Actions for the Trust 2019/2020**

<b>NHSI Interim People Plan Immediate actions 2019/20</b>	<b>UHB actions</b>
Significantly expand the Director Support Programme to improve retention	Director of Nursing Chairs Monthly Retention Meeting
Provide additional support where the need is greatest	Focused and bespoke recruitment campaigns to those services with the highest number of vacancies and investment of the Nursing Associate role in Older Adults care
Deliver a rapid expansion programme to increase clinical placement capacity for September 2019 intakes.	Implementation of a new model of supervision and assessment called KUDOS which will increase clinical placement capacity. Roll out of the model has commenced. Reviewed and modified the approach to education audit to centre it on, patient profile / patient pathways, ward/department/service descriptors. This new approach will increase placement capacity across services not historically used for learners
Undertake a comprehensive review of current clinical placement activity.	Trust database developed, work is ongoing to capture all clinical placement activity centrally. The Nursing Associate clinical placement circuit has been combined with the undergraduate placement circuit to maximise placement capacity and opportunity
Work with national partners to develop a single recruitment campaign which reflects the realities of a career in contemporary nursing.	Work of the Birmingham and Solihull partnership has received national recognition for collaborative working on the training and introduction of the Nursing Associate role across the Health Economy

<b>NHSI Interim People Plan Immediate actions 2019/20</b>	<b>UHB actions</b>
<p>Develop a toolkit for supervisors and assessors to enable them to support a wide diversity of learners.</p>	<p>The collaborative regional Birmingham and Solihull (BSol) approach has created and approved a common Supporting Learners in Practice (SLiP) document to ensure consistency. The practice supervisor and practice assessor education packages are being developed regionally supported by BCU and UoB</p>
<p>Launch a new return to practice campaign.</p>	<p>UHB is locally and regionally engaged in the RTP programme and has active membership in the National RTP programme group</p>
<p>Develop a new procurement framework of approved international recruitment agencies to ensure consistent operational and ethical standards</p>	<p>Exploring across Birmingham &amp; Solihull STP how collaborative approach across NHS providers could be undertaken. Working with BHA Shared Procurement services to understand costs associated with using a recruitment agency for bespoke areas of international recruitment</p>
<p>Develop a clear model which sets out entry routes into nursing highlighting the different approaches and benefits</p>	<p>UHB entry points into roles have been reviewed and mapped, ensuring routes can be navigated externally and that schools and further education colleges are engaged with to sign post health care careers in nursing, midwifery and operating department practice.</p>
<p>Expand the pilot programme for nursing associates who wish to continue their studies to registered nurse level</p>	<p>The Trust is currently scoping options for a top up apprenticeship for Nursing Associates to attain Registered Nurse qualification</p>
<p>Consider how local health systems and employers can use job guarantee approaches</p>	<p>From June 2019 the Trust has guaranteed a registered nursing post to all 2<sup>nd</sup> Year undergraduate students on adult / paediatric nursing programmes and Operating Department Practitioner Diploma / Degree programmes without the requirement for a competitive interview.</p> <p>The Trust guarantee a Band 4 Nursing Associate post to all Trainee Nursing Associates on completion of their Apprenticeship</p>

### 3. University Hospitals Birmingham NHS Foundation Trust context

Table One shows the overall vacancy position at the End of August 2019 for registered nurses (RN) and operating department practitioners (ODP)

**Table One**

Month	Funded establishment	In post	Vacancy	%
<b>August 2018</b>	5894	4894	1000	16.90 %
<b>August 2019</b>	5823	5108	715	12.28%

There has been a 4.62% (285wte) reduction in the RN nursing and ODP vacancy position since August 2018. Table Two shows the numbers of RN/ODP's vacancies by Division as at 31<sup>st</sup> August 2019 and conditional registered nursing/ ODP job offers from outside of the Trust with start dates across Quarter 3 of this financial year (242 in total)

