

# ICS Level Primary Care Training Hubs - Specification and Operational Guidance

Use from April 2022  
Version 1

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# Primary Care ICS level Training Hubs Vision, Aims, and Objectives

## Vision

### To provide high quality primary and community care education and training

This Vision should help ICS level Training Hubs in their mission to be an exemplar in delivering, co-ordinating and leading education and training across their ICS.

## Overview

Health Education England (HEE) Primary Care ICS level Training Hubs are integral to delivering the HEE mandate and business plan in supporting the delivery of excellent healthcare and health improvement to patients and the public. They help to support the primary care workforce of today and tomorrow by training with the necessary skills, values, and behaviours for the NHS.

In supporting, leading, and assisting the delivery of the NHS Long Term Plan and the We are the NHS: People Plan 2020/21, there needs to be a continued strengthening of the education and training infrastructure to support new role and multi-professional team development, systematically and at scale in primary care.

Integrated care systems (ICSs) are partnerships of health and care organisations, that come together to plan and deliver joined-up services, and to improve the health of people who live and work in their area. They will assume a statutory footing as Integrated Care Boards from April 2022. Building strong integrated care systems everywhere: guidance on the ICS people function (August 2021) describes how NHS leaders and organisations will be expected to work together and, with their partners in the ICS, to deliver 10 outcome-based people functions from April 2022.

The ICS Training Hubs network is vital to transform primary care, through developing the current and new workforce required to deliver world class patient care across an ICS.

## ICS Level Training Hubs working across the System

Primary Care ICS level Training Hubs support NHS England and NHS Improvement (NHSE/I) to deliver the Government Manifesto commitment. This is to deliver 6,000 additional doctors and 26,000 additional multidisciplinary staff - to contribute to the third manifesto commitment of delivering 50 million more appointments in primary care.

Health Education England (HEE) and NHS England and Improvement (NHSE/I) have worked, in collaboration, to develop a shared understanding of the aims of an ICS level Training Hub. They are the conduit, within primary care, to support and facilitate the education of the workforce and as such, are able to drive the new models of care.

Further to the scope and requirements as outlined within this Specification, successful providers may be invited to participate in commercial processes run by organisations other than that of the Contracting Authority.

For clarification, these additional processes are standalone and shall not form any part of this procurement exercise and subsequent Contracts, as such HEE are unable to give any indication of scope or value for these further potential opportunities which may arise.

## **What is an ICS Level Training Hub? What do they do?**

The remit of a ICS level Training Hub is to bring together education and training resources from NHS organisations and community providers, as well as local authorities. ICS level Training Hubs are your 'go to' place for any information about primary care workforce, education, and development. Throughout this specification the term "Training Hub" will be used however for clarity these Training Hubs will work across an ICS footprint. They work to address local needs. Every practice and Primary Care Network (PCN) has access to Training Hub resources. There are currently 42 ICS level Training Hubs, with a number of Locality Hubs who help support links between practices and PCNs.

### **Training Hubs:**

- Have a key role in understanding, influencing, supporting, and leading educational interventions around population health needs and health inequalities in their area to address these
- Provide advice on workforce planning and training needs analysis, to help find which roles best meet the needs of the population. For example, actively supporting workforce planning by understanding population health needs and the training needs required to support new care pathways
- Help new staff, appointed through the Additional Roles Reimbursement Scheme (ARRS) scheme, embed into roles, for example supporting the roll out of the First Contact Practitioner (FCP) programme
- Facilitate and/or deliver opportunities for Continuing Professional Development (CPD) programmes, based on scoping CPD requirements across PCNs
- Provide career support at all stages for all primary care workforce
- Train and, where appropriate, recruit more educators
- Develop and help to keep staff through retention programmes, for example mentoring, and preceptorships
- Support practices and PCNs, who are looking to become learning environments, to increase the number of placements for a variety of trainees and students

## Aims

The following aims, in conjunction with the vision and objectives, should set the tone of an Training Hub and assist in guiding the strategic and operational delivery. These aims are mapped to specific outcomes, outlined in Building strong integrated care systems everywhere: guidance on the ICS people function (August [2021](#)).

