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# Crossing the Bridge

Progress Report on the Skills for Health  
Bridging Programme — May 2015



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# Foreword: Establishing the Skills for Health Bridging Programme

Skills for Health has developed a unique programme to support healthcare workers who wish to progress into university nursing and other health professional educational programmes in England. The Skills for Health Bridging Programme is designed to develop the study skills that healthcare learners need to progress and succeed in Higher Education.

This report explains how the Bridging Programme was designed and put in place in 2014–15 and provides a set of recommendations for a continued programme of work in 2015–16 which require funding for proper implementation — to fulfil the expectations of over 200 healthcare employers who have expressed their support so far.

In combination with a relevant level 3 vocational qualification, the Bridging Programme provides another possible route for people in the healthcare support workforce who wish to progress into nursing and other health professional educational programmes at universities in England.

Within the sector, it is widely acknowledged that there are many motivated and capable vocational learners and apprentices — but some have not had the opportunity — or possessed the required study skills — to be able to progress to higher level health professional education programmes<sup>1</sup>.

The Bridging Programme provides a standardised curriculum framework, a national qualification and a set of high level requirements, and both accommodates and promotes good practice in integrated level 3 vocational and study skills learning at a local level.

The Bridging Programme facilitates the aspirations for the healthcare support workforce expressed in recent reports, and examined in *fulfilling aspirations for the healthcare support workforce*, the opening section of this report.

The Bridging Programme has been an undoubted success in meeting review aspirations, encapsulated in the Cavendish Review<sup>2</sup>;



*Good hospitals and care homes are now unable to promote some of their best assistants into nursing. This is a waste of talent which must be overcome by urgently developing new bridging programmes (Recommendations 7, 8) <sup>2</sup>.*

There is already clear evidence of significant healthcare employer demand. The Bridging Programme was purposely designed and positioned to ensure it fulfilled the aspirations of healthcare employers and learners, and more than met the requirements of Ofqual, the Skills Funding Agency (SFA) and receiving Higher Education Institutions (HEIs). The qualification was designed to the highest standards, scrutinised and commended by Council of Deans of Health members<sup>3</sup> (CoDH), rigorously reviewed by awarding organisations and aims to be consistent with the best study skills practice in Access to Higher Education (HE). The qualification sits inside a curriculum framework which requires learning providers to teach and support the development of study skills at and for learning at work in healthcare. Employers have been enthusiastic in their support for the Bridging Programme and partnerships are forming around England.

In designing the Bridging Programme, Skills for Health collaborated with a range of partners, including the Council of Deans of Health (CoDH), Access and Study Skills experts in Awarding Organisations (AOs), healthcare employers and Health Education England (HEE). Skills for Health is responsible for the overall quality assurance and improvement of its programme, including setting out requirements for its use and approval of AOs wishing to offer the qualification. These are detailed in the [Skills for Health Bridging Programme online guide](#). Successful completion of the Bridging Programme leads to a national qualification: the QCF Level 3 Certificate in Bridging Skills for Higher Education.

<sup>1</sup> HEE (2015) (TBP) Developing the talent: a framework to support the progression from healthcare assistant to nurse.

<sup>2</sup> Cavendish C (2013) The Cavendish Review — An Independent Review into Healthcare Assistants and Support Workers in the NHS and social care settings. Recommendation 7 'HEE and the LETBs

should develop new bridging programmes into pre-registration nursing and other health degrees from the support staff workforce in health and social care, working with Skills for Care, NMC and Skills for Health'.

<sup>3</sup> [The Council of Deans of Health](#) is the representative voice of the 85 UK university health faculties providing education and research for nursing, midwifery and the allied health professions.

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# Fulfilling aspirations for the healthcare support workforce

The Talent for Care Strategic Framework<sup>4</sup> has ‘ten strategic intentions’ for transforming learning for the healthcare support workforce. HEE local education and training boards (LETBs) will work to achieve these aspirations in 2015–16 and beyond.



**In The Shape of Caring Review<sup>5</sup>, Lord Willis asks that his 34 recommendations, “...be viewed as open suggestions, [requiring] detailed examination, consultation and further research before implementation.”**

He found that a wealth of good practice, a strong infrastructure and system of regulation was in place, but also a workplace where good practice needs to be ‘disseminated to stimulate a debate around areas with less evidence and to generate a research culture.’ His exhortation to consider his recommendations and consult on them, reinforces aspirations similar to those in the Talent for Care Strategy<sup>6</sup> — and as he says, is intended to ‘build on rather than duplicate’ the ‘abundance of recent reports’, from his own previous report in 2012<sup>7</sup>, through Francis<sup>8</sup>, Keogh<sup>9</sup>, Bubb<sup>10</sup> and Cavendish<sup>11</sup>, all published between 2012 and 2014.

## So where does the Skills for Health Bridging Programme fit in?

The Bridging Programme facilitates the aspirations for healthcare support workforce progression into university nursing and other health professional educational programmes in England, expressed in recent reports cited above. It provides a standardised curriculum framework, a national qualification and a set of high level requirements, and both accommodates and promotes good practice in integrated vocational and study skills learning at a local level.

It is now in place, beyond the concept stage, and has a constituency of support among healthcare employers that requires enactment of the Skills for Health recommendations for a continued programme of work — outlined in this report — to be funded in 2015–16 for proper implementation.

Crossing the bridge into University requires HCAs and others to be fully prepared for study in HE. Other recommended actions in the two most recent reports cited, are designed to facilitate progression into HE for HCAs and others. These include for example, efforts to make use of accreditation of prior learning<sup>12</sup>, for those able to evidence prior experiential or certificated learning to gain credit towards a Nursing Degree. These actions will also require the additional skills and knowledge contained in the Bridging Programme to work.

4 HEE (2014). *The Talent for Care Strategic Framework*. A national strategic framework to develop the healthcare support workforce. Part of Framework 15, the Health Education England guide to action.

5 HEE (2015) in partnership with the Nursing and Midwifery Council *The Shape of Caring Review*.

6 4.Ibid.

7 Willis Commission (2012). *Quality with Compassion: The Future of Nursing Education*.

8 Francis R (2013). *The Mid Staffordshire NHS Foundation Trust Public Inquiry*.

9 Keogh B (July 2013). *Review into the Quality of Care and Treatment provided by 14 Hospital Trusts in England*.

10 Bubb S (2014) *Winterbourne View – Time For Change*.

11 2.Ibid.

12 *QA glossary* (2015) (abbreviated): APL – The identification, assessment and formal acknowledgement of learning and achievement that occurred at some time in the past prior to entry to a course of study; APEL

– experiential – occurred not in the context of formal education or training; APCL – certificated – for which the learner was awarded some form of official recognition.