**Table Two**

Division	Number of RN/OPD wte vacancies (31 <sup>st</sup> August 2019)	Number of planned RN/ODP's (Quarter 3)
<b>One</b>	119.87	43
<b>Two</b>	152.95	47
<b>Three</b>	270.45	94
<b>Four</b>	68.14	21
<b>Five</b>	82.22	23
<b>Six</b>	36.04	14

Table Three shows the overall vacancy position at the end of August 2019 for registered midwives

**Table Three**

Month	Funded establishment	In post	Vacancy	%
<b>March 2019</b>	364.05	350.24	13.91	4%
<b>August 2019</b>	370.44	390.09	-19.65	-5.30%

Midwifery continue to build their planned over establishment model across the service

Table Four shows the top ten wards/ departments across the Trust that have the highest percentage of registered nurse/ midwifery vacancies. These areas are all cited in the appropriate divisional risk registers and the Associate Directors of Nursing (ADN's) are responsible for mitigation of risk and workforce planning.

Ward 11 at GHH has the highest registered vacancy rate at 55% (11.38wte). Plans are in place to reduce this to 45% during October through movement of staff from other clinical areas across the Division; continuing with the older adult recruitment campaign; recruitment of additional Trainee Nursing Associates and offering enhanced bank rates for staff covering shifts on Ward 11. The current risk is being in part mitigated by the over establishment of Health Care Assistants (5.86wte).

**Table Four**

Ward and site	Speciality	Number of vacancies	Percentage vacancy
11 GHH	Older Adults	11.38	55%
10 GHH	Respiratory	12.16	47%
12 GHH	Older Adults	9.13	44%
517 QEH	Acute Medicine	8.89	43%
518 QEH	Older Adults	10.77	42%
8 HH	T&O	9.02	41%
18 HH	Gastroenterology	7.13	39%
ED HH	Emergency Medicine	41.8	38%
West 2 QEH	Older Adults	6.91	38%
728 QEH	Colorectal	9.45	37%

Table Five shows the top ten wards/departments that have the lowest percentage of registered nurse/midwifery vacancies.

**Table Five**

Ward and site	Speciality	Number of vacancies	Percentage vacancy
19 HH	Haematology & Oncology	0.11	0.43%
301 QEH	Renal	0.5	1.39%
Delivery Suite GHH	Obstetrics	1.07	2.72%
Delivery Suite HH	Obstetrics	2.06	3.07%
AMU2 HH	Acute Medicine	0.57	3.15%
6 HH	Cardiology	1.3	3.38%
NNU BHH	Neonates	2.41	3.78%
Aspen	Obstetrics	0.9	5.16%
625 QEH	Haematology	1.69	5.27%
19 SOL	Respiratory	1	5.52%

Table Six illustrates the turnover rate for registered nurses since the beginning of the financial year 2019/2020. The turnover rate for Quarter 1 was 8.89% and the turnover rate for Quarter 2 is 8.59% to date. The national nursing turnover rate is 11.7% as published by NHSI in October 2019.

**Table Six**

		April 19	May 19	June 19	July 19	Aug 19
Registered Nursing and Midwifery	Numerator	509	533	545	530	483
	Denominator	5,973	5,965	5,922	5,945	5,848
	%	8.52%	8.94%	9.20%	8.92%	8.26%

#### 4. Operational Assurance

In line with NQB requirements the Trust publishes ward and departmental nursing and midwifery staffing data on a daily bases in their departments / wards. Day to day staffing is overseen by the Divisional Associate Directors of Nursing and supported out of hours by Clinical Site based teams.

The “ Safer Staffing Report “ (UNIFY) is submitted monthly to NHSI detailing planned and actual nursing and midwifery staffing levels and Care Hours Per Patient Per Day (CHPPD) which is extracted from the Health Roster System. Table Seven summarises actual staffing levels as a percentage of planned staffing levels across UHBFT for the last six months.