### **Supporting workforce planning**

Training Hubs support conversations for primary care workforce planning, assisting in the co-ordination and realisation of the health and social care workforce across an ICS. Using knowledge and evidence to inform decision-making on workforce transformation to drive service improvement, with support from Knowledge and Library Services.

#### **Support the following ICS People Function Outcomes:**

- Growing the workforce for the future and enabling adequate workforce supply
- Leading workforce transformation and new ways of working
- Leading co-ordinated workforce planning, using analysis and intelligence

### **Supporting the development of educational programmes**

Following workforce planning, Training Hubs are to support the educational requirements identified in workforce plans. Key considerations are to understand what educational interventions, including career support, are required for current and future workforce to meet service re-design, based on population health needs.

#### **Support the following ICS People Function Outcomes:**

- Educating, training, and developing people, and managing talent
- Valuing and supporting leadership at all levels, and lifelong learning
- Transforming people services and supporting the people profession

### **Support Equality, Diversity, and Inclusion**

Training Hubs have a role in improvements to Equality, Diversity and Inclusion in their workforce, and their local populations. They have a key role in understanding, influencing, supporting, and leading educational interventions around population health needs and health inequalities in their area to address these.

#### **Support the following ICS People Function Outcomes:**

- Supporting inclusion and belonging for all, and creating a great experience for staff
- Driving and supporting broader social and economic development

### **Expanding and managing innovative and high-quality learning environments**

To meet the future workforce needs identified in workforce plans, Training Hubs have a leading role to manage and grow learning placements in partnership with educational providers to increase capacity for learners. Where possible, this should be done at scale

across a PCN, within a given ICS and for multi-professional learners. Training Hubs should have oversight of all placements in primary care, and where appropriate, manage the education and training tariff distribution. Working with Library and Knowledge Services they should offer NHS staff and learners proactive support to underpin the education, training, development, and practice of the multi-professional workforce.

### **Support the following ICS People Function Outcomes:**

- Educating, training, and developing people, and managing talent
- Valuing and supporting leadership at all levels, and lifelong learning
- Transforming people services and supporting the people profession

### **Increasing capacity and capability of educators**

Alongside increasing learning environment capacity, Training Hubs should lead on increasing the number of approved educators to improve the uptake of programmes that meet their workforce plans.

### **Support the following ICS People Function Outcomes:**

- Educating, training, and developing people, and managing talent
- Valuing and supporting leadership at all levels, and lifelong learning
- Transforming people services and supporting the people profession

### **Embedding new roles as part of the Additional Roles Reimbursement Scheme supporting retention**

Training Hubs have a role in supporting primary care to embed new roles highlighted in the Additional Roles Reimbursement Scheme (ARRS) and supporting new ways of working in Primary Care.

### **Support the following ICS People Function Outcomes:**

- Growing the workforce for the future and enabling adequate workforce supply
- Leading workforce transformation and new ways of working
- Supporting system design and development

## **Objectives**

In operationalising the aims, the following objectives are to be delivered by ICS Training Hubs. These form part of the Key Performance Indicators (KPIs) and the overall HEE performance assurance.

### **Primary Care Workforce Planning**

- 1 Support PCNs and their provider partners to undertake effective workforce planning to inform ICS, regional and national workforce plans.
- 2 As part of working with ICS/ICBs to support delivery of their people functions.

### **Education and Training**

- 3 Deliver a consistent training opportunity across primary care and professions to support the achievement of population health and learner needs
- 4 Provide and/or support education and training supporting retention programmes

### **Placements**

- 5 Actively work with practices and PCNs to develop placement opportunities, and with educational providers to find placements which meet the needs of learners and programmes
- 6 Work with educational providers and HEE quality team(s) to ensure all placements meet the appropriate professional standards required and are aligned to the HEE quality framework, enabling learners to develop the capabilities required.