## The Bridging Programme is designed to develop research skills at and for learning at work in healthcare and encourage:



*...care assistants... to acquire a strong grounding to develop a questioning approach to care<sup>13</sup>.*

The Skills for Health proposed programme of work to support the Bridging Programme in 2015–16 will complement and support the work of HEE LETBs and others to improve career progression for the healthcare support workforce, playing an important part in establishing clear routes to Nursing and other professional health education programmes at University for people entering as HCAs and from other roles in the healthcare support workforce.

Skills for Health will also ensure that work on the Bridging Programme in 2015–16 connects to and benefits from other HEE supported work designed to improve achievement and progression among the healthcare support workforce.

We know, for example, (and the recent reports cited above recognise this) that healthcare employers will face a range of obstacles in implementing any initiative designed to increase the numbers of their healthcare support workers entering and succeeding on University professional health education

programmes; the perceived value of Vocational Qualifications (VQs) to Universities for entry to these programmes and other factors will impact on their successful entry and retention. These other factors must be taken into consideration when evaluating the impact of the Bridging Programme on progression.

The recommended concurrent impact evaluation in 2015–16 should therefore also examine the impact on Bridging Programme learners of (for example):

- The quality of Information Advice and Guidance (IAG) for bands 1–4 staff in relation to the Bridging Programme and progression.
- Financial and personal obstacles to progression to health professional education programmes.
- How employers intend to support and then retain staff who progress into University professional health education programmes.
- Access at work to English and Maths, ESOL and ICT learning.
- Recognition of the value of vocational qualifications and the Bridging Programme in meeting HEI entry requirements to health professional education programmes.

Evaluation should also begin to gather information for case studies which illuminate whether and how participating Universities are prepared to offer advanced standing or exemption from elements of a Nursing Degree for example, for those able to evidence prior experiential or certificated learning.



# This Progress Report outlines:

1. The rationale for, aims of and design and development of the Skills for Health Bridging Programme (May–September 2014).
2. Initial implementation and impact (October 2014–March 2015).
3. Summary of findings and recommendations for further implementation and concurrent impact evaluation (April 2015–March 2016).

Skills for Health has made recommendations for action in 2015–16 in four key areas:

- 3.1 Bridging Programme Partnership development.
- 3.2 Teaching, learning and assessment.
- 3.3 Communications, online support, promotion of the Bridging Programme.
- 3.4 Concurrent impact evaluation.



# 1.

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## **The Rationale for, aims of and design and development of the Skills for Health Bridging Programme**

(May–September 2014)



# 1.1

## Background and call to action

### The rationale for the development of the Skills for Health Bridging Programme:

*'The NHS has tended to treat HCAs and the registered nurses who supervise them as separate workforces. A glaring example is the failure to consider how the move to all-degree nursing would affect the career prospects of HCAs. Good hospitals and care homes are now unable to promote some of their best assistants into nursing. This is a waste of talent which must be overcome by urgently developing new bridging programmes (Recommendations 7, 8).'*<sup>14</sup>

In her independent review of health and social care support roles, Camilla Cavendish made a number of recommendations aimed at widening participation into pre-registration Nursing degrees which included the commissioning of bridging programmes, the design of a robust career development framework and an implementation plan to widen participation into NHS funded courses.

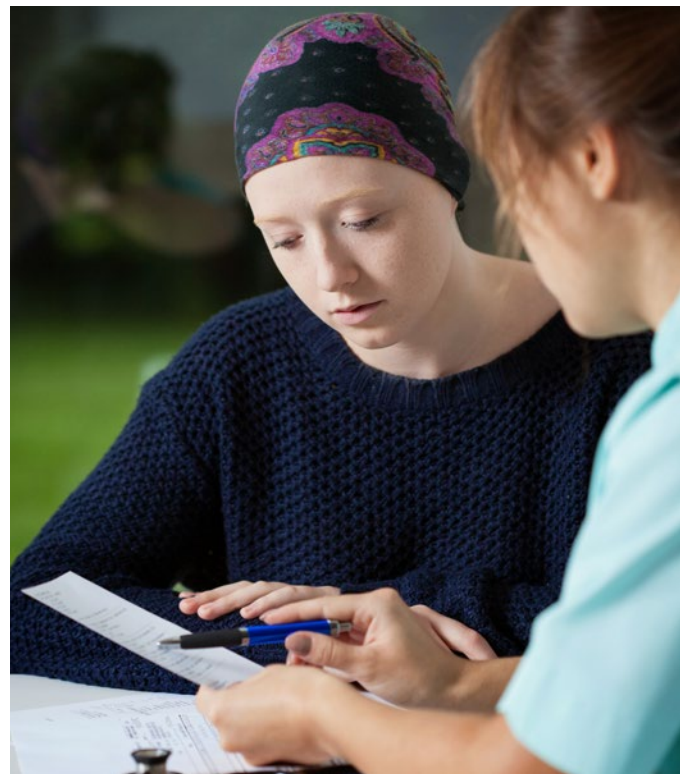
'Recommendations 7 and 8' were enacted in Health Education England's mandate for 2014–15: HEE, leading its delivery partners, should also ensure that, where possible, training in the health and care sector is transferable and comparable, and consider the development of new bridging programmes into professional training in health and care<sup>15</sup>.

Skills for Health had begun exploratory work on the development of a national Bridging Programme in 2013<sup>16</sup>. HEE Wessex took the lead for HEE on supporting and reporting on work which delivered on this element of its 2014–15 mandate — and this includes the Skills for Health Bridging Programme.

There is a wide recognition of the need for and value of 'Bridging Programmes and courses', reflected in both policy; the Talent for Care Strategic Framework<sup>17</sup> and Developing the talent: a framework to support the progression from healthcare assistant to nurse<sup>18</sup> and expressed by employers who said the Bridging Programme offers:



*Excellent opportunities for HCAs who have shown they have the right values, experience to go on to pre-registration courses.*



# 1.2

## The Aims of the Skills for Health Bridging Programme

Given that bridging type courses were in existence prior to the development of the Skills for Health Bridging Programme, why develop this one? The Skills for Health Bridging Programme is intended to effect a significant change across England, in culture and practice in vocational and study skills learning, for those in the healthcare support workforce who do not have A levels or an Access to HE Diploma — but who are capable of progressing to and succeeding in Nursing and other health professional programmes at University. The Skills for Health Bridging Programme sets out requirements — effectively parameters — overseen by Skills for Health, within which Bridging Partnerships between employers and providers can develop their approach. This will help to develop a national momentum; address difficult cultural and practice issues in forming partnerships, curriculum design and delivery and progression arrangements across a diverse range of partnerships; enable Skills for Health to share successful practice and ways of overcoming problems; and ultimately ensure similar opportunities — using a consistent approach — are available to healthcare employers and their healthcare support staff, across England.

<sup>14</sup> & <sup>15</sup> Department of Health(2014) April 2014 to March 2015. Pp 35, 6.47. Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values - A mandate

from the Government to Health Education England. right skills and the right values — A mandate from the Government to Health Education England.