**Table Seven**

Month 2019	Day shift		Night Shift		Total
	Average fill rate - registered nurses/midwives	Average fill rate - HCA	Average fill rate - registered nurses/midwives	Average fill rate - HCA	Overall fill rate
Mar	86%	113%	89%	141%	99%
April	87%	110%	90%	135%	99%
May	88%	111%	91%	134%	100%
June	86%	110%	88%	137%	98%
July	85%	110%	88%	135%	98%
August	81%	111%	85%	138%	96%

Compliance with staffing has remained stable across the six month period with HCA compliance running significantly above 100%, the Trainee Nursing Associates are included in the HCA figures and usage in excess of 100% funded establishment is attributed to mitigation of the registered nursing vacancies and provision of enhanced observation. Nursing Associates will be reported on a separate line in UNIFY from September 2019 onwards.

Care hours per patient day (CHPPD) are calculated by dividing the total number of nursing hours on a ward or unit by the number of patients in beds at the midnight census. This calculation provides the average number of care hours available for each patient on the ward or unit. Table Eight shows CHPPD from March 2019 to August 2019 split by Registered Nurses/Midwives and HCA's.

**Table Eight**

Month 2019	Care Hours per patient per day		
	Registered Nurses/ Midwives	HCA's	Overall
Mar	4.45	3.13	7.58
April	4.47	3.05	7.52
May	4.50	3.14	7.65
June	4.38	3.16	7.55
July	4.50	3.26	7.76
August	4.28	3.24	7.52

Care Hours Per Patient Day (CHPPD) have remained stable for both registered

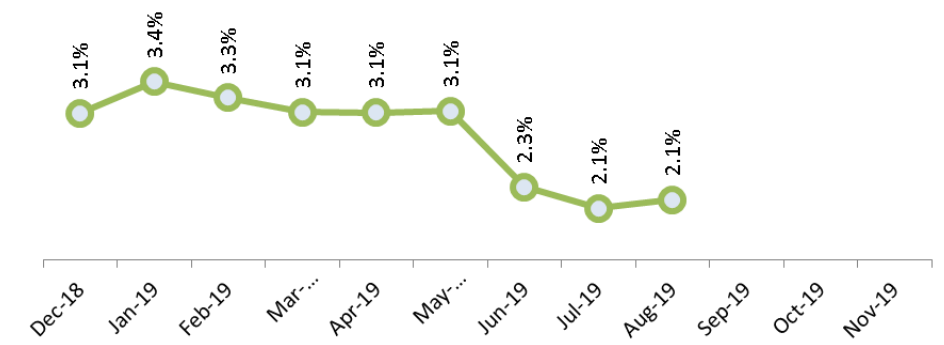
nurses/midwives across the six month period.

## 5. Safer Staffing

Where registered nurse fill rates cannot be delivered staff may be redeployed from other clinical areas and senior nursing staff take into account clinical risk and safety, and acuity and dependency and use this information to inform professional judgement. Cross Divisional cover at site bases is supported and any actions are clearly communicated to the Clinical Site Teams. This is an escalation process which at times is challenging for staff. A number of night and daytime engagement sessions have been held along with a review of enhanced rates for bank shifts and increased opportunities for flexible working. Feedback from Trust staff following these sessions and associated actions has been positive.

The Trust's Director of Nursing has operationalised a programme of work to reduce the routine use of external agency staff ensuring identification and mitigation of any patient safety risks.

**Fig. One - Percentage of duties filled by external agency staff**



This programme of work has resulted in a reduction of 1.0% in the use of external agency staff. This reduction in external agency staff from April 2019 to July 2019 equates to a financial saving of £1,000,402.

The highest external agency usage remains in the Emergency Departments at Heartlands Hospital and Good Hope Hospital (Table Nine). This can be attributed to the continued pressure of emergency attendances within both departments due to the number of registered nursing vacancies. A recruitment campaign is underway with open days having been held across the Emergency Departments resulting in 45 applicants having been shortlisted for interview.