### **Sustainability**

- 7 Ensure funding secured through HEE is appropriately used for primary care education and training infrastructure and is overseen by effective governance.
- 8 Establish appropriate and flexible primary care education infrastructure, which includes leadership, educator, and programme management roles.

### **Communication and Stakeholder Management**

- 9 Have a clear and proactive communication strategy that articulates the HEE vision for Primary Care Training Hubs working across an ICS footprint outlined in this specification.

### **Development of Systems**

- 10 Ensure that the appropriate resources are in place and supported, to provide a level of education and training, in a consistent manner, for primary care.

## **Governance**

A clear governance structure is in place for Training Hubs. The following sections describe the governance at various levels.

### **National Governance: Training Hub Delivery Group**

The national Training Hub Delivery Group is part of the HEE Governance structure, reporting to the national Primary Care Assurance and Delivery Board. Its terms of reference are designed to oversee decision-making processes and are applied in accordance with the requirements of HEE to manage public money and adhere to the Code of Good Practice as this relates to public bodies.

Given the importance and emphasis of collaboration, HEE's national Primary and Integrated Care team will work closely with NHSE/I. Examples include co-designing guidance and sharing KPI data to support the system.

The aims and purposes of the Training Hub Delivery group are to:

- provide assurance, to the national Primary and Integrated Care Delivery and Assurance Board, of Training Hub Programme delivery

- ensure that the Training Hub programme supports the delivery of the appropriate educational programmes required for the ICS people function
- provide strategic direction to guide the business of the Training Hub programme including, where appropriate, HEE or joint HEE and/or NHSE/I planning, goal setting (ideally articulating medium to longer term aspirations to promote both consistency and stability), objective setting and delivery of programmes.
- review regional reports and KPIs regarding the performance of ICS Training Hubs
- review potential risks to delivery, where variations in performance exist and investigate, identify, and ensure effective mechanisms to address such variations are actioned. Learning from such occurrences to be disseminated to mitigate against future instances within HEE.

## **Regional Governance: HEE Regional offices for Primary Care**

Training Hubs are accountable to HEE through their regional HEE Primary Care Schools, Postgraduate Dean through to the Regional Director, which provides a level of assurance and monitoring of an ICS level Training Hub.

## **Partnership Governance: Training Hub Oversight Boards**

It is expected, based on local arrangements, ICS Training Hubs will have an Oversight Board. This is to ensure effective engagement of partners and the robust oversight of Training Hub strategy, operational plans and financial activity. These will:

- oversee activity of ICS Training Hubs, as set out in the specification and any regionally led work programmes
- ensure collaborative approaches to recruitment of key posts within the ICS Training Hub
- assure and agree with all stakeholders: the strategic direction of the Training Hub and its associated annual delivery plan highlighted in section Performance Assurance section
- review and monitor progress of delivery plans
- review and escalate, as appropriate, any organisational and/or delivery associated risk and issues for either the Training Hub and/or its host organisation. These will in turn be escalated by the appropriate Training Hub stakeholder and/or HEE as the overall accountable organisation

Membership of a Training Hub Oversight Board will include HEE, NHSEI, the ICS and members of the ICS primary care workforce group.



The nature and shape of these boards will be subject to local agreement and discussions, which could be combined with established ICS primary care workforce groups. These arrangements will be agreed by the HEE Primary Care Dean and senior stakeholders.

## Contract Management

Primary Care Training Hub contracts will be managed directly by HEE regional governance structures, including assurance of Key Performance Indicators following review of these via Oversight Boards. Contract management will be supported by the Oversight Boards where information will be triangulated with partners.

## The Commission Requirements

There are 35 LOTs covering 6 regions which will outline both the geography and the ICS the ICS Training Hubs are to work within (as outlined in Annex 1).