<sup>16</sup> SFA (2013) (Unpublished) Project Overview Bridging course between Healthcare Support Worker Apprenticeship and Pre-Registration Nursing Degree.

<sup>17</sup> 4. *ibid.*

<sup>18</sup> 1. *ibid.*



### Features of the Bridging programme which will enable this are:

- A national Bridging Skills programme to be implemented across England which can be customised in design and delivery within nationally set requirements.
- An alternative to the traditional means of A level and Access to HE Diploma entry into Nursing and other University health professional programmes for the healthcare support workforce.
- A nationally recognisable qualification.
- Nationally awarded UCAS tariff points.
- Nationally standardised assessment decisions and qualification results.
- A consistent, high standard study skills curriculum across providers.
- Study skills learning at and for work in healthcare — with work based learning and assessment arrangements.
- Increased study and employment mobility opportunities for those achieving the qualification.
- Agreed national terms for the operation and use of the qualification across AOs and learning providers.
- SFA funding subject to conditions which coincide with Skills for Health expectations of AOs and learning providers.
- Transparent progression agreements between providers — visible to and easily understood by employers and learners.

## 1.3 A coordinated effort to address obstacles to career progression

The Skills for Health Bridging Programme has been designed for local implementation with Skills for Health support.

There are a number of significant known obstacles to progression into health professional education programmes in Higher Education for HCAs and other workers in 'bands 1–4' of the healthcare support workforce<sup>19</sup>.

The Bridging Programme is designed to address as many of these obstacles as possible by creating what would be difficult to achieve locally: a nationally recognised qualification and common approach to vocationally integrated study skills learning and assessment, intended to build confidence across HEIs, healthcare employers and staff, in the scope of the Bridging Programme to properly develop the skills that workers need to enter and succeed at University.

The Bridging Programme can be incorporated flexibly into new Healthcare Apprenticeship routes for interested healthcare support workers in a national workforce development strategy, for those staff looking for a bridge into Higher Education health professional programmes:



*...The Intermediate Apprenticeship is equivalent to a Band 2 HCA, the Advanced Apprenticeship is Band 3 Senior HCA. There is also a Higher Apprenticeship for Assistant Practitioners. The Bridging Programme is designed to be undertaken concurrently with the Advanced Apprenticeship for those who wish to progress into HE Study. The Bridging Programme is not part of the Advanced Apprenticeship as not all Advanced Apprentices want to progress into HE.*

Barchester Healthcare Ltd

In April 2014 the Association of Ambulance Chief Executives (AACE) embarked upon a full education transformation project across the United Kingdom.



*It is the view that future Ambulance staff entering at the associate level, would undertake a Level 4 (QCF) Associate Ambulance Practitioner (AAP) programme, with the requirement to complete further studies of the Level 3 Bridging Skills Programme, prior to commencement of their career development to Paramedic level. For those Trusts that operate under their workforce plans below the associate level, typically the Level 3 Diploma in clinical healthcare support, staff would also undertake the Level 3 Bridging Skills programme as part of their chosen career development routes in preparation for accessing HEI professional programmes.*

*AACE are looking at a conclusion of their education transformation project by April 2016.*

Chair of the National Education Network for Ambulance Services (NENAS)

Such national initiatives will inevitably identify and share positive ways of working, as well as common obstacles — and hopefully collaborate on ways to overcome the latter.

The Bridging Programme and qualification design was intended to smooth the way as much as possible for employer and provider partners but factors such as the receptivity of local HEIs, the willingness of employers to release staff for learning time and the capability of FE provider (vocational learning staff) to deliver study skills in a work context, are likely to variously help or hinder progress in implementation. This is predictable; there is no quick route to success. It was clear however that where working partnerships already thrived locally, progress towards implementation was likely to happen more readily and quickly. Emerging Bridging Programme partnerships in the Midlands and the South West of England for example, are essentially trading on established relationships between healthcare employers, FE and University providers and the area HEE LETB and have fewer obstacles to overcome in implementing the Bridging Programme.

At a local level however, potential Bridging Programme partners were aware from the outset of the potential opportunities and difficulties that may lie ahead. Identifiable preconditions for successful Bridging Programme partnership and delivery began to emerge between October 2014 and March 2015; Skills for Health recommendations in Section 3 suggest a tool is developed for employers and other partners to use in planning for and implementing the Bridging Programme locally.

### **The Skills for Health Bridging Programme offers a significant opportunity to do two things:**

- Address and overcome barriers to entry to health professional education programmes in Higher Education for many capable workers in healthcare, making a practical difference to their progression now.
- Use the recommended impact evaluation to find out how to help employers and other Bridging Programme partners to address the known obstacles to progression for many of their capable staff; and to coordinate and share some of the best ways of doing so.



## **1.4 Design and development of the Skills for Health Bridging Programme**

Discussions between Skills for Health and the CoDH had begun in 2013, about what was 'missing' from work based vocational qualifications in healthcare, should achievers wish to progress into professional health education programmes at University. An analysis was done by Skills for Health and findings confirmed by CoDH, which agreed that the absence of what were broadly termed 'study skills for Higher Education' was a major obstacle for those members of the healthcare workforce interested in progression into professional health education programmes at University. The next task was to design a national qualification and programme which would address this gap and consider how it would be filled — and by whom.

## 1.5

### Skills for Health established an informal Bridging Programme reference group early in 2014<sup>20</sup>

The Bridging Programme Reference Group provides advice and feedback to Skills for Health on the design and implementation of the Skills for Health Bridging Programme. The Group membership includes those:

- with relevant expertise in the education of the healthcare support workforce and where relevant, an interest in their progression to health professional education programmes in Higher Education;
- from organisations and or networks judged essential for the success of the Bridging Programme; especially Further and Higher Education providers, Awarding Organisations, employers, health and social care employer organisations — and or sector bodies such as Skills for Care — and Health Education England.

In May 2014 the group met to review the Skills for Health design and development plan<sup>21</sup> for the Bridging Programme.

#### This outlined:

- The creation of a bespoke national study skills qualification for the healthcare support workforce — and the qualification structure.
- Learning and assessment strategies to help promote national consistency and comparability.
- Evaluation objectives and focus, and the aims of an (interim) progress report to be delivered by March 2015.
- Skills for Health requirements for AO and FE provider approval.
- SFA requirements for approval of AOs (and providers) to offer the Bridging Programme qualification.



<sup>20</sup> Skills for Health Bridging Programme Reference Group membership and TOR were confirmed in October 2014.