External agency at Heartlands Hospital remains high in main theatres but has significantly reduced in theatres 6 and 7 (Table Nine). Registered nursing and ODP vacancies are the main cause of this. Recruitment to these areas continues and the



first Trainee Nursing Associates will begin their apprenticeships in theatres from October 2019.

**Table Nine**

Clinical area	% of duties filled by external agency nurses			
	May 19	June 19	July 19	Aug 2019
ED BHH	27.9%	27.6%	27.9%	33.9%
ED GHH	28.4%	29.5%	27.9%	26.7%
Theatres Main BHH	14.4%	17.7%	16.4%	13.9%
Theatre 6&7 BHH	9.4%	5.8%	3.0%	12.0%

Table Ten shows the reduction in the percentage of duties filled by external agency staff in areas of previous high usage

**Table Ten**

Clinical area	% of duties filled by external agency nurses			
	May 19	June 19	July 19	Aug 2019
Ward 2 GHH	11.1%	1.5%	0.2%	0.7%
AMU SS SH	10.7%	6.9%	5.7%	6.5%
Ward 29 BHH	12.8%	7.6%	4.7%	4.6%
Ward 11 GHH	4.8%	1.9%	0.6%	0%
Ward 7 BHH	18.1%	7.5%	3.7%	2.1%
Ward 30 BHH	6.1%	0.8%	1.0%	1.0%
ID Unit BHH	6.7%	0.6%	0.3%	1.3%

The new Divisional structures came into effect on 1<sup>st</sup> June 2019 , Divisional Associate Directors of Nursing have begun the preparation for a comprehensive strategic staffing review across all inpatient and key outpatient services. These reviews require the systematic review of each funded establishment using methodology described in national guidance. The key focus of these reviews is on operationally sensitive nursing /midwifery posts situated within wards and departments delivering inpatient and outpatient care and treatment, these reviews do not reference non ward / department based staff such as Clinical Nurse Specialists , Education and Research and Development staff or Corporate services.

A standardised peer reviewed approach has been designed which includes triangulation of evidence based tools , professional judgement and patient outcomes. The following reviews are currently being undertaken:

- Older adults inpatient areas
- Paediatric services
- Infectious diseases inpatient areas

## **6. Nursing Associates**

In January 2019 the Nursing and Midwifery Council (NMC) opened the register for the Nursing Associate role (NA). Nursing Associates take two years to train on an apprenticeship basis and the role is designed to bridge the gap between health care assistants and registered nurses, this role will widen participation in terms of access to careers in healthcare by opening up new routes to training that have not previously existed. The Trust has 210 trainees currently on programme and 29

qualified Nursing Associates who are registered with the NMC. Table Eleven summarises the areas of deployment for the Nursing Associates.

**Table Eleven**

<b>Speciality</b>	<b>Number deployed</b>
Critical Care	5
Renal	1
Neurology	2
Older Adults	5
Paediatrics	3
Medicine inpatient wards	2
Emergency Department	1
Trauma and Orthopaedics	1
Surgery	3
Community	4
Gastroenterology	2
<b>Total</b>	<b>29</b>

The Trust strategy is to develop the Nursing Associate workforce at ‘industrial scale’ with projected growth through to October 2022 as follows:

<b>Date</b>	<b>Predicted number of qualifying Nursing Associates</b>
<b>April 2019</b>	29
<b>October 2019</b>	3
<b>April 2020</b>	27
<b>October 2020</b>	50
<b>April 2021</b>	70
<b>October 2021</b>	100
<b>April 2022</b>	100
<b>July 2022</b>	100
<b>October 2022</b>	100
<b>Total</b>	<b>584</b>

Included within the industrial scale expansion of the Nursing Associate programme is the development of pathways targeted on specific areas of care as well as the generic Nursing Associate training pathway. There are trainees on programme following neonatal, critical care and community pathways and additional pathways in learning disabilities and frail older adults are being introduced across the October 2019 and February 2020 cohorts.

