April 2021

Evaluation of the Strategic Interventions in Health Education Disciplines programme

Report to the Office for Students

SQW

Contents

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Date: 20/04/2021

Executive summary

Introduction

1. This report provides an evaluation of a three year programme led by the Office for Students to address concerns about the viability of small and specialist allied health courses. The programme was called Strategic Interventions in Health Education Disciplines (SIHED) and had a £3million allocation. Its scope spanned all allied health professions, nursing and midwifery. The aim of the programme was to ensure the smooth transition of these disciplines to the new higher education finance system, paying particular attention to four small and specialist subjects that were identified as particularly vulnerable: orthoptics, podiatry, prosthetics and orthotics (P&O), and therapeutic radiography. The objectives of the programme were to:

   - Increase awareness of allied health disciplines
   - Increase understanding of and demand for small specialist allied health disciplines
   - Strengthen and diversify delivery of the four small and specialist disciplines
   - Develop a better understanding of the mature student market for nursing, midwifery and allied health (NMAH).

2. SQW[1] was commissioned by the Office for Students to monitor and evaluate the programme from September 2018 to April 2021, and to assess the extent to which the programme achieved its aims and objectives over the short term. Qualitative insights were derived from in depth consultations with stakeholders and outreach officers, case studies of three providers, surveys of first year undergraduate students in 2019 and 2020, and an undergraduate course leader survey in 2021. SQW also collected and analysed student application data from providers, monitored outreach officer activity, reviewed programme documentation, analysed website and social media analytics data, and attended SIHED stakeholder events.

SIHED aims and activities

3. The SIHED programme was initially driven by the Higher Education Funding Council for England (HEFCE) in anticipation of the potential effect of the removal of the student bursary on undergraduate preregistration courses for allied healthcare professions where those courses also had additional vulnerabilities. The four subjects were targeted because they were not well known or understood by potential students, were resource intensive to run, were suffering from a decline in mature student applications and were small in scale. HESES[2] data shows undergraduate enrolments for these four subjects combined in 2016-17

[1] www.sqw.co.uk/
[2] www.officeforstudents.org.uk/data-and-analysis/data-collection/get-the-heses-data/

totalled 723 students, and in 2017-18 this fell to 609. It was therefore seen as a fixed term intervention to support the transition to the new funding arrangements.

4. The programme was designed by core partners representing members of the professions, higher education providers and employers. It was managed through a Programme Board. The Board commissioned the College of Podiatry to run the programme, and the College employed a project manager, a marketing officer and outreach officers. Although it was initiated by HEFCE, the Office for Students subsequently ran the programme from 2018 onwards.

5. Programme activity comprised numerous elements designed to increase student recruitment and support student retention. Core activities were:

- A marketing campaign (www.ISeeTheDifference.co.uk) designed to raise awareness of and support student recruitment to small and specialist allied health professions. 345,000 unique individuals visited the *ISeeTheDifference* website.
- A team of up to six full and part time officers delivered a programme of outreach activities targeted at potential applicants (largely via schools) and those working in the professions. Over 25,000 young people and 1,500 educational professionals were engaged by the outreach officer team via workshops across 470 events. The officers also recorded over 1,400 'serious conversations' with potential applicants.
- A secondment focused on supporting prospective students seeking work shadowing opportunities in orthoptics.
- Two research projects: one exploring barriers to mature student recruitment and how to address them; the other examined male student participation in nursing and allied health, to understand differences in recruitment rates and experiences of male students.
- Stakeholder engagement events to share learning and good practice.
- A study and options review associated with P&O work placements for prosthetists and orthotists, which explored different ways to structure placements and support a quality experience.
- A Challenge Fund which supported 15 innovative projects[3] delivered by higher education institutions, mostly in partnership with other universities and clinical providers.

Changes to course provision 2018-2021

6. The evaluation used information provided by course leaders covering the period 2018 to 2021 for applications data, and covering 2018 to 2020 for offers accepted and enrolments. Applications data was captured after the January UCAS deadline, and enrolments at the end

[3] Sixteen projects were funded but one could not progress owing to coronavirus restrictions.

of September each year. The enrolment data was used by the Board as an early indicator of trends, and will vary to final counts reported to the Higher Education Statistics Agency (HESA).

7. Course leader data provided each January shows applications between 2018 and 2021 for undergraduate preregistration courses increased by 31% for all four subjects, from an aggregate total of 1,446 in January 2018 to 1,894 in January 2021. When individual subjects are considered, there was an increase across three subjects of between 8% and 49%. Applications have remained stable for P&O.

8. Enrolment data provided by course leaders each September shows that between 2018 and 2020, enrolments have increased by 4% in aggregate. Specifically, enrolments have increased across three courses at between 8% and 23%, but declined by 3% for therapeutic radiography.[4]

9. It should also be noted that therapeutic radiography (and podiatry) increased the number of postgraduate places over this period. Trends have varied by subject and by course. One provider saw a 96% increase in applications, while another for the same course saw a 17% decrease in the same period.

10. While SIHED ran concurrently with this overall improvement in application and enrolment rates, it is difficult to attribute these changes directly to the programme, for three sets of reasons. The first reason relates to timing and complexity. Student decision making is complex, and many factors affect course choice including the effects of years of study, social and environmental influences, and academic achievement. A careers conversation could be a significant influencing factor, but attributing a new applicant solely and directly to that one experience is problematic. First year students interviewed for the evaluation said their decisions were informed by a range of factors, including knowing family in the profession, wanting to work in a hospital setting or wanting to study in their chosen city. Timing is an additional factor. Of the 21,590 young people engaged by the outreach officers whose age was known, 42% were old enough to potentially have enrolled by 2020. The website activity may have attracted a different age demographic but evidence is collected only for adult users. Any potential effect of the SIHED intervention may therefore need more time to be realised.

11. The second set of reasons relates to environmental factors. During this period three key external factors must be considered, which individually or collectively could also have influenced student decision making. These are:

    - The reintroduction of a £5,000 student bursary for nursing, midwifery and many allied health students from the academic year 2020/21[5]

[4] The data returns from therapeutic radiography course leaders were incomplete in 2020 and based on different mixes of courses.
[5] www.nhsbsa.nhs.uk/nhs-learning-support-fund

- The coronavirus (COVID-19) pandemic. In February 2021, UCAS reported a 32% increase in applications to nursing[6] compared with the previous year, which was thought to be influenced by changed perceptions of healthcare professions
- Other campaigns including the NHS Careers campaigns and website *We Are the NHS*,[7] and HEE national and regional actions including AHP Day[8] and WOW[9] shows.

12. Thirdly, outreach, marketing and admissions information are delivered by higher education providers to attract students. SIHED was therefore part of a wider information system.

13. It is not therefore possible to provide a quantitative assessment of SIHED's impact on student application and enrolment decisions. Nevertheless, the evaluation has identified several positive effects associated with SIHED, summarised below.

Programme achievements

Increased awareness of and demand for allied health disciplines

14. The marketing and outreach team created a dedicated website to provide information about allied health professions for students and parents, alongside resources for teachers and careers professionals. The *ISeeTheDifference* website attracted approximately 320,000 unique visits in 2020. The team reflected on early insights and found that they needed to make the website a destination and use social media campaigns and paid-for advertising to drive people to it. They also worked to keep the site interesting by updating it with value-adding information, for example about financial support and adding new resources.

15. The SIHED programme also brought stakeholders together (including the Office for Students, Health Education England, professional bodies and course providers) to develop and improve the campaign. This in turn indirectly stimulated other activity, such as the redevelopment of websites (the British and Irish Orthoptic Society [BIOS] website redevelopment is an example of a partner action stimulated by SIHED) or recruiting professionals to act as ambassadors and provide careers talks in schools and colleges. SIHED has therefore had a positive indirect effect through accelerated collaboration between allied health professions.

[6] www.ucas.com/corporate/news-and-key-documents/news/nursing-applications-soar-ucas-publishes-latest-undergraduate-applicant-analysis
[7] www.nhs.uk/wearethenhs
[8] www.england.nhs.uk/ahp/ahps-day/
[9] www.thewowshow.org/thinking-of-becoming-an-ahp-student/

Strengthen and diversify the delivery of the small and specialist disciplines

16. There is now some optimism about the future of the small and specialist courses. Of the 13 respondents to a January 2021 survey, the majority (nine) of course leaders for the small and specialist professions considered their course to be less vulnerable compared to 2018.

17. Overall, the period has seen the introduction of some diversity in learning pathways, as new courses have been developed during the lifetime of SIHED. There are two new postgraduate level preregistration courses which aim to start delivery in 2021-22 (one orthoptics course and one P&O course). In addition, two new degree apprenticeship routes have started for podiatry, with a third for P&O due to commence in 2022-23. Foundation courses have also grown, with a new programme for therapeutic radiography and another for orthoptics, in addition to more general allied health foundation programmes. However, there have also been two course closures in therapeutic radiography.

18. The programme has also focused attention and resources on the development of more placement experiences. This has involved some private employers alongside clinical staff in NHS settings. Tools and resources to support placement providers to make the experience more streamlined and a better learning experience for students have been prepared by SIHED partners.

19. SIHED included a Challenge Fund to help strengthen and diversify delivery. This aimed to encourage the active engagement of the course providers, build networks and provide a foundation for sustainable practices. There were two Challenge Fund calls. Challenge Fund 1 focused on supporting innovation in the recruitment and delivery of podiatry and therapeutic radiography programmes. Both individual higher education provider and collaborative bids were invited. Challenge Fund 2 projects had a broader focus on innovative projects to support recruitment to (or delivery of) NMAH courses, and encouraged interdisciplinary working and a focus on novel delivery or underrepresented groups.

20. The Funds provided financial resource, but beneficiaries also reported that the Office for Students sponsorship gave their efforts to recruit and innovate more credibility and importance within their institutions. Challenge Fund recipients received modest financial support; however, this was funding that many would not have been able to source elsewhere, and led to activities that would otherwise not have happened either as quickly or at all. Examples of initiatives delivered include the targeted recruitment of male students, team building exercises, the use of simulation alongside placements and foundation courses for AHP courses. The effect of these has been beneficial to those involved, and there is some evidence of changed practices as a result of learning emerging. Many projects have shared learning and disseminated findings between providers and professional networks; this has been supported by SIHED, for example through the stakeholder events. There is scope for more dissemination of ongoing interventions to strengthen and diversify provision.