<sup>21</sup> [www.skillsforhealth.org.uk/images/standards/bridging/Bridging%20Programme%20development%20plan.pdf](http://www.skillsforhealth.org.uk/images/standards/bridging/Bridging%20Programme%20development%20plan.pdf)



## 1.6 Creation of the qualification: Level 3 Certificate in Bridging Skills for Higher Education

The Skills for Health objective was (at least) to emulate the best practice in Access to HE study skills curriculum design and assessment and to adapt this best practice in designing the Bridging Programme and qualification. Access to HE Diplomas were judged to be a familiar reference point for CoDH HEI members. The volume and level of the Bridging Programme qualification is consistent with the allowable study skills element of the QAA Access to HE Diploma Specification<sup>22</sup> — so at the very least, was viewed as a reliable place to start in the Bridging Programme design process. To reiterate, the Bridging Programme is not an Access to HE course; but together with a relevant Vocational Qualification (VQ) provides an alternative means of entry to specified University professional health education programmes.

## 1.7 Unit and qualification design

A number of existing units were initially identified by Skills for Health in 2013–14 for potential use/adaptation in a QCF qualification, drawn from AGORED<sup>23</sup> and OCN London<sup>24</sup> Access to Nursing Diplomas offered throughout Wales and across Greater London and south east England. Both Awarding Organisations are also Access Validating Agencies (AVAs)<sup>25</sup>, accrediting Access to Higher Education Diplomas which include the identified units in a wide range of 'Health and Social Care' subjects, including Nursing, Adult Social Care, Midwifery, Paramedic Studies, Social Work and Health and Human Sciences. The units had been developed and approved through a quality assured process by each QAA licensed AVA and sit inside Diplomas within the QAA Access to HE framework.

These units — as they stood — could not have been directly conscripted into a Bridging Programme qualification within the QCF, for the following reasons:

- Although the unit (and credit) specification for Access to HE qualifications is consistent with (and predates) the unit and credit specification for the QCF, the units were not approved for inclusion in QCF qualifications.
- The units needed to be redeveloped to meet the Ofqual unit and qualification design specification and QCF regulations for approval.
- A new freestanding qualification was needed and the composition, content and assessment requirements designed to meet the specific purposes of the Bridging Programme.



<sup>22</sup> [www.accesstohe.ac.uk/AboutUs/Publications/Documents/Access-to-Diploma-Specification.pdf](http://www.accesstohe.ac.uk/AboutUs/Publications/Documents/Access-to-Diploma-Specification.pdf).

<sup>23</sup> [www.agored.org.uk](http://www.agored.org.uk)  
<sup>24</sup> [www.ocnlondon.org.uk](http://www.ocnlondon.org.uk)

<sup>25</sup> Access Validating Agencies (AVAs) develop, approve and monitor Access to HE courses. They are licensed by the Quality Assurance Agency for Higher Education (QAA) to act as awarding bodies and award the

Access to HE Diplomas to successful students.

# 1.8

## Qualification approval

The design and implementation of the Bridging Programme qualification was a significant and complex task for Skills for Health and required the support of a range of organisations and individuals through its design and formal approval. Despite this, the qualification was designed and approved by Ofqual for the QCF in a comparatively very short space of time. Skills for Health had the necessary expertise and commitment to design and write the qualification; Bridging Programme reference group members and external agencies responded swiftly and positively to drafts and the final submission. SFA was helpful in clarifying terms for eventual approval of the qualification for public funding; once Ofqual fully appreciated Skills for Health objectives, they responded speedily to (re)drafts of the qualification. In all, the process of design and approval was completed in ten weeks.

By the beginning of September 2014 the qualification, [QCF Level 3 Certificate in Bridging Skills for Higher Education](#), was on the Ofqual national register of qualifications.

[The OCN London qualification guide](#) provides an example of how the qualification is publicly presented by an Awarding Organisation.

**Finding and Reading Information Skills Academic Study**

3 Credits

**Understanding Opportunities in Higher Education**

1 Credit

**Essential Skills for Academic Study**

3 Credits

**Extended Academic Essay and Report Writing Skills for Higher Study**

3 Credits

**Extended Project Skills for Academic Study**

6 Credits

**Level 3 Certificate in Bridging Skills for Higher Education\***

16 Credits at Level 3

\* Achievements of all units is mandatory



# 1.9

## More than a qualification – concurrent design of the Skills for Health Bridging Programme

The Skills for Health Bridging Programme is more than a qualification. Its implementation requires input and support from a range of partners, as well as ongoing nurturing and management from Skills for Health to ensure its success and oversee its quality assurance and improvement. This section of the report outlines what is expected of partners involved in the Skills for Health Bridging Programme.

Concurrently with qualification design and pursuing Ofqual approval with AOs, Skills for Health developed a [Bridging Programme Online Guide](#) – launched on the Skills for Health website in September 2014.

The online guide provides information and guidance on Skills for Health Bridging Programme requirements for:

- [Further Education Providers or Employers](#)
- [Higher Education Institutions](#)
- [Employers](#)
- [Awarding Organisations](#)
- [Health Education England LETBs](#)
- [Progression Agreements](#)

Skills for Health will only approve an AO to offer the qualification if it meets stated Skills for Health requirements. There are two dimensions to these requirements; ensuring there is at least one progression route for a learner that has achieved the Bridging Programme and a relevant level 3 VQ to a health professional education programme offered by an HEI and secondly, ensuring that study skills learning and assessment are designed, delivered and assessed for those that are learning at and for work in healthcare, grounded in their day to experience and at the same delivered to the best standards in study skills learning – comparable to the best practice in Access to Higher Education courses.

The SFA obliges AOs to meet a set of comparable requirements for approval of the qualification for public funding – both are outlined in the relevant section of the [Online Guide to the Bridging Programme](#).



# 1.10

## Skills for Health requirements for providers and AOs wishing to offer the Bridging Programme and qualification

Providers and AOs should, in summary, design and deliver (respectively) a Bridging Programme curriculum and benchmark assessments which meet the following requirements and expectations:

### 1.10.1

#### Study skills learning and assessment must reflect the assessment requirements of the qualification and should either be:

- Concurrently integrated into vocational learning programmes at level 3, providing Apprentices and other vocational learners with the study skills they will need to succeed in health professional education programmes in Higher Education.
- Or *post hoc*, developed and assessed using knowledge and skills already acquired through vocational qualification and work experience.

### 1.10.2

#### Learning strategies should be devised which develop:

- Critical thinking skills — addressing the known barriers to critical thinking — contextualising learning in the personal and work lives of learners.
- An understanding of personalised learning and the benefits of finding out and exploiting ways of learning which work most effectively for each individual learner. This will be essential, especially given that learners will come to the Bridging Programme with different work histories and from diverse personal backgrounds and cultures.
- An ability to reflect on progress towards short and long term learning goals, to identify obstacles to achievement and how to address them.

### 1.10.3

#### Learning resources

These should be of recognised high quality, easy to access and affordable. Skills for Health expects AOs and providers to contextualise Bridging Programme learning in healthcare and to personalise the learning experience.