Divisional workforce plans and Quality Impact Assessments are being undertaken to ensure the safe and effective implementation of the growing Nursing Associate workforce. Recruitment to the programme continues to support internal development and growth of our existing workforce and recruitment of external staff including those that wish to start their careers in health.

## **7. Right Skills – development of the UHB School of Nursing, Allied Health Professions and Midwifery**

Plans are underway to establish the UHB School of Nursing, Allied Health Professionals and Midwifery. The school will provide:

- Excellent multi professional clinical learning and experience
- Leadership development and careers progression
- Health and wellbeing, pastoral support, coaching and mentorship
- Quality, safety and innovation across learning and development

A Head of School will be appointed and the school will ensure that current resources engaged in the support of learners and preceptees are brought together. In addition to this a series of expert wards across the four hospital sites will be developed where trainees, students and learners provide care and learn together in areas of clinical excellence. Real estate is also being sought to increase the provision of classroom, simulation and learning facilities.

The school will have a defined governance framework led by a School Board the chair of which will be a Non-Executive and membership will include the Chief Nurse; student representatives; Professor of Nursing; AHP lead; finance and HEI partners. Initial communication about the school will be communicated across the next round of Chief Executive Team Brief. A summary of the school and associated governance framework is shown at Appendix One.

It has been recognised that the Trust needs to identify Future Leaders within the nursing workforce and a Future Leaders Programme for nurses has been developed. This programme is aimed at post 18 month registered nurses who want to develop their leadership and managerial skills, it is a bespoke course for UHB led by the Healthcare Careers & Development team and participants will achieve a recognised Team Leader Apprenticeship qualification, course content includes:-

- Leadership style
- Conflict resolution
- Resilience
- CQC expectations
- HR masterclasses
- Quality Improvement project for their ward/department
- Finance
- Governance
- Key note discussions from within the Trust
- Innovation & Research
- Trust KPIs – such as waiting times etc
- Complaints handling

The first programme is planned to start in November 2019.

## **8. Future actions**

- Continued implementation of the Nursing Associate role at industrial scale

- Introduction of Nursing Associate training pathways in learning disabilities and frail older adults
- Further reductions in the use of external agency nurses
- Increases in the number of newly qualified registered nurses employed across the Trust following cessation of interviewing and testing for our local students
- Continued implementation of the School of Nursing, Allied Health Professions and Midwifery
- Continuation of workforce reviews and the development of comprehensive strategic and divisional workforce plans