Develop a better understanding of the market for NMAH courses

21. SIHED research studies have increased the evidence base. The report exploring mature students was published on the Office for Students' website in March 2019[10] and the study on male student participation was published in January 2020.[11] These research reports have been viewed by 1,650 and 1,250 people respectively.

22. Positively, the student voice has been prevalent through Challenge Fund projects, leading to new and improved insights about student motivations, behaviours and decision making. Examples include the University of Huddersfield's student run community clinics and Sheffield Hallam University's work to map the male therapeutic radiography applicant journey and adapt marketing resources accordingly.

23. There is some evidence that the findings are beginning to inform activities, such as emphasising the scientific nature of course content in recruitment materials. Further continuation of this is dependent upon ongoing dissemination and sharing among those who can influence recruitment practices and decisions.

Reflections

24. SIHED was an ambitious programme, which has achieved progress towards all its objectives. Stakeholders praised the volume and variety of activity undertaken, as well as the enthusiasm and professionalism with which the programme was implemented. It delivered diverse activities that combined to create a multitude of small changes to practice and behaviours. Although SIHED was a three year programme, the realisation of its objectives will not be fully evident in the short term; decisions taken by potential learners (for example a student in Year 11 or 12) would only begin to be translated to course applications in future years; at best these would take two years to be achieved. The evaluation concluded that, although student opportunities and experiences look different in 2021 compared with 2018, SIHED has not, unsurprisingly, delivered a step change. Nevertheless, it does leave a legacy of networks and learning. Below we recommend a series of actions to build on that legacy.

[10] www.officeforstudents.org.uk/publications/research-on-recruitment-of-mature-students-to-nursing-midwifery-and-allied-health-courses/
[11] www.officeforstudents.org.uk/publications/male-participation-in-nursing-and-allied-health-higher-education-courses/

Recommendations

25. Based on the findings, we propose a set of recommendations for future activities that continue to require networking and collaborative activity between the key stakeholders.

Recommendations for raising awareness		Key partners
Continue the communication campaign	The *ISeeTheDifference* website and associated social media campaigns have a following that could be extended. Core resources should be promoted through these routes and new stories created for a dynamic and responsive campaign.	Council of Deans of Health (CoDH), Professional bodies, Course leaders.
Plan ahead to align with national campaigns	Local activity can capitalise on interest created through national campaigns. The smaller professional bodies or course leaders can plan to align their activities to reinforce national campaign messages.	CoDH, HEE, NHS careers, Professional bodies.
Connect the connectors	The professional bodies create a connection with AHP members; admissions teams connect with potential students; and careers organisations connect with all schools and colleges. Continued work to connect these groups should create synergies across the market.	Professional bodies, University admissions, Careers providers.
Target outreach work	Outreach should be prioritised to target potential students from underrepresented groups or places where skills shortages are expected.	HEE, University admissions, Course leaders.
Listen and learn	Continue evaluation and self-reflection activities to capture the ongoing effects of the delivery of the programme, and to share learning emerging from the programme.	CoDH, Course leaders, Evaluators

Recommendations to strengthen and diversify provision		
Prioritise placements	Limited placement provision constrains student numbers. Continue SIHED's work by harmonising placement systems to make it easier for NHS and private employers to provide quality placements. Recognise and celebrate great supervision and create opportunities for placement supervisors to network and share learning.	CoDH, NHS employers and placement providers, Professional bodies.
Explore potential role of integrated care systems (ICSs)	Course providers should consider the potential of ICSs in their local area as a way to connect with the whole health and social care system.	Course leaders.
Use simulation	Continue to embed simulation and use of new technologies in providing practical learning opportunities.	Course leaders, NHS employers and placement providers.
Seek economies of scale	Encourage closer collaboration within and between higher education providers, regulators and professional bodies to minimise duplication of effort in course delivery.	Course leaders, Professional bodies, HCPC.
Explore new models of provision	SIHED stakeholders should continue to discuss apprenticeship pilots with NHS employers and private sector providers. This is with a view to maximising opportunities created by the application of the apprenticeship levy alongside bursaries.	Course leaders, HEE apprentice team, NHS employers and private practices.

1. Introduction

The Strategic Interventions in Health Education Disciplines programme

1.1 The Office for Students ran the **three year, £3 million Strategic Interventions in Health Education Disciplines (SIHED) programme** to support recruitment and retention in courses across all allied health disciplines, but with a **particular focus on courses identified as being especially small and vulnerable.**

1.2 The allied health professions (AHPs) include dieticians, dance therapists, drama therapists, occupational therapists, operating department practitioners, podiatrists, therapeutic and diagnostic radiographers, prosthetists and orthotists, orthoptists, osteopaths, music therapists, paramedics, physiotherapists and speech and language therapists. AHPs are essential to the performance of the UK healthcare sector. Thirteen separate professions are regulated by the Health and Care Professions Council (HCPC), which maintains a register of practitioners[12] and approved educational and professional development opportunities.

1.3 AHPs are employed in a wide range of settings including private practice, social care providers and the NHS. When SIHED was starting, the NHS was the employer for about 45% of all registered AHP practitioners. **While more people have been entering the AHPs over recent years, the growth in numbers has not satisfied demand**, with vacancy rates reported across all AHP posts at 5.1% (and rising to 10.8% for orthoptists for example).[13]

1.4 **AHPs therefore require new trainees to meet demand and replace the workforce as people retire or leave the profession**. In some areas there has been particular concern about the viability or vulnerability of higher education courses. In particular:

- Where there are few professionals in the workforce. For example, in June 2018 there were 1,051 prosthetists and orthotists P&O and 1,440 orthoptists registered with HCPC[14]
- Where courses are vulnerable to closure, owing either to declining student numbers or a small number of course providers.

1.5 **Four professional courses were the focus of the SIHED programme: podiatry, P&O, therapeutic radiography and orthoptics**. The programme was delivered within the context of the Office for Students' primary objective being 'to ensure that every student, whatever their background, has a fulfilling experience of higher education that enriches their life and career. Specifically, that all students from all backgrounds, with the ability and desire to

[12] The HCPC publishes monthly registrant snapshots at www.hcpc-uk.org/resources/
[13] Public Health England (2017) Facing the Facts, Shaping the Future: A draft health and care workforce strategy for England to 2027.
[14] SQW (2019) Return to Practice programme: Evaluation of the Allied Health Professionals and Health Care Scientists Return to Practice Programme for Government Equalities Office.

undertake higher education, are supported to access, succeed in and progress from higher education.'[15]

Programme design

1.6 The SIHED programme was comprised of numerous elements which blended awareness raising and research activities with more targeted interventions by profession and organisation; the elements are summarised by theme below.

Marketing campaigns to raise awareness

1.7 A **marketing campaign** (www.iseethedifference.co.uk/) was designed to raise awareness of and support student recruitment to small and specialist AHPs. This was supported by a **marketing officer and communications consultant** who provided communications, media and social media support for the SIHED programme, as well as the creation of marketing and information resources. This work was initially commissioned to an agency and then taken in house with the officer working closely with the SIHED project manager.

Outreach work to schools and professions

1.8 The role of the **outreach officers** (up to six full and part time posts) was to develop and deliver a programme of outreach activities. The posts were tailored to each discipline but also covered the AHPs more broadly, to contribute to the programme aim of increasing awareness and stimulating demand for the four disciplines and AHPs more widely. Their role was to meet and engage with careers teachers/advisors, parents and potential students in schools and colleges, at events and latterly via webinars.

Work experience and shadowing

1.9 **A secondment focusing on work shadowing in orthoptics** helped higher education providers support prospective students seeking opportunities to work shadow an orthoptist. This was expected to help to increase awareness and understanding of and demand for small specialist AHPs.

Research and insight

1.10 The programme **commissioned research** into barriers to mature student recruitment and how to address them, as well as a study of male participation in nursing and allied health, to understand differences in recruitment rates and experiences of male students across different healthcare disciplines, to help overcome barriers. In addition**, stakeholder engagement events were held to share lessons learned and good practice**.

[15] Office for Students (2018) Strategy 2018 to 2021 *https://www.officeforstudents.org.uk/media/465d993d-daa8-42d2-a875-4a5fe63b211b/ofs-strategy-2018-21.pdf*

Placements and student experience

1.11 A study and options review associated with **work placements for prosthetists and orthotists** explored different ways to structure placements and ensure a quality experience, with a view to increasing placement capacity to enable more students to study the subject.

Challenge Fund

1.12 **The Challenge Fund was designed to support innovative projects relating to healthcare courses.** The objectives for this strand were threefold: develop a better understanding of the market for nursing, midwifery and allied health (NMAH) courses; strengthen or diversify the delivery of (or recruitment pathways into) the four courses in scope; and increase awareness and understanding of and demand for small specialist AHPs. There were two Challenge Fund calls:

- **Challenge Fund 1** (CF1) focused on supporting innovation in the recruitment and delivery of podiatry and therapeutic programmes. Individual provider bids were invited under the following themes: innovative ways to engage with the wider range of applicants; support for students returning after a period of interruption; innovation in delivery; and innovation in placement support. Collaborative bids were also invited under the following criteria: initiatives that would be beneficial to the retention and successes of students; development of/or innovations in the delivery of feeder programmes; initiatives to support widening participation in healthcare disciplines; and projects to support students with their placements.
- **Challenge Fund 2** (CF2) projects had a broader focus on innovative projects to support recruitment to or delivery of NMAH courses. Bids had to address at least two of the following criteria: led by one of the four SIHED small and specialist courses; an interdisciplinary approach to recruitment or delivery involving at least one other healthcare discipline; new ways to attract and retain students from underrepresented groups (such as mature students and male students); and/or development of novel delivery approaches.

Evaluating the SIHED programme

1.13 SQW **was commissioned by the Office for Students to evaluate the programme from September 2018 to April 2021**. The evaluation is underpinned by a 'logic model' developed by SQW in the scoping phase of the evaluation (see Annex A).