Please note - Each lot is independent, there is no interdependence between any of the Lots for submission or delivery purposes. Each Lot could be awarded at a different time to the others, based on independent evaluation process timelines and standstill, once completed each Lot will be awarded.

The commission requirement covers a broad set of requirements and HEE regions are to set KPI's to reflect the specific education and training workforce priorities within their ICS.

The following are requirements of a Training Hub which relate to the objectives set:

<b>ICS Training Hubs Objectives</b>	<b>Requirements include</b>
<p><b>Primary Care Workforce Planning</b></p> <ol style="list-style-type: none"> <li>1. Support PCNs and their provider partners to undertake effective workforce planning to inform ICS, regional and national workforce plans.</li> <li>2. As part of working with ICS/ICBs to support delivery of their people functions.</li> </ol>	<ul style="list-style-type: none"> <li>• To provide advice with workforce planning and training needs analysis, actively engaging with PCNs within ICSs, using evidence-based approach, to help find which roles best meet the needs of patients and practice population</li> <li>• To support PCNs and their provider partners to undertake effective workforce planning to inform ICS, regional and national workforce plans</li> <li>• Help to embed new staff into roles through the Additional Roles Reimbursement Scheme (ARRS)</li> <li>• Develop and help to retain staff.</li> </ul>
<p><b>Education and Training</b></p> <ol style="list-style-type: none"> <li>3. Deliver a consistent training opportunity across primary care and professions to support the achievement of population health and learner needs</li> <li>4. Provide and/or support education and training</li> </ol>	<ul style="list-style-type: none"> <li>• Ensure all nurses, nursing associates and AHPs are able to benefit from their CPD funding (£1k over three years) by conducting investment plans, and delivering the education, if appropriate, or sourcing the right CPD provision. Please note, this specific element of funding is subject to annual review and is therefore not guaranteed.</li> </ul>

	<ul style="list-style-type: none"> <li>• Promote, train, and recruit more educators, for example, the First Contact practitioner Road Map verification Supervisors</li> <li>• Actively work with educational providers to find placements in primary care</li> <li>• Grow and support the delivery of profession-based initiatives such as Advancing Practice, General Practice Nursing, and Physician Associates. The requirements of these initiatives vary from providing training, through to distributing supervision cost where appropriate. Please note, this specific element of funding is subject to annual review and is therefore not guaranteed.</li> <li>• Grow clinical and non-clinical Apprenticeships by facilitating levy transfer, supporting practices with advice, and supporting implementation of delivering the apprenticeship standards</li> <li>• Offer NHS staff and learners proactive knowledge and library services to underpin the education, training, development, and practice of the multi-professional workforce</li> <li>• Actively encouraging all trainees and staff to access health and well-being support</li> <li>• Support transition of learners from pre-registration through to primary care, working closely with PCNs to promote employment opportunities</li> </ul>
<p><b>Placements</b></p> <p>5. Actively work with practices and PCNs to develop placement opportunities, and with educational providers to find placements which meet the needs of learners and programmes</p> <p>6. Work with educational providers and HEE quality team(s) to ensure all placements meet the appropriate professional standards required and are aligned to the HEE quality framework, enabling learners to develop the capabilities required.</p>	<ul style="list-style-type: none"> <li>• Increase learning environment placements at scale, across a PCN within a given ICS footprint, to enable practices to take on a variety of trainees and students meeting professional standards</li> <li>• To actively work with educational providers to find placements in primary care</li> <li>• To ensure all placements meet the HEE quality framework standards required for all learners to develop the capabilities required</li> <li>• Train and, where appropriate, recruit more educators</li> </ul>
<p><b>Sustainability</b></p> <p>7. Ensure funding secured through HEE is appropriately used for</p>	<p>ICS Training Hubs are required to deliver the vision, aims, and objectives. It is expected that</p>