## **9. Recommendations**

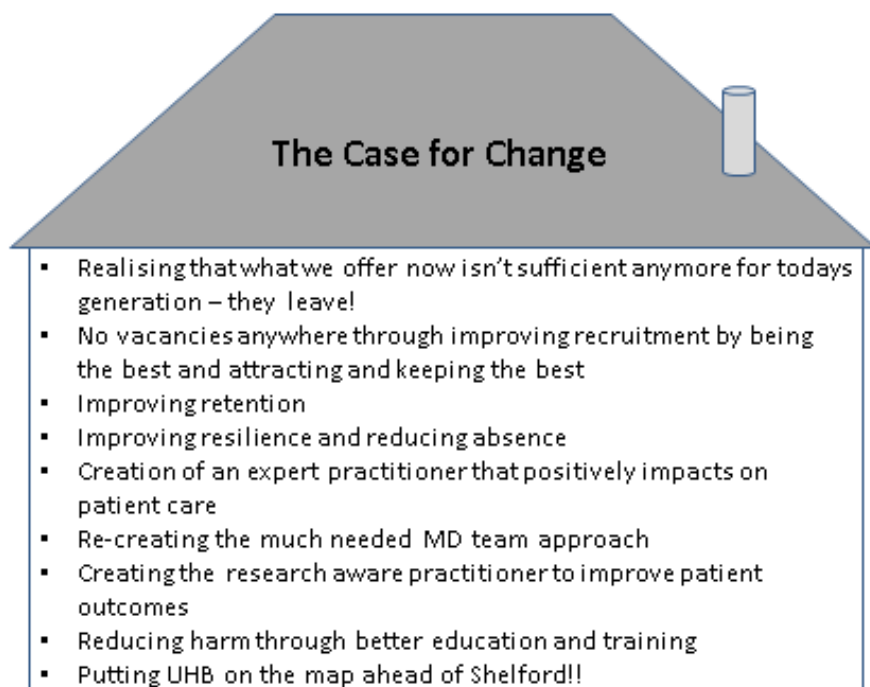
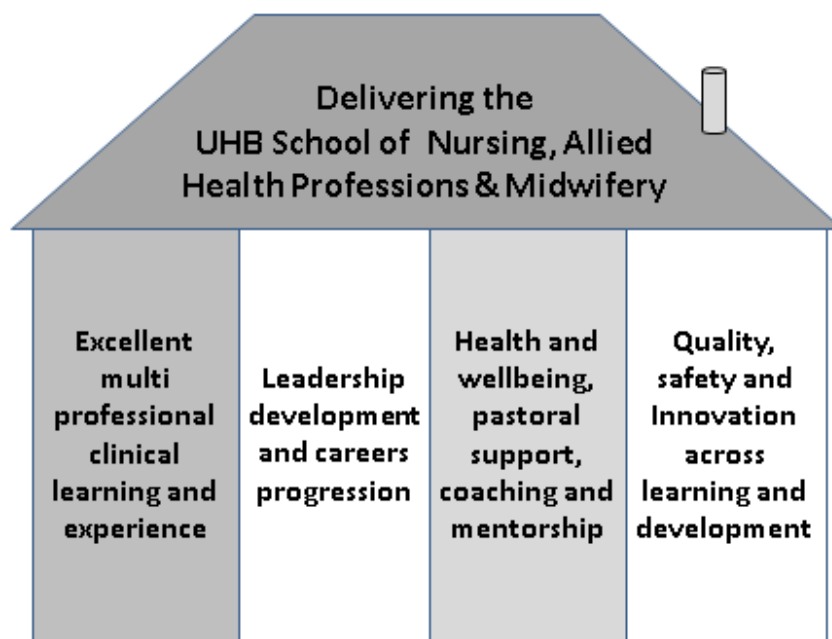
The Board of Directors is asked to:

- Note the improving registered nursing workforce position
- Note the growth in the Nursing Associate workforce
- Note the continuing risk management required to achieve safer staffing
- Discuss and endorse further development of the School of Nursing, Allied Health Professions and Midwifery

**Lisa Stalley- Green**  
**Executive Chief Nurse**  
**October 2019**

**SCHOOL OF NURSING, ALLIED HEALTH  
PROFESSIONS AND MIDWIFERY**

**Belong, Grow, Succeed**



## Who is the School for?

### Phase One

- All undergraduate learners across Nursing, Allied Health Professions and Midwifery
- Non medical staff up to 18 months post qualification
- All mentors, supervisors

### Phase Two

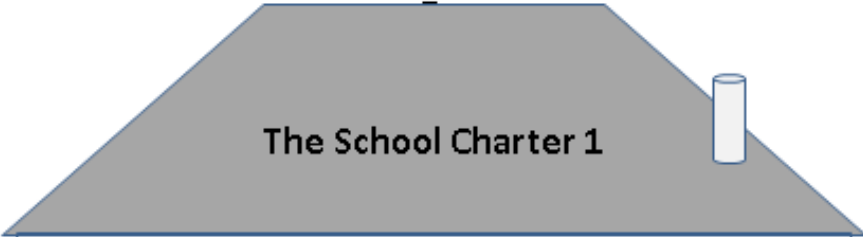
- All existing Nursing, Allied Health Professions and Midwifery staff in support of their learning, career development and succession
- Professions allied to medicine i.e. Physician Associates, Advanced Clinical Practitioners