### 1.10.4

#### Adopt a common approach to teaching and learning — to help promote consistency and comparability

- Learning and assessment demands and practice in Study Skills in the Bridging Programme must be consistent with and comparable to high quality practice in Access to HE — in order to achieve the best results for learners and create the best possible opportunities for progression into health professional education programmes in Higher Education.
- Build confidence in standards of learning and assessment in the Bridging Programme by maintaining comparability and quality of provision. There would be a reputational risk to the programme and to learning providers and AOs, should the quality of the programme and outcomes for learners vary significantly across the country. Such variability would also harm prospects for learners' mobility and progression.

### 1.10.5

#### Assessment

- AOs are expected to promote/devise assessment methods/ task types appropriate for each unit in the qualification and ensure these include methods which encourage problem solving, practical, oral and written tasks designed to encourage learners to make use of knowledge and experience they have acquired through learning at and for work in healthcare.
- AOs are required to provide sample outline assessment tasks to Skills for Health as part of the Skills for Health approval process, illustrating the methods and assessment requirements identified for each unit, contextualised in healthcare.





### 1.10.6 A common (though not proscriptive) approach to learning and assessment

Providers are asked to share and promote a common understanding of what constitutes effective study skills learning at work in healthcare, for entry to Higher Education. The Bridging Programme will therefore:

- Expect AOs to share the qualification units and structure on the same terms and collaborate on standardisation of assessment decisions.
- Expect AOs to approve only those FE providers that have a progression agreement in place with an HEI and are willing to work within the Bridging Programme curriculum framework.
- Encourage all Bridging Programme partners to actively contribute to the development of the project, by supplying evidence to the impact evaluation.

**Note:** The SFA obliges AOs to meet a set of comparable requirements for approval of the qualification for public funding — both are outlined in the relevant section of the [Online Guide to the Bridging Programme](#).

## 1.11 Progression Agreement

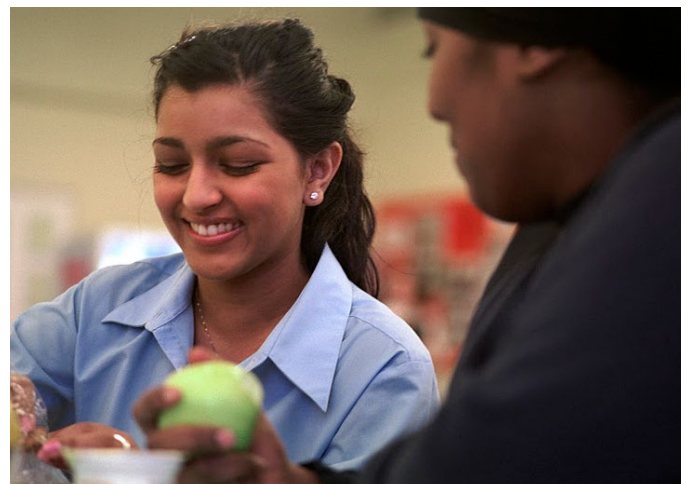
In order to be approved by AOs to offer the Bridging Programme qualification, FE Colleges must have a Progression Agreement in place with at least one HEI offering professional education programmes in healthcare.

### The Progression Agreement should:

- State what specific offer is being made (for example, the offer of a place or opportunity for an interview)
- Specify conditions (for example, achievement of a specified VQ at level 3 and achievement of the Bridging Programme qualification) and make the learner aware of:
- Specified related future career or professional body requirements
- Any time constraint relating to the progression agreement
- Other activities, for example: collaborative Bridging Programme teaching and learning activities between FE College and HEI; HEI departmental staff visiting a partner institution to provide a programme briefing to learners; orientation visit by students to a HE partner institution; the opportunity to take part in a HE focused residential orientation experience.

A personal progression agreement document should be issued to each learner, detailing the offer, what they need to achieve and any further conditions.

Progression Agreements may already be in place, possibly around Access to HE. The Bridging Programme Progression Agreement should build on and complement any such local arrangements, especially those focused on Health and or Care. There is no standard format for the Progression Agreement but the HEI should publish in writing evidence that is able to meet the requirements outlined, in a format which is clear to learners and providers.



# 2.

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## Initial implementation and impact

Initial implementation centred on providing information to potential Bridging Programme partner organisations and offering guidance and support to emerging Bridging Programme partnerships. (October 2014–March 2015)

## 2.1

### For initial implementation Skills for Health needed to identify:

- Potential learning providers and employers willing to offer the Bridging Programme.
- HEIs offering health professional education programmes in Higher Education, willing to engage with the Bridging Programme, to offer guidance to Bridging Programme providers and to offer interviews to potential candidates for entry to their HEI.
- Cohorts of learners with a current interest in progressing to health professional education programmes, who have achieved or who are engaged in a relevant vocational programme at level 3, for example, an Advanced Apprenticeship in Health (Clinical Healthcare Support) or an Advanced Apprenticeship in Health and Social Care.
- AOs interested in offering the Bridging Programme within the requirements outlined above. Skills for Health works closely with AO members in its forum, all of which were kept informed and up to speed with developments. Two AOs came forward to help implement the Bridging Programme in 2014–15, OCN London and Futurequals — and two more AOs plan to do so from 2016–17.

Skills for Health also needed to develop a marketing and communications plan for the Bridging Programme.

Scoping what was needed for initial implementation was carried out concurrently with the design and development phase (May–August 2014); the Bridging Programme Online Guide was developed in July and August 2014 and a marketing plan discussed and agreed.

## 2.2

### Reaching employers and learning providers

Work on implementation operated on two fronts. Firstly, a systematic marketing campaign to reach as many healthcare employers in England as possible. Secondly, brokering partnerships and offering guidance and support to those interested in taking the Bridging Programme forward.



## 2.3

### Marketing and Promotion Campaign

#### 2.3.1 Networks

The campaign centred on reaching potential Bridging Programme partners through Bridging Programme reference group member networks:

- Skills for Health employer networks
- Skills for Health geographical leads in England
- Awarding Organisations expressing interest in offering the qualification
- Health Education England LETBs and their area networks
- CoDH HEI members in England
- Specialist employer networks operating across England

#### 2.3.2 Information

- Publicising and promoting the Bridging Programme Online Guide as the main source of initial information for potential Bridging Programme partners.
- Opening a [discussion group on My Health Skills](#).
- Promoting the Bridging Programme (successfully) through articles in relevant employer and Reference Group member publications.
- Working through Skills for Health area staff across England to reach and inform and support employers and providers.

## 2.4

### Webinars for healthcare employers

Four webinars were offered from November 2014–January 2015 to reach and introduce employers to the Bridging Programme.