1.14 An evaluation workplan was devised and agreed with the Office for Students each year, to guide the evaluation and its various data collection and reporting components. The evaluation has used the following data sources:

- **Stakeholder interviews**

  - During October to December 2018, scoping interviews took place with representatives from all four professional bodies, two providers and two outreach officers
  - In May to August 2019, interviews took place with three of the professional bodies, key stakeholders from Health Education England (HEE), the Council of Deans of Health (CoDH), Universities UK and Inspiring the Future
  - In November and December 2020, interviews were held with those interviewed in previous years plus NHS Careers, a regional AHP HEE lead and other key stakeholders
  - Interviews were also undertaken with the research teams commissioned to investigate the recruitment of mature students and male student engagement.
- **Document review** including successful Challenge Fund applications, and data returns from each Challenge Fund leader at interim stage and on completion of their project
- **Website and social media analytics data,** provided initially by the SIHED commissioned marketing agency and then by the programme team
- **Student application data** provided by course leaders as part of a regular data feed introduced by SQW three times each year, between January 2019 and January 2021
- **First year undergraduate student surveys** in the autumn terms of 2019 and 2020, securing 253 responses in 2019 and 329 responses in 2020
- **Undergraduate course leader survey** in January 2021
- **Case studies of three providers** undertaken during November and December 2020, these included conversations with course and programme leaders, tutors, outreach officers and first year undergraduate students about their experiences of career/course investigation, application and enrolment
- **Attendance and observation at SIHED events** in London (October 2018, September 2019) and Liverpool (April 2019), and virtually during 2020 and early 2021
- **Outreach officer monitoring returns** completed monthly from January 2019 to December 2020, as well as **interviews with four outreach officers** in July and August 2019, **observation and participation in an outreach officer operational meeting** in May 2019 and a **focus group** in November 2020
- Two previous evaluation reports: a **Scoping Report** produced in December 2018 and an **Interim Report** produced in November 2019.

Evaluation issues

1.15 There were four fundamental issues affecting the programme and its ability to realise positive outcomes in terms of careers awareness and course applications. The first was associated with timing. Although SIHED was a three year programme**, the realisation of its objectives will not be fully evident immediately**; decisions taken by potential learners (for example a student in Year 11 or 12) would only begin to be translated to course applications in future

years; at best these would take two years to be achieved. The outcomes from activities undertaken later in the programme will not yet be evident in the data available for this evaluation report. This means the findings presented may **underrepresent the full extent of outcomes** achieved from the programme.

1.16 The second was the **effect of the coronavirus pandemic** on the university and healthcare environment in the UK. The effects of lockdowns, pandemic-related restrictions and care provision affected current students whose placements were disrupted and whose learning has had to include a greater proportion of online tuition. It has also had a positive effect on public attitudes to healthcare services and healthcare workers. This creates an exceptional environmental effect on the SIHED programme, which coincides with both upheaval for course providers and potential changed student aspirations and behaviours.

1.17 Third was the effect of the **reintroduction of the bursary** for nursing, midwifery and many AHP students from the academic year 2020-21. The new support includes an annual maintenance grant of £5,000 for eligible courses. It is likely that the reintroduction of the bursary has incentivised individuals to study healthcare subjects.

1.18 The final issue was associated with **the scope of the programme**. Whilst focusing on the small and vulnerable subjects, it did encompass all AHPs and was set within the context of the wider (and much larger) group of nursing and midwifery. Compared with other awareness raising interventions, the scale of the programme was modest and assessing the impacts of the programme on all allied health disciplines has been challenging.

Report structure

1.19 This report presents the full programme evaluation. An accompanying slide deck has been prepared as an accessible summary.

1.20 This report brings together an assessment of the evidence against the design and ambitions for the programme as captured in the logic model. The report is structured to set out and explore:

- The rationale and design of the programme is outlined further in Section Two
- Section Three describe the programme's activities and key outputs
- Section Four describes the extent to which each of the four programme objectives have been achieved in the short term
- Section Five summarises the key external factors that have affected SIHED programme delivery
- Section Six provides a set of reflective conclusions and recommendations.

1.21 For completeness, we also include key data in a series of annexes as follows:

- Annex A: research methodology

- Annex B: SIHED Challenge Fund project summaries
- Annex C: summary of activity data, reflecting work delivered by the outreach officers
- Annex D: student application and enrolment data from information provided to the evaluation team
- Annex E: key findings from the undergraduate student surveys (2019 and 2020)
- Annex F: case studies from three undergraduate SIHED courses.

Acknowledgements

1.22 We would like to acknowledge the time and insights provided by many people who have contributed to the evaluation research and supported us by providing direct insights, introductions to key people and access to relevant data. We know that everyone working in (and to support) healthcare and training is busy, and the effects of the coronavirus (COVID-19) pandemic have created additional stresses. Without stakeholder inputs the evaluation would not have been possible.

1.23 In particular we would like to thank:

- Course leaders and academics who manage student recruitment, course delivery and placements, for sharing their data, speaking to us and sharing their experiences of the programme and the effects of the pandemic
- Students who attended virtual focus groups and responded to surveys
- Outreach officers, secondees and the marketing and research teams, who have shared their experiences and reflections throughout the programme
- The project team at the Office for Students and the management team at the College of Podiatry, for reviewing our work and providing relevant background insights, introducing us to key stakeholders, providing data, disseminating materials on our behalf, and advising us of new developments
- Members of the SIHED Board and other stakeholders who have supported the evaluation with their insights and critical review.

2. Rationale for the SIHED programme

SIHED rationale

- The demand for health services increases as the population ages
- The NHS in England faces a range of challenges; recruiting and retaining sufficient skilled staff is among them. Shortages are felt differently among different healthcare professions
- 55% of AHPs are employed in private practices, so while NHS initiatives are important, they do not reach all employers or all the workforce
- There has been a shortfall of people qualified and applying for jobs across the AHPs, while demand for their services is growing
- Training of new AHPs is through universities. Some courses are vulnerable either because they find it challenging to fill places or because there are only a few courses in the country
- Four courses were a focus for support: orthoptics, podiatry, P&O, and therapeutic radiography. These four have additional vulnerabilities:
    - They are not well known or understood by potential students
    - They are resource intensive courses to run
    - They have tended to attract higher proportions of mature students than other healthcare courses—but their numbers are falling
    - Placements are limited both within the NHS and private sector.
- HEFCE (the predecessor to the Office for Students) and a range of partners were tasked by government in 2017 to address this challenge and support small specialist subjects through the transition period, when the basis for student funding was changing to remove bursaries at the same time as removing caps on course recruitment.

Service demand

2.1 The workforce challenges outlined above are set within the **context of demographic change**. Like many industrialised countries, the UK's population is ageing, with enhanced longevity and a declining birth rate. In 1950, people aged 65 years and over accounted for 10.8% of the UK population (5.3 million people); by 2018 this had risen to 18% of the population (11.9 million people). By 2050, it is predicted that nearly 25% of the population will be aged 65+ years (17.7 million people), with growth expected to be highest for the oldest age group (85 years+).[16] However, in later life many people develop conditions that reduce their independence and quality of life. For example, over half of those aged 65+ in the UK have two

[16] ONS (2019) Living longer: is age 70 the new age 65? Accessed at: www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/ageing/articles/livinglongerisage70thenewage65/2019-11-19#what-is-population-ageing

or more chronic health conditions, and many experience difficulties in daily living owing to health problems.[17] Such conditions are likely to significantly increase demand for health and social care services, including those provided by AHPs.

NHS workforce planning context

2.2 AHPs form the third largest clinical workforce in health and social care. In 2017 there were 197,000 AHPs registered with the Health and Care Professions Council, of which 45% were employed in the NHS (over 82,000), illustrating the scale of the non NHS market. Despite the growth of the AHP workforce over recent years, growth has not satisfied demand.[18]

2.3 Workforce pressure is one of the greatest challenges facing the NHS. Across the country there are issues with recruiting and retaining skilled people in sufficient number to meet service demand, with some geographies finding this particularly challenging. In recognition of this challenge, the 2014 NHS Five Year Forward View,[19] and its successor the 2019 NHS Long Term Plan, set out a number of specific workforce actions. The plan explicitly referred to the important role of AHPs in supporting the NHS over the next ten years, and stated that the workforce implementation plan would make specific recommendations for AHPs, in particular those in short supply: paramedics, podiatrists, radiographers, and speech and language therapists.[20]

2.4 Within this context, the 2019 HEE Interim NHS People Plan[21] and the subsequent 2020 People Plan 'We are the NHS'[22] commit to supporting the current and future workforce. 'We are the NHS' sets out the actions employers and systems should take, as well as NHS England, NHS Improvement and HEE, over the remainder of 2020-21. Actions to explicitly support AHPs include:

- Support for clinical placements: HEE is establishing a £10 million fund for nurses, midwives and AHPs to drive increased placement capacity and the development of technology enhanced clinical placements

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[17] A Kingston et al (2018) Projections of multi-morbidity in the older population in England to 2035: estimates from the Population Ageing and Care Simulation (PACSim) model, Age and Ageing 47(3), cited in The State of Ageing in 2019 (Centre for Ageing Better, 2019). Accessed at: www.ageing-better.org.uk/sites/default/files/2019-03/The-state-of-ageing.pdf

[18] Public Health England (2017) Facing the Facts, Shaping the Future: A draft health and care workforce strategy for England to 2027. Accessed at: www.hee.nhs.uk/sites/default/files/documents/Facing%20the%20Facts,%20Shaping%20the%20Future%20%E2%80%93%20a%20draft%20health%20and%20care%20workforce%20strategy%20for%20England%20to%202027.pdf

[19] NHS (2014) Five Year Forward View. Accessed at: www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

[20] NHS (2019) NHS Long Term Plan. Accessed at: www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf

[21] NHS (2019) Interim NHS People Plan. Accessed at: www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan_June2019.pdf

[22] HEE (2020) We are the NHS: People Plan 2020/21—action for us all. Accessed at: www.england.nhs.uk/publication/we-are-the-nhs-people-plan-for-2020-21-action-for-us-all/

- Increasing undergraduate places: working with universities, HEE is supporting an increase of over 5,000 undergraduate places from September 2020 in nursing, midwifery, AHPs, and dental therapy and hygienist courses
- Continuing professional development: new funding to support the continuing professional development of nurses, midwives and AHPs, equivalent to £1,000 per person over three years.