<p>primary care education and training infrastructure, and is overseen by effective governance.</p> <p>8. Establish appropriate and flexible primary care education infrastructure, which includes leadership, educator, and programme management roles.</p>	<p>ICS Training Hubs will profile and divide funding between core staffing and projects and/or direct training delivery aligned to the objectives and local need</p> <p>ICS Training Hubs may offer the following roles in any manner which complies with locally determined processes which could include:</p> <ul style="list-style-type: none"> <li>• <b>Programme Manager/Executive Officer/Chief Training Hub Officer</b> - to act as the senior responsible person overseeing the delivery of the ICS Training Hub. Ensuring compliance with all aspects of the specification and guidance, with specific duties for the Equality, Diversity, and Inclusivity aim. Co-ordinating with all primary care providers in the ICS, and the wider health and social care organisations to ensure Primary Care is represented in wider workforce planning.</li> <li>• <b>Lead for Education and Training</b> - to lead on learning environments, educators, current education, and training. Planning future education and training across all professions working in Primary Care in the ICS.</li> <li>• <b>Lead Clinician (Doctor, Nurse, or AHP)</b> - to be the clinical lead for all activity of the ICS Training Hub, overseeing patient safety clinical developments, new roles, and transformation of existing roles.</li> </ul>
<p><b>Communication and Stakeholder Management</b></p> <p>9. Have a clear and proactive communication strategy that articulates the HEE vision for Primary Care ICS Training Hubs outlined in this specification.</p>	<ul style="list-style-type: none"> <li>• Each Training Hub to have a Stakeholder Engagement Strategy and Plan covering three years, to be developed with and agreed by the Oversight Board</li> </ul>
<p><b>Development of Systems</b></p> <p>10. Ensure that the appropriate resources are in place and supported, to provide a level of education and training, in a consistent manner, for primary care.</p>	<p>This specification covers activities required by HEE. As a key partner in the ongoing development of the primary care workforce, ICS Training Hubs may be invited to participate in commercial processes run by organisations other than that of the Contracting Authority.</p> <p>For clarification, these additional processes are standalone and shall not form any part of this procurement exercise and subsequent Contracts, as such HEE are unable to give any</p>

	indication of scope or value for these further potential opportunities which may arise.
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## Infrastructure

Training Hubs are required to deliver the vision, aims, and objectives. It is expected that Training Hubs will profile and divide funding between core staffing and projects and/or direct training delivery aligned to the objectives and local need.

Training Hubs can offer the following roles in any manner which complies with locally determined processes:

- **Programme Manager/Executive Officer/Chief Training Hub Officer** - to act as the senior responsible person overseeing the delivery of the Training Hub. Ensuring compliance with all aspects of the specification and guidance, with specific duties for the Equality, Diversity, and Inclusivity aim. Co-ordinating with all primary care providers in the ICS, and the wider health and social care organisations to ensure Primary Care is represented in wider workforce planning.
- **Lead for Education and Training** - to lead on learning environments, educators, current education, and training. Planning future education and training across all professions working in Primary Care in the ICS.
- **Lead Clinician (Doctor, Nurse, or AHP and other professions)** - to be the clinical lead for all activity of the Training Hub, overseeing patient safety, clinical developments, new roles, and transformation of existing roles.

Training Hubs may be hosted by existing Community Interest Companies (CICs), including those holding Primary Medical Services (PMS) or Alternative Provider Medical Services (APMS) contracts or established community providers. It is not the intention that Training Hubs develop themselves into a CIC, for the purpose of delivering the Training Hub requirements outlined in this specification. Whilst such hosting arrangements may vary, to reflect local partnerships, geographies, and contexts, these may include Clinical Commissioning Groups, community providers or primary care organisations.

Awarded providers are required to support management infrastructure by including HR, Finance, recruitment of staff, accommodation where appropriate and IT hardware and desktop support.