The webinars were very successful, reaching almost 300 participants across England with 98% healthcare employer participation. Most healthcare employers grasped the potential of the Bridging Programme during the webinar and many were ready to press ahead straight away:



*I'm going to outline the Programme to my manager and discuss which staff members might be interested in applying. We already have links with our local College and [x] University, so will likely get in touch with them to discuss partnerships.*

Some participants were connected to already emerging Bridging Programme partnerships — the webinars were an effective way for emerging partner organisations to bring a wider range of their staff up to speed.

Further webinars were provided to two emerging Bridging Programme partnerships to address more detailed questions about implementation. Given the level of interest, Skills for Health will continue to use webinars to reach and support partnerships, alongside other methods outlined in the report. The webinars were an effective way of introducing the Bridging Programme to employers and to get them started. Participants said they planned to:



*...incorporate [the Bridging Programme] into our thinking for sustainable HCA-Qualified transition routes.*

*... meet with our local HEI to discuss the potential of them accepting the programme as discussed here today.*

At the time of writing further webinars were planned for June and July 2015 and more webinars will be offered through to March 2016.

The aim of each webinar was to inform employers about the Bridging Programme and to answer any questions, including:

- Which healthcare staff is the Bridging Programme for?
- Can it be delivered alongside Apprenticeships?
- Is SFA funding available?

- What do HE and FE providers need to be able to do to deliver the Bridging Programme?
- Partnerships with FE and HE may well already be in place — how can these be adapted to include the Bridging Programme?
- What can employers do to develop and drive a Bridging Programme partnership?
- How can Skills for Health help?

Though many were new to the webinar format, satisfaction levels were generally high:



*"This was my first webinar so wasn't sure what to expect. I thought it was very useful and I gained far more information regarding lots of issues about vocational qualifications as well as the bridging programme. It was also good to listen to others questions. I would definitely join another webinar."*

*"I thought the webinar was very informative and well presented"*



## 2.5

### Offering support and brokering partnerships

The marketing campaign generated significant levels of interest from the outset. Skills for Health responded by offering guidance and support to those employers, FE and HE providers, AOs and HEE LETBs interested in making an early start on development.



## 2.6

### Face to face meetings and customised webinars for emerging partnerships

As awareness of the Bridging Programme increased, Skills for Health was asked to support emerging partnerships — through face to face meetings where it seemed critical to attend; through telephone, Skype and email support where this was sufficient; and through webinars customised for particular Bridging Programme partnerships. Given the initial interest in the Bridging Programme, Skills for Health focused on ensuring employers and others got the information and support they needed to begin to plan for the Bridging Programme and were there to offer guidance and support to employers after each webinar for those ready to go ahead:



*I am going to... talk to my HEI contacts, contact Skills for Health to discuss my plans and get some advice on who we might work with.*

Skills for Health attended or convened face to face meetings when there appeared to be a level of commitment to forming a Bridging Programme partnership and the partners were clear why Skills for Health needed to be there. Ongoing telephone and mail support was always available to individuals.

Skills for Health attended meetings with cohorts of staff in single organisations/networks, e.g., the HEE National Wider Healthcare Network Group, and ran 'customised' webinars for emerging partnerships of Trusts/FE providers and specialist employer networks, members of Hospice UK, and a partnership between Hospital Trusts, FE providers and an HEI in South Derbyshire.

This approach helped to manage follow up demand from the introductory webinars and publications in a constructive and active way.

## 2.7

### Support for Bridging Programme Partnerships through the HEE LETB National Wider Healthcare Network

Skills for Health met with the HEE LETB National Wider Healthcare Network and representatives were asked to respond to a Skills for Health survey on the potential for Bridging Programme partnerships in their area. This process helped to identify which LETBs were able to take an early and proactive approach to support the Bridging Programme. Skills for Health focussed its attention in this phase (October 2014–March 2015) on those LETBs. Skills for Health has recommended that at least one Bridging Programme partnership is established in each LETB area in 2015–16.



## 2.8

### Work with CoDH and potential HEIs

The Council of Deans of Health is the representative voice of the 85 UK university health faculties providing education and research for nursing, midwifery and the allied health professions. Skills for Health worked closely with CoDH at the Bridging Programme design and development phase. CoDH is actively involved in helping to build Bridging Programme partnerships across England and provides information on the Bridging Programme to its whole membership. Skills for Health will need to establish a systematic country wide presence among HEIs for the Bridging Programme in 2015–16.

## 2.9 Identifying potential FE providers

FE providers were reached through employers and through AOs approved to offer the qualification. FE providers of the Bridging Programme are expected to commit to meeting Skills for Health requirements, managed through AO Centre approval. There was an open and positive response to the Bridging Programme from FE providers and a willingness to accommodate and adapt to Bridging Programme requirements. As delivery partners, FE providers will play a critical role in the success of the Bridging Programme in 2015–16.

## 2.10 Mapping emerging Bridging Programme partnerships

Data from webinars and Skills for Health enquiries has been used to create and begin to map a network of Bridging Programme partnerships across England. This will help Skills for Health to focus on and plot activity in 2015–16, identify geographical gaps and orientate support.



## 2.11 Nationally awarded UCAS tariff points and Qualification Information Profiles (QIPs)

Nationally awarded UCAS tariff points allow HEI admissions tutors to recognise the value of the Level 3 Certificate in Bridging Skills for Higher Education when considering applications.



*Following submission to the UCAS Tariff Advisory Group in April, we are delighted to announce that the OCNLR Level 3 in Bridging Skills for Higher Education qualification has now been added to the UCAS Tariff with an allocation of 70 points.*

Tariff points are for use by universities and colleges to inform their admissions decisions. Where universities and colleges use the UCAS Tariff to set entry requirements, they will be able to include the Bridging Skills for Higher Education qualification in that offer for students making applications for admission to Higher Education. Universities and colleges are free to decide whether or not to use the tariff and where it is used, offers normally include a mixture of Tariff points and qualification, subject and/or grade conditions.

For more information about the Tariff and the tables go to: [www.ucas.com/ucas/conservatoires/getting-started/entry-requirements/tariff](http://www.ucas.com/ucas/conservatoires/getting-started/entry-requirements/tariff)

Skills for Health is in the process of updating Qualification Information Profiles (QIPs) for a number of healthcare Apprenticeships. These will be published in July 2015. QIPs are designed to provide objective, comparable information about qualifications which HE providers can use to inform decisions about the admission of students. They include a range of information such as size, grading, assessment, structure and content.



# 3.



## Findings and recommendations

What needs to be done to implement the Bridging Programme successfully?



## Progress

Skills for Health and its partners are pleased with progress to date. Programme and qualification design were successful and put in place quickly and effectively. The employer oriented approach to roll-out has worked, drawing in Universities, FE providers and Awarding Organisations via employer interest on the ground. Open promotion by Skills for Health to employers, universities, FE providers and AOs is ensuring that all potential partners are reached. The production of a comprehensive online guide at the beginning of implementation helped partners to get as much information as they needed to get started, providing more detailed guidance to employers, providers and AOs ready to move ahead. Webinars were highly successful in reaching significant numbers of employers in a short time and in confirming interest and demand.