2.5 In support of the People Plan, HEE has been working to strengthen and develop the supply of AHPs, concentrating on four key workstreams: stimulate demand, increase capacity, bridging the gap between education and employment, and enabling the workforce to deliver and grow. The work is being delivered by a national HEE AHP team, alongside a network of regional AHP leads. Specific interventions have included:

- Leading the delivery of a return to practice for AHPs (and healthcare clinical scientists) to support individuals to reregister with the HCPC
- Supporting the implementation of preregistration apprenticeships across the AHPs
- A £10 million Clinical Placements Expansion programme to support the growth of clinical placements in nursing, midwifery and AHPs
- Working with professions, their professional bodies, and the Office for Students to raise awareness of small and vulnerable AHPs.[23]

2.6 More broadly, the government is committed to expanding the quantity and quality of apprenticeship provision, with ambitions to achieve three million apprenticeships by 2020 funded by the Apprenticeship Levy.[24] Actions to support this aim include a commitment to greater apprenticeship starts in the public sector, and the expansion of the number of occupations across health services where apprenticeships can be offered.

Training new allied health professionals

2.7 **There is a recognised need to ensure a good supply of skills and capacity to the AHPs.** Practitioners are trained at Level 6[25] (and in some cases at Level 7) at a variety of different institutions in England (and elsewhere in the UK, but the focus of this research and the SIHED programme is England). Some training is more costly to deliver than others, and as part of the

[23] HEE Allied Health Professions. Accessed at: www.hee.nhs.uk/our-work/allied-health-professions
[24] Business, Innovation and Skills (2015) English Apprenticeships: Our 2020 Vision. Accessed at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/482754/BIS-15-604-english-apprenticeships-our-2020-vision.pdf
[25] There are some Level 5 courses available for operating department practitioners.

NMAH funding reforms[26] an initial costings study[27] revealed that some AHP courses (notably prosthetics and orthotics and orthoptics courses were among the most expensive to run). These courses therefore receive a supplement of £3,500 per student per year in transitional supplements (£1,200 per student per year is provided to podiatry and therapeutic radiography courses).

2.8 In its 2017 grant letter to HEFCE, the Department for Education asked HEFCE to pay particular attention to the transition to the mainstream higher education funding system of small, specialist subjects and to implement measures to support them. This work transferred to the Office for Students from 1 April 2018. Grant allocation was £32 million in 2017-18 and £63 million in 2018-19 to support NMAH courses through funding and targeted allocations as described above. The SIHED programme, focused on small and vulnerable subjects, accounted for £1 million each year over three years.

Four small and vulnerable subject disciplines

2.9 **Four subjects were identified as being particularly vulnerable owing to their small and specialist natures. They were orthoptics, podiatry, prosthetics and orthotics, and therapeutic radiography.** These courses were identified as vulnerable either because student numbers were low and recruitment challenging, and/or because there were very few course providers (see Figure 2-1).

2.10 The concern was that it would become increasingly difficult to attract students to smaller and specialised AHPs, and unfilled places could have led to universities closing untenable courses, which in return, could have resulted in a shortage of newly qualified AHP staff from 2020.[28]

Recruitment challenges

2.11 The design of SIHED was informed by research undertaken for HEE,[29] which explored why recruitment to AHPs was low. With the exception of physiotherapy, the research found that **AHPs were often only vaguely understood or not understood at all**. In addition, the path to studying AHP courses was often haphazard, with students finding out about the professions through personal or family experience of medical treatment, rather than informed advice from teachers and careers advisers. This research revealed that:

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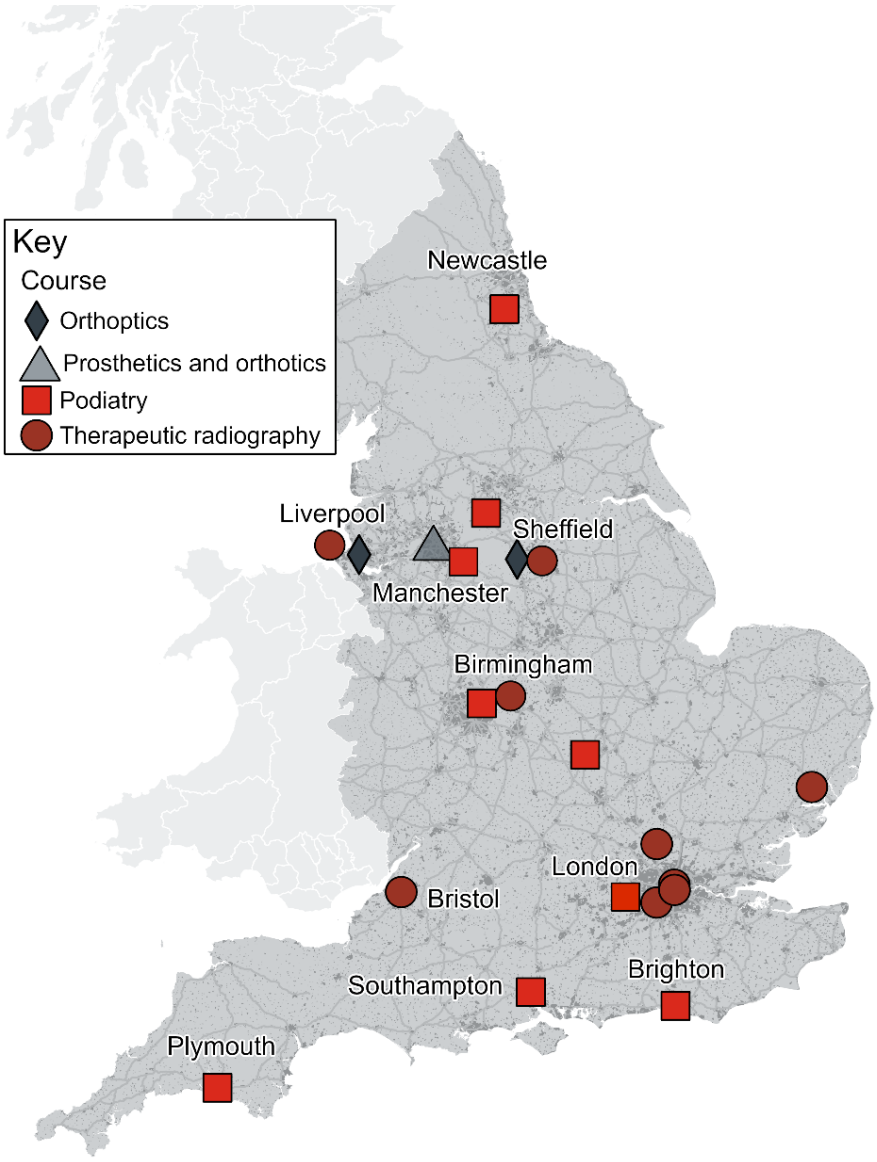
[26] www.gov.uk/government/publications/nhs-bursary-reform/nhs-bursary-reform
[27] HEFCE (2017) Costing study of preregistration nursing, midwifery and allied health profession courses. Accessed at: https://webarchive.nationalarchives.gov.uk/20170712122352/http://www.hefce.ac.uk/pubs/rereports/year/2017/preregcosts/
[28] Health Education England (2017) https://webarchive.nationalarchives.gov.uk/20190501145020/https://www.healthcareers.nhs.uk/print/3369. Define Research and Insight.
[29] Health Education England (2017) https://webarchive.nationalarchives.gov.uk/20190501145020/https://www.healthcareers.nhs.uk/print/3369. Define Research and Insight.

- Orthotics was the least known subject; many people did not know what orthotics is
- Similarly, the awareness of orthoptics was very low; although some people correctly connected 'optics' as associated with eyes
- It was generally understood that therapeutic radiography involves x-rays; however, most people did not know what a therapeutic radiographer actually does
- Many people knew that podiatry involves feet; however, there was no awareness of the breadth of the profession
- Most people knew that prosthetics involves prostheses but had limited understanding of what the job entails.

Figure 2-1: Location of provision across England for the four SIHED small and vulnerable AHP courses



Source: Produced by SQW 2018. License 100030994. Contains Ordnance Survey data © Crown copyright and database right 2018. Note, Plymouth University (Podiatry) did not recruit in September 2019 entry.

2.12 The same research study also explored issues specifically related to course recruitment and found:

- Apprehensions about 'identity fit' and emotional capacity to deal with the work
- The smaller and specialist AHPs were commonly seen as lower skilled compared to other health professions, affecting the perceived status of these professions
- Misperceptions that subjects are narrow with little job variation
- As these subjects were perceived to be very small, people questioned the employment prospects following completion of the courses
- The limited geographical locations of course provision could also deter potential students.

2.13 In addition, **a higher proportion of students (than in the wider student body) are mature students,** who make up a relatively high proportion of students on these courses. The number of mature students in higher education as a whole has been in decline for several years, with a reduction of 23% since 2009-10.[30] This decline has been exacerbated by the changes to student funding from 2012. Podiatry and therapeutic radiography courses have been particularly affected by this trend because they traditionally recruit a higher proportion of mature students compared to orthoptics and P&O courses.

Retention challenges

2.14 Once students have been recruited, **retaining them on both the academic course and within the profession once they graduate is a longstanding challenge**, with a resulting impact on meeting workforce demands. The RePAIR (Reducing Preregistration Attrition and Improving Retention) report[31] explored the factors impacting on healthcare student attrition and the retention of the newly qualified workforce in the early stages of their careers. Key aspects of retention among students were financial pressures (particularly the fear of getting into increasing levels of debt) and clinical placements. In particular, major concerns regarding placements included the lack of forward planning for placement allocations, the financial burden of placements, and variation in levels of commitment to student learning.