## Financial Governance

Training Hubs are expected to provide effective management of HEE and (where relevant in the context of separately commissioned programmes) NHSE/I funds to deliver a variety of educational transformational activities, in accordance with the vision, aims, and objectives outlined in this specification.

In delegating those responsibilities, HEE need to ensure such financial operations are both lawful and adhere to the respective organisations' policies and procedures. Financial management will follow formal contractual processes and is expected to be achieved within the terms of the funding provided.

The awarded provider is to have a transparent and governed process for transferring funding to appropriate organisations (within an ICS geography) to deliver the requirements above. Evidence and accounting, for funding being utilised for the purposes intended, as set out above.

## **Performance Assurance**

The Training Hub is accountable to HEE through the Primary Care School for all workstreams relating to HEE and those developed in conjunction between HEE and NHSE/I. In assessing whether a Training Hub is delivering against the vision, aims, and objectives Key Performance Indicators (KPI) have been developed.

This is done through reporting back the Training Hub activity against the aims, objectives and KPIs. In addition to national KPIs, regional KPIs will be determined based on current baseline figures and growth projections across an ICS footprint for primary care.

The following assurance process will be in place to assure delivery of service against KPIs:

- Training Hub to complete a set of KPIs (twice per year). In addition to national KPIs, regions based KPIs will be determined based on current baseline figures and growth projections across an ICS footprint for primary care
- As part of system working Training Hubs and NHSE/I system partners discuss the data – this could be done as part of your group highlighted in the Partnership Governance section of this specification which may include primary care regional workforce groups or People Boards.
- Ad hoc monitoring for programmes of work such as, Continuing Professional Development and Advancing Practice, will also be required.

Training Hubs should have the following in place, with regular reviews and approvals from appropriate governance:

- Training Hub Strategy (3 years)
- Training Hub Stakeholder Engagement Strategy and Plan (3 years)
- Training Hub Delivery Plan (1-3 years)
- Training Hub Financial Plan (yearly)

The Training Hub should report concerns / issues, that constitute a risk to the delivery of agreed workstreams, delivery against KPIs or business continuity, in a timely manner to HEE through the Primary Care School.

## **Key Performance Indicators**

KPIs are indicative to support the delivery of this specification for the duration of the contract. It is recognised that some baselines may not currently exist, but providers are expected to work with HEE to further develop these KPIs, based on current baseline figures and growth projections across an ICS footprint, ensuring compliance with the KPIs.

## **Meeting the Aims and Objectives**

### **Supporting workforce planning**

- % of primary care organisations offered support on workforce planning advice and identification of needs of patients and populations  
Target: 85% year 1, 95% year 2, 100% year 3  
Baseline: total number of primary care organisations in geographic area

For clarity Primary Care organisation for this purpose is practices, and PCNs.

### **Supporting the development of educational programmes**

- % Nurses and AHP staff offered CPD funding  
Target: 100%  
Baseline: total number of Nurses and AHP staff in post from 1 April 2022
- % of Nurses and AHP staff take-up of CPD funding  
Target: 70% +  
Baseline: to be regionally determined based on previous year's figures
- % of primary care workforce offered training provided by the ICS Training Hub  
Target: 60% year 1, 80% year 2, 95% year 3  
Baseline: total number of workforce in post using NWRS data place on 1 April 2022
- Breakdown of professions undertaking training provided  
Target: all professions involved equally in training provided  
Baseline: List of all professions in primary care as of 1 April 2022
- % of non-clinical apprenticeships offered across primary care  
Target: year 1, 10% + to be determined by regions, based on current baseline figures and growth projections across an ICS footprint for primary care, year 2 and year 3, to be determined.  
Baseline: number of learners on apprenticeship route on 1 April 2022
- % clinical apprenticeships offered across primary care  
Target: 10% + to be determined by regions, based on current baseline figures and growth projections across an ICS footprint for primary care  
Baseline: number of learners on apprenticeship route on 1 April 2022
- % breakdown of utilisation of evidence-based practice using Library and Knowledge Services  
Target: 10% + to be determined by regions, based on current Library Knowledge Services activity and growth projections across an ICS footprint for primary care  
Baseline: total number of primary care organisations utilising evidence-based practice