Questions and responses from employers in follow up surveys guided Skills for Health further on design of the programme and what further guidance may be needed to implement it. Skills for Health has begun to map emerging partnerships across England and is providing focussed support to help them put the Bridging Programme in place; the data is also being used to identify where there are concentrations of interest and gaps; this will help Skills for Health to target information for employers and providers where it is needed most. Skills for Health's national reach (and planning) has enabled it to support specialist employer partnerships like Barchester Health, Hospice UK and the National Education Network for Ambulance Services; this is positive for the Bridging Programme in other ways, showing how the Programme can be used in strategic workforce planning across traditional geographical boundaries.



# What are the future risks and how can these be addressed?

The actions outlined above are designed to address the implicit risks to the Bridging Programme if Skills for Health were not to continue to do this work. The actions proposed on partnership and communication will extend and embed a successful approach established in 2014–15, minimising any risks to the Programme in these areas.

However a key risk to the Bridging Programme lies in the issue of curriculum design and the capacity of providers to deliver what is required. While there has been undoubted enthusiasm for the Programme for almost all quarters, practitioners working on the ground are frank about where they see the risks:



*...the known but frequently denied poor practice that is widespread in the delivery of vocational qualifications... Skills for Health must set the bar high. Organisations without the ability or intent to deliver the learning required for the Bridging Programme in a robust, contextualised and valid manner must not be allowed to gain centre approval. Partly because [if not] these organisations will be found out first by the HEI with whom they wish to work and the HEI will then just have additional evidence to support their perception of the poor quality of vocational qualifications. This would in time completely undermine the Bridging Programme....*

Healthcare employer



The view that there is a mismatch between what is expected in teaching and learning for the Bridging Programme and common practice in delivery of vocational qualifications, has been expressed variously by employers and providers (in webinars and meetings), both in FE and in HE. The view may be contentious to some — it would certainly not be fair to characterise all VQ provision in this way. The underlying issue is perhaps a much broader one — that practice in vocational learning is often still assessment oriented and fragmented; that tutors/assessors will not have the qualifications and expertise to design and teach the Bridging Programme; that the existing mechanisms for quality assuring whether Bridging Programme curriculum design and delivery meet Skills for Health objectives are weak.





## Bridging Programme Reference Group members raised these questions in a meeting in March 2015:

- Do FE colleges and other providers, including employers, have staff with the capacity to deliver the Bridging Programme?  
Do VQ programme staff and those with the skills to teach on the Bridging Programme work together or separately?  
How will they collaborate to work on the VQ and Bridging Programme concurrently?
- What will be done to support the development of skills, understanding and expertise among VQ tutors?

The risk therefore is that the quality (and effectively the validity) of the Bridging Programme is undermined as poor practice in curriculum design and teaching on the Bridging Programme slips through. On the other hand, bureaucratisation of a Centre approval process would penalise those committed to the approach to teaching and learning that Skills for Health, employers and HEIs expect and which is outlined in the online guide. Initial quality approval of curriculum plans and staff qualifications may generate paper evidence, but would not necessarily guarantee good practice. Skills for Health is not a regulatory body — it will need an imaginative and positive approach to address this risk.

The actions recommended on Teaching, Learning and Assessment are therefore designed to address these risks by working with and supporting Bridging Programme partners to design and deliver a curriculum and learning experience worthy of the aims of the Programme — a quality improvement strategy which provides guidance on curriculum design and delivery to include:

- Information on expected staff qualifications and expertise in both study skills and healthcare vocational learning.
- Detailed curriculum design and assessment guidance — working with expert providers in FE and HE where necessary to develop these resources.
- Exemplified models of delivery alongside the level 3 VQ and post hoc for those already holding relevant VQs at level 3.

Skills for Health will further discuss the potential development of learner support resources with the Skills Academy for Health.



## How will Skills for Health assure itself that providers are meeting minimum curriculum and guidance requirements?

- AO positions on checking staff qualifications and 'schemes of work' as part of the Centre Approval process vary. A view commonly expressed is that AOs are responsible for approval of assessment but not curriculum design. However, not all AOs adopt the same position on scrutinising provider curriculum plans and staff qualifications as part of Centre Approval.
- Skills for Health will discuss arrangements for quality assuring staff qualifications and curriculum plans with individual AOs and agree mechanisms for checking these, either through the AO or in cooperation with the Bridging Programme Partnership itself.
- Skills for Health will agree with AOs a reliable means of checking that Centres have appropriate staff and curriculum plans in place, either through the AO or Bridging Programme Partnership.
- HEIs in a Bridging Programme partnership will be expected to satisfy themselves that employer or FE Providers offering the Bridging Programme have appropriate staff and curriculum plans in place which meet Skills for Health requirements and expectations.
- Skills for Health will periodically ask AOs and or partnerships for sample curriculum plans and staffing arrangements as part of ongoing evaluation of the Bridging Programme.
- AOs are required to provide benchmark assessments as part of the Skills for Health approval process and collaborate on standardisation activity. For providers, the opportunity to engage in benchmarking their assessment practice and to contribute to standardisation could provide a useful way to come together to share best practice in their curriculum design and delivery (as well as in assessment). Skills for Health will discuss this approach with AOs who may already adopt this practice.

# Recommendations for action

The summary of findings and actions recommended in the table below are intended to maintain the support for Bridging Programme partnership development that Skills for Health established in 2014–15, and create a planning tool which employers and others can use to self-assess their preparedness for implementing the Bridging Programme, against the requirements set out in the online guide. This tool will also help Skills for Health identify exactly what support a Partnership needs — and provide valuable information for monitoring progress across England. Skills for Health will identify common issues and address these collaboratively with partnerships where possible, as well as identifying ways of working that improve the quality of the programme and its effectiveness in achieving its key aims.

Communication methods established in 2014–15 have worked successfully — these will be used in 2015–16 to continue to reach employers and providers, using a regularly updated and expanded online guide, discussion group and FAQs; Skills for Health will provide webinars throughout the year on key topics of interest to partnerships, involving partners in exemplifying good practice and promoting collaboration to solve problems. Marketing and open promotion will continue and is likely to be stepped up as the first learners progress through the Bridging Programme; Skills for Health is already gathering case study material which will be used in promotion — and in evaluation. There have already been requests from AOs and employers to input into events and conferences in 2015–16; and there are current requests to contribute to joint articles on the Bridging Programme. These are other effective ways of promoting the Bridging Programme.

## 3.1

### Bridging Programme Partnerships

### Recommendations

The Bridging Programme requires a full partnership between employers and providers to work; in addition each partnership has to meet Skills for Health (and effectively) SFA requirements. Skills for Health found that each partnership was likely to be different in its size, composition, history and future objectives. Individuals in key roles within organisations played a significant role in getting Bridging Programme partnerships started.