[30] MillionPlus (2018) Forgotten Learners: building a system that works for mature students. Accessed at: www.millionplus.ac.uk/news/press-releases/millionplus-report-calls-for-a-fresh-approach-to-mature-students-in-post-18-education-review
[31] Health Education England (2015) RePAIR Report. Accessed at: http://healtheducationengland.sharepoint.com/:b:/g/Comms/Digital/EeNMV6yMRllLgk3zKaV8nlMBi78dT-8MUwvJXJ8uAMyfCg?e=b1VIyY

Provider challenges

2.15 During the scoping phase of the evaluation research, course providers and other stakeholders identified challenges in recruiting to and retaining students in the four small and vulnerable subjects from their perspective. These were:

- **Reliance on clearing**: many courses relied on clearing to fill places, either because they had been unable to secure sufficient applicants during the year, students who had places chose not to take them up, or students failed to achieve required grades. This could be exacerbated as the pool of available students may have declined since the capacity on courses (including popular courses) is no longer capped. For example, in previous years some of the courses may have picked up students interested in physiotherapy but who did not get the necessary grades.
- **Silo working**: there was recognition that the four professions could learn from each other as they were facing similar issues, but that they rarely did. This might have been owing to their differences in relation to the work they do, the skills they need, and different opportunities in the NHS and private practice.
- **Lack of engagement by professionals**: a real sense of urgency and concern for the future of their professions was expressed by the professional bodies alongside a reluctance from members of the profession or service managers to support initiatives such as work shadowing, placement provision and clinical supervision. This was a source of frustration but also a symptom of how stretched practitioners felt in their current roles. This posed a challenge for higher education institutions seeking to source placements for students.
- **Providing applicants with experience of the profession to inform course choice**: some courses require potential students to demonstrate that they have spent time with a practitioner as part of their application process, and this is seen as a desirable objective for many but may be less possible when recruiting through clearing. This might be called 'work experience' but it may be more accurate to call it 'work shadowing'; 'experience' could infer doing elements of the job, whereas work shadowing denotes observational experience. However, there was no clear system across all AHPs for organising such experience, with one stakeholder discussing the issues associated with a system that often relied on families activating personal networks to help secure such experiences.
- **Placement experiences**: several issues around placement experiences were highlighted, including: pressure experienced by course providers to secure sufficient quality placements for their students; challenges faced by students when on placement in a location far from their home or place of study; and the reality of what clinical practice means on a daily basis leading some students to withdraw from study.

3. SIHED programme activities

Programme activities

- The £3million programme was designed by core partners representing the members of the professions, higher education providers and employers. It was managed through a Programme Board which continued to meet throughout the duration of the programme
- The Board commissioned the College of Podiatry to run the programme and employed a project manager, marketing officer and outreach officers.
- It commissioned research and marketing expertise, ran a social media and advertising campaign *ISeeTheDifference*, and encouraged networking and dissemination of learning through networking events
- It provided grants for a series of university based recruitment and retention activities (known as the Challenge Funds), and secondments to support work experience for prospective students and placements for current students
- Key programme outputs include:
  - 345,000 unique individuals have visited the *ISeeTheDifference* website
  - Qver 25,000 young people and 1,500 educational professionals were engaged either face to face or via virtual workshops across 470 events
  - 1,400 serious conversations were had with potential applicants
  - 31 interim and final reports from Challenge Fund projects.
- The programme was thought to have been well managed and run, and to have delivered what it set out to deliver. The project faced staff turnover, which is not atypical with short term contracts
- Practice evolved throughout the programme and it changed and adapted in response to both local and programme level learning
- Design tensions were never fully resolved, in particular balancing the need to focus on four specialist subjects while maintaining cohesion with all AHPs and with nursing and midwifery.

SIHED programme design

3.1 The programme encompassed several different elements designed to contribute to achieving its four key objectives:

- **Increase awareness** of allied health disciplines
- **Increase understanding of and demand for** small specialist allied health disciplines
- **Strengthen and diversify the delivery** of the small and specialist disciplines covered by this initiative

- **Develop a better understanding of the student market** for nursing, midwifery and AHPs.

3.2 These included a range of different activities delivered either directly or indirectly by the SIHED delivery team. Table 3-1 summarises the key components of the programme. Initially some elements were funded for a single year to review progress before committing longer term resources.

Table 3-1: Summary of SIHED activities

	Duration	Progress
Marketing campaign and materials (www.iseethedifference.co.uk/)	May 2018 through to programme completion. This will be extended to 2022	The marketing campaign was launched in summer 2018. The original concept and design of the campaign was completed by an agency but was subsequently developed further by the SIHED communications team. A SIHED marketing officer was in post from February 2019, with additional support from a communications consultant. A number of specialist campaigns were run including campaigns in GP surgeries and gyms to attract students, including mature students. A newsletter was distributed to 220 stakeholders via email most months to share information and request stories and website content. The CoDH will take over responsibility for the campaign for a further year at the end of the programme.
Partnership with 'Inspiring the Future'	September 2018 to programme completion	This helped the outreach officers to encourage professionals to sign up to Inspiring the Future, who can connect a professional who wants to give a careers talk with a school in their area. Practitioners were encouraged to become an Inspiring the Future volunteer and be matched up with local schools and colleges to share stories of their professional lives.
Outreach officers (originally five posts; one post split between two postholders at two university sites, two part time roles, two full time roles). Extended to six posts.	September 2018 to December 2020	Five outreach officers were in post from autumn 2018 (note, officers in post changed over time), plus an AHP wide officer who started in July 2019 and supported AHP awareness raising activities. Their work included attending careers events and fairs, giving talks in schools and colleges and connecting with careers leaders. Following the coronavirus outbreak, the outreach officers adapted to delivering outreach via webinars (69 webinars were held between May and December 2020). Outreach officer roles ended in December 2020.
Understanding the student market: • mature students research	February 2018 to March 2019	Marketwise Strategies were commissioned to undertake research into the barriers preventing the mature segment of the student market entering healthcare courses.

	Duration	Progress
		The report was published in March 2019.
• male students research	March 2019 to January 2020	Research Works were commissioned in Spring 2019 to complete research in the barriers to male participation in NMAH and identify interventions that could reduce these barriers. The report was published in January 2020.
Work shadowing in orthoptics (secondment)	October 2018to March 2021	The part time post was initially focused on the challenge of ensuring that there were sufficient work shadowing experiences available to prospective orthoptics students. However, the role subsequently expanded to include working with Inspiring the Future and the professional body to encourage practitioners to become work shadow champions, to ensure work shadowing experiences were good quality, redesigning the BIOS website, creating and managing a national network of work shadowing providers for course applicants, and developing resources to help students make informed decisions.
Prosthetics and orthotics, and podiatry work placement development to support innovative delivery	September 2018 to March 2021	The original SIHED plan was linked with support for new apprenticeship routes. However, because the secondee was linked to the University of Salford and the call to open apprenticeships was a national competitive call, this focus was revised to avoid any perceived conflict of interest. The secondment therefore focused on placements for podiatrists and prosthetists and orthotists. A major difficulty for courses related to a shortage of placements in the NHS and private sector and quality assurance. The work has created standardised placement documentation available for use by all higher education providers, and the creation of a digital portal based on an existing tool called the 'PARE' (Practice Assessment Record and Evaluation). This project will be extended to August 2021 to support its adoption by both education and placement providers.
Challenge Fund (Round 1)	July 2018 to March 2020	Six projects were funded in July 2018. Projects were due to complete by December 2019. However, several projects had their timescales extended owing to slower than anticipated starts and early delays with delivery.
Challenge Fund (Round 2)	May 2019 to March 2021	Ten funded projects commenced over summer 2019. Of these, two projects completed by December 2020 and one project did not progress owing to coronavirus restrictions. All projects were due to complete by December 2020 but were extended owing to coronavirus delays. All were

	Duration	Progress
		complete by the end of March 2021. Two of the ten projects were developments of those funded in the first round.
Stakeholder engagement events	March 2018 to February 2021	Six SIHED programme events were held and every Challenge Fund project was expected to share their actions and outcomes at (at least one of) these events. Key partners including HEE, Allied Health Professions Federation (AHPF), universities and AHP professional bodies were all invited to attend.

Source: SQW

Programme resources

Partner contributions

3.3 The programme brought key stakeholders together to form a Programme Board. The SIHED programme was collaborative; its design was developed via engagement with professional bodies in the four disciplines (The College of Podiatry, The Society and College of Radiographers, The British and Irish Orthoptic Society and the British Association of Prosthetists and Orthotists) through bilateral meetings. Following this, professional bodies were invited to submit costed proposals to the Office for Students' predecessor HEFCE, outlining activities to address vulnerabilities in their respective disciplines. These formed the basis for discussions involving all four professional bodies and representatives of CoDH, Universities UK and HEE.[32] The Programme Board subsequently added representation from AHPF.

Management structure

3.4 The Board was chaired by Professor Alistair Fitt, Chair of Universities UK's Health Policy and Research Network, and Vice Chancellor of Oxford Brookes University. The Board met three times each year in September/October, January/February and July.

3.5 Programme management was subcontracted by the Office for Students to the College of Podiatry, who employed a full time project manager and a marketing officer to support its delivery. The project manager provided management support to the outreach officers to ensure they were recruited, connected, were able to meet regularly to plan activity and share experiences, and to support induction and recruitment activities.

3.6 Representatives from the Board and the Office for Students team (with the support of the project manager) designed and supported a range of programme level activities.

[32] HEE and CoDH have a remit that spans across all AHPs, midwifery and nursing.

Programme outputs

3.7 Drawing on the expected outputs set out in the SIHED logic model (see Annex A), programme outputs are summarised in Table 3-3 below.

Table 3-2: Programme outputs

Expected output	Achievement
2 million people reached within the year	The marketing and communications team used a range of ways to engage people and direct them to **SIHED digital material**. This includes: campaigns and advertisements including a Spotify campaign (May 2020) delivering 44,537 impressions, a half page advertisement in October 2020 digital *Big Issue* (circulated to 76,000), a feature in *Mail Online* in September 2020 (read by 206,426 people), 269,000 Twitter impressions (since April 2019). Print media have also been used, for example an advertisement in *The Times Weekend* which has a readership of 1.2 million.[33] 10,000 leaflets left in GP practices and an online campaign played at 270 gyms.
25,000 unique individuals access information via *ISeeTheDifference*	**Approximately 345,000** unique individuals visited the *ISeeTheDifference* website between April 2019 and December 2020.
16,250 young people, school and college teachers engaged at 250 events	Over **25,000 young people** and **1,500 educational professionals** engaged **across 470 events/webinars.**
450 serious conversations with potential applicants	**Over 1,400 serious enquiries** about AHPs, where potential applicants asked questions or otherwise demonstrated serious interest.
15% increase in applications with 10% increase in enrolments	Between 2018 and 2020: • **Applications increased across three courses**, between 8% and 49%. Applications have remained static for P&O courses. • **Enrolments increased across three courses**, between 8% and 23%, but declined by 3% for therapeutic radiography.
All Challenge Fund projects to present and attend networking meetings, dissemination events, research conferences	**All Challenge Fund Round projects completed (or planned to complete) dissemination activities** including the publication of written outputs including articles in peer reviewed journals, attendance at research conferences and/or presentation at SIHED stakeholder events.
32 Challenge Fund publications	**31 interim and final project reports,** comprising 16 interim and 15 final evaluation reports[34].
Practitioners supporting more work shadowing experiences	The number of **work shadowing champions in orthoptics** has **increased from 6 to 44** during the programme.