### **Support Equality, Diversity, and Inclusion**

- Provide EDI analysis across 100% of current workforce in training, working with educational providers  
Target: data on demographics data and primary care workforce  
Baseline: demographics of geographic area

- Breakdown of Training Hub education and training activity, based on ICS plans on reducing health inequalities  
Target: Year 1, three initiatives scoped and implementation started, year 2, to be determined by regions based on current initiatives scoped in year 1  
Baseline: total number of workforce
- Engage with HEE regional Differential Attainment Lead to utilise support package and guidance available on reducing differential attainment  
Target: year 1, establish link and utilise materials created, year 2, to be determined by regions
- Number of EDI events to engage the system on Training Hub contribution to the Equality Diversity and Inclusion  
Target: 2 per year  
Baseline: not required for this

### **Expanding and managing innovative and high-quality learning environment**

- Number of quality concerns, complaints, issues raised from educators, students, and demonstrate their process for dealing with complaints  
Target: 0 to ensure appropriate behaviours and training is in place to mitigate these. It is accepted that this is not always possible, so a threshold is allowable for compliance when accompanied with a root cause analysis and an action plan.  
Number of issues raised  
Number of issued resolved with Training Hub intervention
- % of placements increase  
Target: 10% +, to be determined by regions based on current placement approval data and growth projections across an ICS footprint for primary care  
Baseline: number of placements offered through 2021  
NB – there will also be a consideration of practices that may be in special measures
- All professions being offered placements, by breakdown of profession  
Target: all professions have placements provided  
Baseline: 2020 figures reported to HEE and on educator KPI
- Compliance with regulatory standards and HEE Quality Framework  
Target: 100%  
Baseline: reported back from Education Providers, Regulatory Bodies, and/or NHS Education Contract Self-Assessment Return.

### **Increasing capacity and capability of educators**

- % increase approval of Educators and Supervisors  
Target: based on the increase of placements, to be determined by regions based on current placement approval data and growth projections across an ICS footprint for primary care  
Baseline: total number of Educators in post from 1 April 2022
- Number of Educators re-educated or undertaken additional training



Target: 80% per year

Baseline: number of Educators in post at the start of the financial year (i.e. each April)

### **Embedding new roles as part of the Additional Roles Reimbursement Scheme (26K), supporting retention**

- % of uptake in ARRS roles supported by ICS Training Hub  
Target: to be regionally determined based on PCN recruitment intentions and actual recruitment figures  
Baseline: From ARRS roles in place from 1 April 2022.
- % of active engagement with PCNs around understanding new roles and how they can support new ways of working in primary care to support population health needs  
Target: year 1, 60% active engagement PCN, year 2, 80% year 3, 100%

Please note this KPI is based on system maturity and not all of the system will take up the services that the Training Hub has to offer.

- % of new graduates who were placed in a role in primary care  
Target: for regions to work with Training Hubs on establishing “end of destination” data

### **General Data Protection Regulations (GDPR) and Privacy Impact Assessments (PIA)**

The successful provider(s) will be required to complete all necessary Data Protection Impact Assessment (DPIA) documentation to ensure adherence with GDPR and HEE policies, in respect of data processing and security.

### **Contract Period**

The initial term of the contract will be 3 years with the option to extend for a further 2-year period in one-year increments, subject to a review of performance, need and available budget. This will be co-ordinated nationally so that all Training Hubs are consistently commissioned.

### **Infrastructure Allocations**

The current anticipated infrastructure allocations are based on STP/ICS boundaries. However, we are aware that there will likely be boundary changes across the contract term, and this will affect the funding that has been allocated per LOT. These will be managed on a case-by-case basis and will be done in a fair and equitable way to ensure that the funding allocation is proportionate.