3

## What will the School Deliver?

- Commission the education and training we need
- Support the inclusive recruitment of the right learners for the UHB workforce
- Create and foster an excellent clinical learning experience
- Provide support and development for the practice supervisors and assessors
- Support and manage the transition period of learners into the workforce
- Provide leadership development, talent and careers management for all learners and supervisors
- Focus on health and wellbeing and pastoral support
- Innovate to constantly improve the learner experience

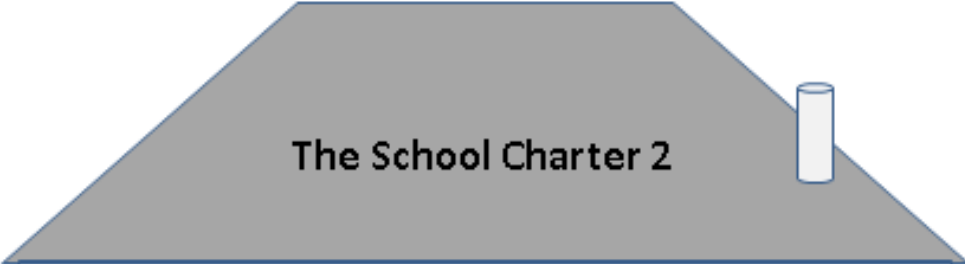
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## The School Charter 1

- You are a UHB learner and you are part of the UHB family
- You belong and your contribution to patients, their care and their families matters and is valued
- You have access to many entry pathways to enable you to progress your career from any point
- You will receive excellent clinical education through clinical placements, teaching, training, shadowing
- As a mentor, supervisor, assessor you will be supported to undertake this valued role and you will be listened to and asked to contribute to the ongoing development of the learner offer
- You will be supported through the transition period to becoming a qualified practitioner

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## The School Charter 2

- You will receive exposure to leadership, management, communication and digital skills development
- You will receive education that is multi-disciplinary
- You will be able to safely practice the skills you need for registration and beyond through simulation and the expert ward
- We will ensure your health and well being needs are met including access to pastoral support
- We will focus on supporting you to become an excellent, self directed and resilient practitioner
- We will support your career development needs through creating the right opportunities for you as an individual practitioner including the opportunity to move across the organisation without hurdles, opportunities in research, education, management, specialist clinical practice

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## Establishing the School

- Appointment of Head of School to lead the development and implementation of the School through the phases
- Bringing together the current resources engaged in the support of learners and newly qualified staff
- Implementing a model of support for Allied Health Professions
- Establishing a pastoral and health and wellbeing offer
- Increasing access to leadership and managerial exposure
- Creating a series of expert wards across the 4 sites to maximise student learning in practice
- The provision of additional additional classroom, skills, ward practice areas to meet the increased number of learners
- Establishment of a careers hub to support retention

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## Proposed Governance Framework

### **School Board Chaired by a Non Executive**

### **Operational Delivery and Collaborative Governance Framework**

Clear performance metrics

Clear delivery outputs for UHB School activity

Combined academic and practice quality strategy

Assurance framework to ensure School meets all legal and regulatory requirements

Commissioning, procurement and finance capacity

Teaching, assessment, pastoral and research capability

Leadership and careers management expertise

Health, well being, inclusion, pastoral resource

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## Next steps

- Agree the concept at executive level
- Agree funding for the Head of School and project management support
- Firm up the implementation and governance structure
- Consolidate current resources, current expenditure and identify the potential gap
- Produce a staged business plan to support implementation
- Firm up and agree the UHB learner offer from student recruitment to employment
- Work up the expert ward delivery plan
- Establish an internal and external communication strategy

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