[33] College of Podiatry (2021) SIHED Final Report DRAFT.
[34] Note, University of Nottingham completed an interim report, but had to cancel its plans for a summer school and a final report was not therefore provided.

Expected output	Achievement
	The network of orthoptists professionals includes 104 members, so when requests come through for work shadowing from students, the network provides a source to find work shadowing opportunities.
67 new active Inspiring the Future members and 10% attend an event	**97 new AHP members** signed up during 2020-21.

Source: SQW

Stakeholder reflections

3.8 Overall, stakeholder feedback suggests that the programme has been delivered effectively. Interviewees stated that SIHED has been well managed and coordinated, the project team has been responsive and flexible, communication has been strong throughout, and the stakeholder events well organised. In particular, the roles of the outreach officers and orthoptics secondee, among others, were highlighted as being particularly important in programme delivery.

3.9 SIHED's management and governance structure is credited with enabling strong interprofessional working, successfully working with the four professional bodies and other stakeholders, and facilitating collaboration and shared learning across the four professions. Further, stakeholders involved in funded projects reported that the Challenge Fund has been delivered effectively and the monies available have been critical for delivering innovative projects which, in the main, would not have happened otherwise.

3.10 Practice evolved throughout the programme and changed and adapted in response to both local and programme level learning. For example, moving the campaign from being managed by an agency to a role within the College of Podiatry created greater control over content, engagement with the campaign and maximised resource efficiency. The outreach officers continually learned and reflected on what approaches worked better to adapt their practice.

3.11 However, stakeholders reported several challenges regarding programme management and governance:

- **Staff turnover** within the programme team and the Office for Students made continuity a challenge at times. There was also mixed feedback regarding the decision to subcontract programme management to the College of Podiatry; while some argued it provided good access to relevant information and networks, others suggested that the impression of association with one of the AHPs might have been avoided by subcontracting programme management to a different organisation. It should be noted, however, that the programme management structure was agreed by the Board, due process was followed in relationship management, and in practice the SIHED team worked with a degree of independence from the College of Podiatry.

- On reflection, there was **scope for a more defined strategy from the outset** regarding who to target and how, and the geographical focus of activities (particularly in relation to outreach) to maximise potential outcomes and impacts. This said, such strategic thinking was developed over the lifetime of the programme.
- **Widening the programme's remit to include all AHPs led to trade-offs**. The initial focus on the four small and vulnerable professions was smaller in ambition, but more focused. Widening the remit while also remaining focused on the four brought both enablers and challenges; one positive was that it led to greater economies of scale and wider networks to collaborate and share learning with, and allowed the less well known or popular professions to be seen alongside those that young people would search for. By contrast, it required a wider set of expertise and knowledge among the team and could have diluted the audience looking at each individual profession and considering that as a career path, and created more competition for Challenge Fund funding.
- Linked to the above, while the Board had strong stakeholder representation from the four small professions, stakeholders reported **scope for greater representation across the broader group of AHPs.** This would have supported stronger engagement with the programme among all the professions.

4. Programme actions and outcomes

Introduction

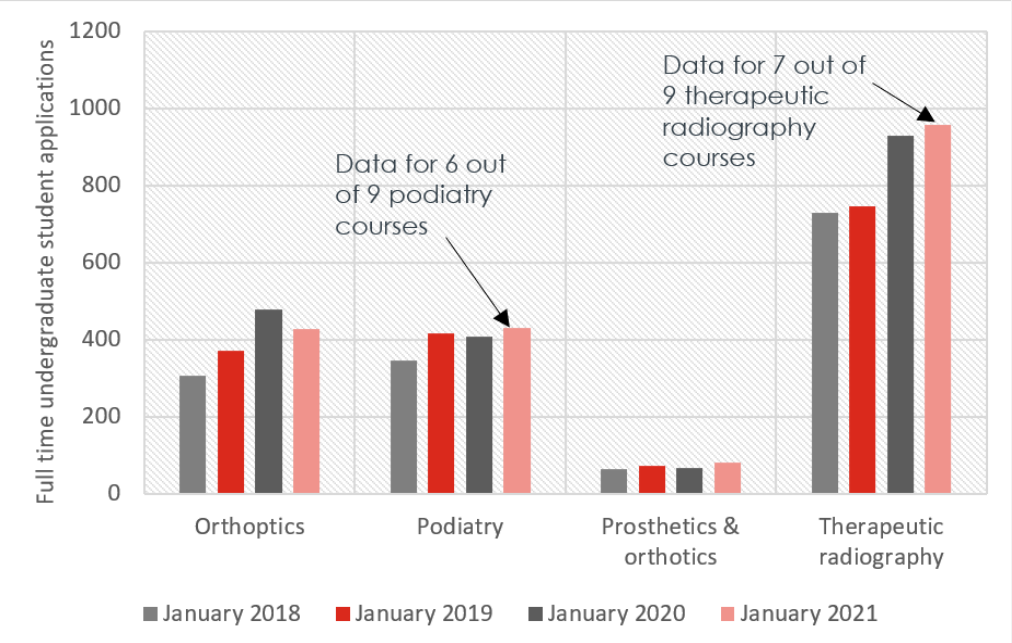
4.1 This section begins by collating evidence about student applications and enrolments over the SIHED delivery period to provide context for the subsequent discussion about the achievement of its four objectives. Each objective is considered in turn with a narrative regarding what the programme delivered, any observable outcomes, and assessment of effect and impact on achievement of the objective.

Student application and enrolment

Student applications

4.2 Information provided by course leaders about their January application figures shows an upward trend for the four small and specialist subjects since 2018 (Figure 4-1). This data showed that applications to undergraduate preregistration courses have increased by 31% for all four subjects between the years 2018 to 2021 from an aggregate total of 1,446 in January 2018, to 1,894 in January 2021. The scale of this rise in applications varies by subject. Full time undergraduate applications for orthoptics have increased by 39%, for both podiatry and P&O courses they have increased by 25%, while the increase in therapeutic radiography is 9%. It should be noted that the increase for both therapeutic radiography and podiatry will be higher than the figures presented here, as returns were missing for five providers.

Figure 4-1: Undergraduate full time student applications January 2018 to 2021



Source: SQW course leader data feed
Note that the January 2021 returns do not include returns for three podiatry courses and two therapeutic radiography courses.

4.3 Enrolment data aligns with this trend, with the **number of full time undergraduate students enrolled increasing for three of the professional areas**, with the exception of therapeutic radiography, which marginally decreased by 3% between 2018 and 2020 (Figure 4-2). The data returns from therapeutic radiography course leaders were incomplete in 2020 and based on different courses, and also excluded the additional postgraduate places created. Consequently, the changes in therapeutic radiography overall are likely to be more positive than this data suggests. The ratio of acceptance to enrolment between 2018 and 2020 appears to have been relatively consistent across the four AHPs.

Figure 4-2: Undergraduate full time student offers and enrolment, September 2018 to 2020

Source: SQW course leader data feed

4.4 Applications and enrolments have generally increased or remained consistent for other course types, including foundation years and full time postgraduate courses. For example, full time postgraduate applications in podiatry and therapeutic radiography increased between 2018 and 2020 (62% and 361% respectively).

4.5 It is important to note that this **aggregated data hides different levels of interest from applicants across individual providers**. For example, data up to September 2020 shows the change in application numbers for therapeutic radiography, ranging from a 96% increase for one provider to a 17% decline for another. This may reflect the level of outreach and promotional activity delivered by courses to encourage applications.

4.6 HESES data is also presented as it provides an early indication of the number of higher education students studying in each academic year in total and by new starters. The number of starters by profession for 2016-17 to 2020-21 is shown in Table 4-1. Longer term trends are important to note here, particularly the decline in student numbers for courses between 2016 and 2018. **Numbers have picked up during the SIHED delivery period and are now back up to the prefunding change levels for all courses**.

4.7 For undergraduate starters, the trends are largely consistent with that collected in the student data feed, with orthoptics, P&O and podiatry student numbers continuing to increase. However, for therapeutic radiography the HESES data is more positive than the student data feed, with a 16% increase in student numbers between 2016-17 and 2020-21 academic years. For postgraduate starters for podiatry, the HESES data for the 2021-21 academic year is more positive than the student data returns presented in Figure 4-3, with a greater increase in enrolments, suggesting stronger demand.

Table 4-1: Number of starters by course, 2016-17 to 2020-21

		2016-17	2017-18	2018-19	2019-20	2020-21	% change 2016-17 to 2020-21 (unless specified)
Podiatry and chiropody	**All**	**307**	**246**	**190**	**200**	**310**	**1%**
	Undergraduate	307	236	185	190	280	-9%
	Postgraduate	0	10	5	10	30	*200%
Orthoptics	**All**	**73**	**67**	**60**	**80**	**85**	**16%**
	Undergraduate	73	67	60	80	85	16%
	Postgraduate	0	0	0	0	0	n/a
Radiography (therapeutic)	**All**	**311**	**290**	**280**	**295**	**360**	**16%**
	Undergraduate	311	278	240	275	330	6%
	Postgraduate	0	12	40	20	30	*150%
Prosthetics and orthotics	**All**	**32**	**28**	**35**	**35**	**35**	**9%**
	Undergraduate	32	28	35	35	35	9%
	Postgraduate	0	0	0	0	0	n/a

Source: HEFCE, 2017, HESES-HEIFES16 data October update; Office for Students, 2018, 2019, 2020 and 2021 www.officeforstudents.org.uk/data-and-analysis/data-collection/get-the-heses-data/
Note, the totals include all part and full time and fundable and non-fundable starters.
**change 2017-18 to 2019-20.*

Enrolments on AHP courses

4.8 Over the period that SIHED was active, enrolments on other courses increased. HESES data is available for some allied health professions; available data for 2016-17 to 2020-21 is shown in Table 4-2. Many courses experienced an early decline in student numbers between 2016-17 and 2017-18. Since then, numbers have recovered and exceeded prefunding change levels. In particular, physiotherapy numbers increased by 102% between 2016-17 and 2020-21.