Identifiable conditions for forming successful Bridging Programme partnerships emerged between October 2014–March 2015. These included:

- A successful current partnership already in place between health employer, FE and (or) HE provider centred on for example, Apprenticeships, Professional training and or Continuing Professional Development (CPD) An FE provider currently offering Access to HE Diplomas for entry to HEI health professional education programmes, with a formal progression agreement or similar 'progression' arrangement between FE and HE provider.
- The Bridging Programme fulfils employer objectives within their workforce development plan.
- HEI willing in principle to accept a combination of a level 3 vocational qualification and the Level 3 Certificate in Bridging Skills for Higher Education as meeting entry requirements for relevant health professional education programmes.
- A specialist employer network, or an England wide healthcare provider, intends to use the Bridging Programme as part of a national workforce development plan to support progression into health professional education programmes for selected existing staff.
- At least one individual in key role within one Bridging Programme partner organisation is able and prepared to initiate the development of the partnership.

1. Undertake further analysis of identifiable preconditions for forming successful Bridging Programme partnerships as part of the concurrent evaluation of the Bridging Programme. (See 'Concurrent impact evaluation' below)
2. Develop a tool for employers and other partners to use in planning a Bridging Programme partnership locally, including suggestions and 'how tos' from practice to overcome obstacles.
3. Support the establishment of at least one Bridging Programme partnership in each HEE LETB area in 2015–16.
4. Establish a systematic country wide presence among HEIs for the Bridging Programme in 2015–16. to initiate the development of the partnership.

## 3.2

### Communications, online support, promotion of the Bridging Programme

Skills for Health established a programme of support, information and guidance for the Bridging Programme in 2014–15. This included:

- Developing and maintaining an Online Guide on the Skills for Health website.
- Establishing a Bridging Programme reference group with representatives from healthcare employers, Further and Higher Education, Awarding Organisations and the Council of Deans of Health, all active supporters of the Bridging Programme, engaged in its development and implementation.
- Promoting the Bridging Programme in articles for publications, issuing press releases and gathering case studies for publication.
- Establishing an online discussion group for employers and individual practitioners, learning providers and awarding organisations.
- Running a series of highly successful webinars for healthcare employers with 300 registrations by the end of January 2015.
- Organising or attending meetings with emerging Bridging Programme partnerships or communities of interest (health employers, HEIs AOs).
- Providing telephone and email support and advice to Bridging Programme partners.

### Recommendations

5. Maintain and develop online guidance and support, including the online guide and discussion group.
6. Maintain and service the Skills for Health Bridging Programme reference group.
7. Actively promote the Bridging Programme through articles and publications.
8. Promote the Bridging Programme at selected conferences for the health sector and other relevant events.
9. Develop and run webinars to reach healthcare employers and relevant communities of interest.
10. Provide telephone and email support and advice to Bridging Programme partners.
11. Selectively organise and attend meetings with emerging Bridging Programme partnerships.



## 3.3

### Teaching, Learning and Assessment – a summary of report findings

The learning and assessment of study skills at work in healthcare presents a new challenge.

The intention in implementing and evaluating the Bridging Programme is to focus on those specific challenges likely to be faced by AOs and providers in teaching, learning assessing or overseeing assessment of study skills being developed and acquired by learners who are principally engaged in learning at and through work, rather than through 'subject' learning. This will be of key interest in evaluating the effectiveness of the Bridging Programme over time and will be addressed in the concurrent impact evaluation (see 3.4 below).

### Recommendations

12. Work with key organisations to develop and or identify resources to build the capability of FE providers to deliver effective Bridging Programme study skills learning and assessment at work in healthcare.
13. Develop an effective quality assurance strategy which addresses staff qualifications and curriculum planning.
14. Develop or identify for use, suitable learning resources for use by Bridging Programme learners.



## 3.4

### Concurrent impact evaluation<sup>26</sup> – a summary of report findings

One aspiration of the project (shared with HEE) is to conduct a longitudinal study of the impact of the Bridging Programme over a period of years. The largely qualitative approach<sup>27</sup> to be taken in impact evaluation of the Bridging Programme in 15–16 — outlined in the recommendations and programme of work — would contribute to a large scale impact evaluation beyond 2016.

There are a number of significant known obstacles to progression into health professional education programmes in Higher Education for HCAs and other workers in ‘bands 1–4’ of the healthcare workforce. Implementing the Bridging Programme means encountering a wide range of these obstacles<sup>28</sup>.

We know, for example, that the perceived value of Vocational Qualifications (VQs) to Universities for entry to these programmes and other factors will impact on successful entry and retention. This and other factors must be taken into consideration when evaluating the impact of the Bridging Programme on progression.

The recommended concurrent impact evaluation in 2015–16 should therefore also examine the impact on Bridging Programme learners of (for example):

- The quality of Information Advice and Guidance (IAG) for bands 1–4 staff in relation to the Bridging Programme and progression.
- Financial and personal obstacles to progression to health professional education programmes.
- How employers intend to support and then retain staff who progress into University professional health education programmes.
- Access at work to English and Maths, ESOL and ICT learning.
- Recognition of the value of vocational qualifications and the Bridging Programme in meeting HEI entry requirements to health professional education programmes.

Evaluation should also begin to gather information for case studies which illuminate whether and how participating Universities make use of accreditation of prior learning<sup>29</sup>, for those able to evidence prior experiential or certificated learning to gain credit towards a Nursing Degree.

The Bridging Programme also addresses broader government objectives on skills development, widening participation in University and progression from work-based learning into Higher Education; evaluation of the Bridging Programme should explicitly connect to these and other relevant policy objectives.

All involved in the Bridging Programme are expected to actively contribute to its evaluation.

## Recommendations

15. Evaluate the Bridging Programme concurrently to:
  - Share evidence of positive impact as it is identified in 2015–16 on outcomes.
  - Use the mechanisms outlined in Communications (above) to share concurrent results.
  - Produce a Progress Report to evaluate the known impact of the Bridging Programme between March 2015–16.

<sup>26</sup> <http://aje.sagepub.com/content/2011/69/abstract>

<sup>27</sup> HIND J. (2010) Additionality: a useful way to construct the counterfactual qualitatively? *Evaluation Journal of Australia, Volume 10 (1)*, pp. 28–35.

<sup>28</sup> HEE Career Progression framework, *Talent for Care* strategy documents.

<sup>29</sup> *QAA glossary*, (2015) (abbreviated): APL—The identification, assessment and formal acknowledgement of learning and achievement that occurred at some time in the past prior to entry to a course of study; APEL—

experiential — occurred not in the context of formal education or training; APCL—certificated — for which the learner was awarded some form of official recognition.

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