Table 4-2: Number of starters by AHP course, 2016-17 to 2020-21

		2016-17	2017-18	2018-19	2019-20	2020-21	% change 2016-17 to 2020-21 (unless specified)
Dietetics	**All**	**315**	**310**	**340**	**365**	**450**	**43%**
	Undergraduate	253	245	245	235	290	15%
	Postgraduate	62	65	95	130	160	158%
Occupational therapy	**All**	**1,510**	**1,360**	**1,525**	**1,630**	**1,995**	**32%**
	Undergraduate	1,231	1,025	1,190	1,230	1,580	28%
	Postgraduate	279	335	335	400	415	49%
Operating department practice	**All**	**953**	**685**	**990**	**890**	**1,100**	**15%**
	Undergraduate	953	685	990	890	1,100	15%
	Postgraduate	-	-	-	-	-	-
Physiotherapy	**All**	**1,536**	**1,850**	**2,225**	**2,520**	**3,110**	**102%**
	Undergraduate	1,233	1,515	1,805	1,925	2,445	98%
	Postgraduate	303	335	420	595	665	119%
Radiography (diagnostic)	**All**	**1,128**	**1,095**	**1,220**	**1,235**	**1,560**	**38%**
	Undergraduate	1,097	1,065	1,190	1,200	1,520	39%
	Postgraduate	31	30	30	35	40	29%
Speech and language therapy	**All**	**670**	**680**	**730**	**755**	**905**	**35%**
	Undergraduate	406	410	465	455	610	50%
	Postgraduate	264	270	265	300	295	12%

Source: HEFCE, 2017, HESES-HEIFES16 data October update; Office for Students,[35] 2018, 2019, 2020, 2021.
Note, the totals include all part and full time and fundable and non-fundable starters.

Net increase in provision

4.10 Over the programme's lifetime, **two new courses have started or are due to start**. The first is a two year Orthoptics (preregistration) MSc at University College London (UCL), which will take its first intake in 2021. While consultees reported that this course is aiming to attract higher numbers of mature and male students, it represents an important step in beginning to address the north–south divide in the delivery of orthoptics courses, thereby allowing course provision to expand without directly increasing competition. One interviewee commented that HEE's commitment to opening the new UCL course provides evidence that SIHED has had some success in achieving its aims. In addition, Keele University is currently developing a 'pioneering' P&O course with the orthotics team at The Robert Jones and Agnes Hunt

[35] www.officeforstudents.org.uk/data-and-analysis/data-collection/get-the-heses-data/

Orthopaedic Hospital, which is expected to take its first cohort of students in the 2021/22 academic year.[36]

4.11 Delivery has also **diversified through the introduction of degree apprenticeships**. There are currently podiatry apprenticeships running at the University of Huddersfield and the University of Brighton, with an additional P&O apprenticeship course due to commence at Derby University in 2022. Feedback suggested that it is too early to assess the impact of the apprenticeship model on applicant numbers and the viability of existing delivery models/courses. However, several consultees emphasised the importance of evaluating the impacts of apprenticeships in future.

4.12 There have, however, been **course closures**. In 2020, one provider closed their radiotherapy and oncology course owing to a reported reduction in student interest, while a different provider's MSc radiotherapy and oncology course closed in November 2019 because it was no longer deemed economically viable.

4.13 Of the 13 respondents to the January 2021 survey, **the majority (nine) of course leaders consider their course to be less vulnerable compared to 2018.**

Objective one: Increased awareness of allied health disciplines

4.14 The programme's first objective was to increase awareness of allied health disciplines. This related to all allied health disciplines and was particularly focused on awareness of the disciplines among potential students. Indirectly the objective related to awareness among families (who might influence family members considering study), among other healthcare professionals and educational professionals.

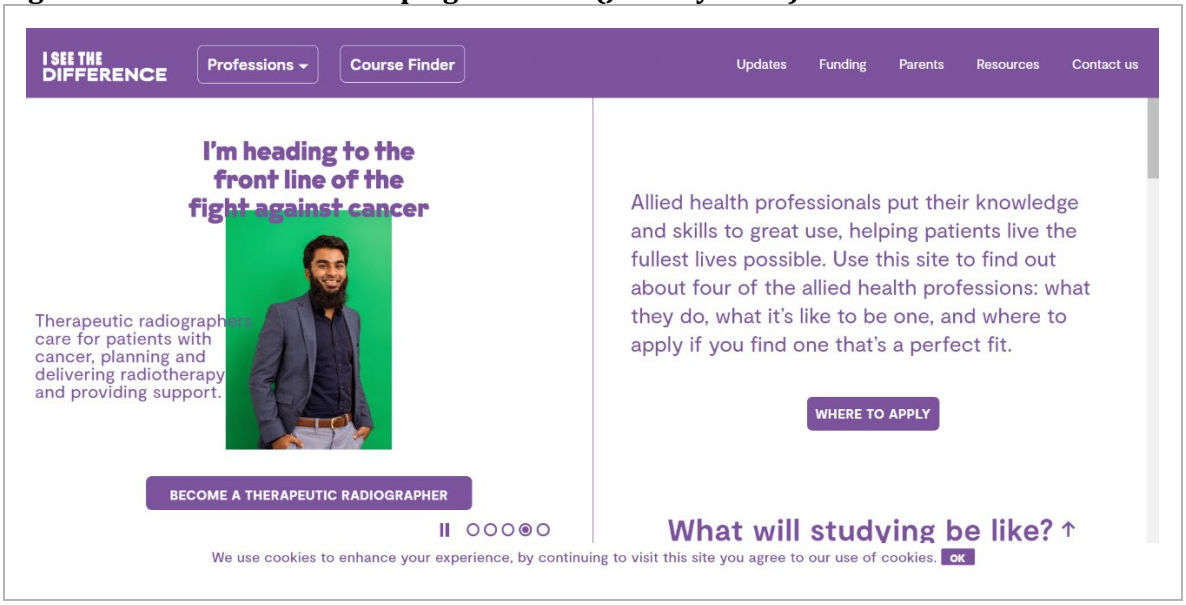
SIHED actions

ISeeTheDifference

4.15 The awareness campaign—*ISeeTheDifference*—was the key activity to support the delivery of this objective. The campaign was for all AHPs. It evolved throughout programme delivery in response to analysis of data, feedback from stakeholders about its content and key messages. *ISeeTheDifference* had its own website (https://iseethedifference.co.uk/), social media accounts and associated resources. It included links to higher education courses and the professional bodies' websites.

[36] Accessed at: www.keele.ac.uk/discover/news/2019/june/pioneering-degree/prosthetics-orthotics.php

Figure 4-3: Screenshot of campaign website (January 2020)



Source: https://iseethedifference.co.uk/

4.16 The Google Analytics data presented in Table 4-3 provides an overview of the outcomes associated with the campaign[37] between January and December 2020. Over the reporting period, 318,618 unique users (new visitors) visited the website and page views exceeded 365,000. A further 5,634 returning users visited the website in the same period, indicating a group of users who were more deeply engaged and interested in the content. The number of unique users and page views were highest in the months of March (26,587 and 40,094 respectively) and May (26,086 and 39,487). Between January and December, the orthoptics page received the most views (5,492) of the four professions, which may be surprising given that it is one of the smaller professions. However, the number of podiatry and therapeutic radiography page views were also high over the period at 3,299 and 2,848 views respectively.

4.17 Overall, there was a decline in the bounce rate (the percentage of visitors to the site who viewed the landing page only, leaving the website without browsing further) between January and December 2020 (67% to 40% respectively). This suggests that more visitors were engaging with the website in more detail and/or for longer.

4.18 The website attracted all age groups, with an average of 45% of the audience being aged over 18 years. The proportion of female users was similar to that for male users (51% to 49% respectively). Most website acquisitions (that is, where visitors originated from) have been through 'display' advertisements that show up while browsing (226,896). Other common acquisition routes included social media (25,755), paid searches[38] (24,812) and direct searches[39] (23,591).

[37] www.iseethedifference.co.uk/
[38] Where the user searched browser and clicked on a paid link.
[39] When the user searched directly for the site—which indicates that they were aware of the brand and were actively seeking content.

Table 4-3: Summary of Google Analytics data for the marketing campaign

Website activity	Total
Unique users	318,618
Returning users	5,634
Total page views	365,715
Orthoptics page views	5,492
P&O page views	1,636
Podiatry page views	3,299
Therapeutic radiography page views	2,848
Bounce rate	*45.92%
User demographic (%)	
18-24 years	*22%
25-34 years	*33%
35-44 years	*19%
Female	*51%
Male	*49%
Website acquisitions	
Display (ads that show up while browsing)	226,896
Paid search (searched browser and clicked on a paid link)	24,812
Social	25,755
Direct search for the site	23,591
Referral from external website	6,620
Organic search (searched browser and clicked on a non paid link)	5,809
Email	10,630

Source: SQW presentation of Google Analytics data
**Average not total.*

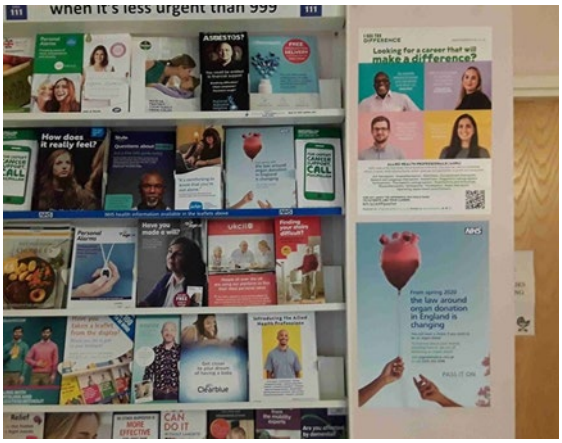
4.19 The *ISeeTheDifference* website provides a central hub for prospective students to access information regarding the four AHPs (and more recently, all AHPs). It also is a resource for stakeholders to direct users to and acts as a repository of resources for teachers and careers leaders. The resources section had 1,214 visits from 779 people from its launch at the end of October 2020 to the end of January 2021. From the Google Analytics data it is clear that the campaign reached a large number of people, with over 365,000 page views reported in 2020, suggesting that the campaign has increased awareness of the allied health disciplines.

Gyms and GP waiting rooms campaigns

4.20 As part of the *ISeeTheDifference* campaign, a number of other more discrete targeted campaigns were delivered, including a messenger gym campaign and a GP waiting room campaign, at a combined cost of £13,540 (see Figure 4-4).

- The gym campaign ran on 270 screens for six weeks from 1 November to 15 December 2019. A ten second video played every minute, with over 7.5 million plays over the campaign period. On average every gym member in those settings was exposed to a play at least once during an average 45 minute visit, with an average of 18 visits during the six weeks.
- The GP waiting room campaign was delivered over 12 weeks between November 2019 and February 2020. 500 A3 posters entitled 'Looking for a career that will make a difference?' and 10,000 leaflets were distributed in selected areas via 500 GP surgery waiting rooms. The campaign was estimated to have reached 5 million patients/individuals,[40] and at the end of the campaign over 9,250 leaflets (out of 10,000) had been picked up, which was reported by IDS Media UK to be very good compared to other campaigns they have delivered.

Figure 4-1: Photographs of the gyms and GP campaigns



Source: IDS Media UK (2019)

[40] The marketing team estimated that the campaign was visible to an estimated 5 million patients, based on an estimated footfall of 8.5 million across the sites during the 12 weeks of the campaign.

Case Study—University of Huddersfield

The case study involved two focus groups with eight first year undergraduate podiatry students at Huddersfield. Most of the students consulted had first heard about podiatry through a family member who works in the profession or has received treatment; this is common across many of the AHPs.

Students choose to study podiatry because of the specialised nature of the profession, job security and opportunities for progression, and the positive experiences of family members who are podiatrists. In addition, several students were seeking a career change following redundancy.

Students used resources such as the NHS, University of Huddersfield and College of Podiatry websites to find out more about the course. They also watched YouTube videos and spoke to family members who work in the profession or had received treatment. Most of the students consulted had completed work experience or work shadowing, but this was often facilitated through a family member(s) in the profession.

None of the students who participated in the case study research had heard of the *ISeeTheDifference* campaign. However, students stated that the campaign would have been useful when applying for university, particularly for providing accessible information about podiatry and the AHPs more broadly. They thought the campaign would be best targeted at high school and college students, as rising awareness from an early age would help to ensure young people are aware of podiatry (and the other AHPs) when they start career planning and selecting their study options.

Outcomes

Stakeholder feedback on the *ISeeTheDifference* campaign

4.21 Several stakeholders consulted referenced the campaign. Feedback suggested that the **campaign improved over time**, with increased use of social media, further development of the website, and marketing materials with additional material included. The redesigned site included an 'updates' section and partners were all invited to contribute stories and information to continually refresh its content. It is credited with having **'spread the word' about AHPs**, led to more informed applicants, and provided a foundation for how stakeholders might want to position and market their professions.

4.22 Stakeholders continue to want the campaign to be effective and suggested some areas for improvement:

- It was acknowledged by different stakeholders that the messaging has improved over time; however, some interviewees argued that the **messaging remained unfamiliar to prospective students and not as clearly associated with healthcare as it could be**.
- Some stakeholders struggled to utilise the marketing materials owing to conflicts with their own university marketing guidelines. One interviewee suggested that part of the problem lies in student decision making that focuses on both institution and course; therefore, materials need to be aligned both with the university and the campaign.

4.23 There was scope for the campaign to have been more strongly integrated or coordinated at a strategic level. The SIHED marketing team met regularly with their counterparts, and promoted campaigns relevant to AHPs (such as the WOW show[41] and AHP Day[42]). Stakeholders suggested that there was more that could be done to integrate materials produced by SIHED with university marketing materials, and also to coordinate collaboration with other ongoing interventions including NHS Careers and HEE's various initiatives.

4.24 Despite the challenges, it is clear from the evidence that the campaign has brought stakeholders together (including the Office for Students, HEE, professional bodies, and course providers) to develop and improve the campaign. This in turn has indirectly stimulated broader conversation and activity to support the professions. The BIOS website redevelopment is an example of a partner action stimulated by the campaign. The SIHED team has created a document outlining the lessons learned through the marketing and outreach activity, designed to support anyone who may take on similar work in future.[43]

Improved interdisciplinary awareness

4.25 Through collaboration on Challenge Fund projects, students, academics and practitioners are credited with having gained better understanding of different nursing, midwifery and allied health courses and professions. An example is provided in the University of Liverpool box.

[41] www.thewowshow.org/thinking-of-becoming-an-ahp-student/
[42] #AHPsDay
[43] Video presentation can be viewed: www.youtube.com/watch?v=Wj3S50FvlOE&t=27s

Challenge Fund—University of Liverpool

- Following a successful Challenge Fund Round 1 project, the University of Liverpool secured Challenge Fund Round 2 monies to explore the use of simulated placements across a range of AHP disciplines.
- The study involved academics from diagnostic and therapeutic radiography, nursing, occupational therapy, orthoptics, physiotherapy, medicine, healthcare science, operating department practice and dietetics.
- One of the outcomes measured with student participants was a measure of mutual understanding resulting from a collaborative nursing and medical imaging simulation placement. The improvement pre to post test was on average 38%.

4.26 Several Challenge Fund Round 2 projects, also have the potential to improve interdisciplinary awareness. For example:

- The University of Chester has adopted an interdisciplinary approach involving preregistration nursing, midwifery, physiotherapy, diagnostic radiography, dietetics and podiatry courses. The project aims to develop a targeted online tool that will bridge the knowledge gap between unsuccessful course applicants, prospective employers and higher education, through targeted information advice and guidance.
- In addition, the University of Huddersfield has taken a multidisciplinary approach to student led community engagement activities. Among other things, the study aims to establish a coordinated curriculum that provides innovative transdisciplinary educational opportunities for health students[44] and promotes engagement with the broader public. Evaluation and monitoring of the project will involve an assessment of student transdisciplinary learning.

Assessment

Student feedback on the campaign

4.27 A few of the first year undergraduate students who participated in the case study research had heard of the *ISeeTheDifference* campaign but were not aware of the details. The majority, however, had not heard of the campaign. This suggests that the campaign has not been a key factor in their awareness of the AHPs. However, some students did indicate that it would have been a useful resource when applying for university, particularly for providing accessible information about the AHPs. For example, one student commented that the 'Become a [profession]' webpages would have been a particularly useful tool.

[44] These moved online during the coronavirus pandemic.

4.28 Feedback from students suggested that the campaign would be best targeted at high school and college students, in order to raise awareness of the AHPs from an early age to inform career planning, with students noting that the AHPs were not promoted by educational professionals. However, students did identify the need to ensure the right balance between informing individuals about available funding and ensuring that people choose the profession for the 'right reasons.'

4.29 The findings from the case study research were largely reiterated by responses to the 2020 student survey, with 13% of respondents being aware of the campaign (an increase on the 9% from the 2019 survey). Students had encountered the campaign in a range of different ways, including the campaign website, professional bodies' websites, various social media sources or via a member of the *ISeeTheDifference* team at a careers/skills fair. Of those who had visited the *ISeeTheDifference* website, over half rated the resources on the website as either helpful or very helpful.

4.30 To date, the evidence suggests that the **influence of the *ISeeTheDifference* campaign on student choices remains relatively limited;** the wide range of alternative routes through which potential applicants learn about career and course opportunities and the scale of the campaign may in some part explain this. Despite this, it is encouraging that several students were aware of it and able to reflect on it and predominantly found the website useful or very useful, as this indicates that at least for some students it has helped to inform their decision making. Further, the fact that some of those who had not heard of it felt it would have been a useful resource highlights the potential of the *ISeeTheDifference* campaign in raising awareness of the AHPs.

4.31 Throughout programme delivery, the team learned 'what works' in communicating messages in an engaging and appealing way, which informed improvements and refinements to the campaign.[45] The success of such changes is evidenced through the increase in website traffic over the programme's lifetime. There were approximately 320,000 unique visits to the *ISeeTheDifference* website in 2020, which is illustrative of the programme's reach. The team has suggested that they have been able to direct interest towards the small and specialist professions in the context of the post coronavirus interest in healthcare roles. Consequently the campaign has been able to capture interest specifically in AHPs that would not otherwise have been promoted through larger national campaigns.

4.32 It is impossible to conclusively attribute any increase in awareness of allied health disciplines directly to the programme, due to coexisting campaigns (such as the NHS campaigns) and other wider environmental factors including coronavirus and the reintroduction of bursaries. Indeed, the most read *ISeeTheDifference* website content[46] related to bursaries, suggesting this was an important factor in decision making. This said, the evidence suggests that SIHED, in conjunction with a range of external factors, has had a

[45] The team are preparing videos and other legacy material to be made freely available to support course leaders in the future.
[46] The SIHED marketing team report; this was read by more than 100,000 people.

modest direct effect on raising awareness of allied health disciplines. It has, however, had a **positive indirect effect as it has accelerated collaboration** between the professions.

Objective two: Increase understanding of and demand for small specialist allied health disciplines

4.33 The programme's second objective was to increase understanding of and demand for small specialist allied health disciplines. The success of the programme in achieving this is discussed below, considering evidence that the programme has supported a range of factors including an increase in applications, greater visibility of the professions and increased awareness of different recruitment approaches.

SIHED actions

Recruitment resources

4.34 The SIHED programme has increased the number of resources, tools and approaches available to course providers to aid recruitment. These have been delivered centrally by the programme team and by some of the Challenge Fund projects.

4.35 Through the *ISeeTheDifference* campaign and outreach activities, the team developed a variety of resources and tools that will form a key part of the programme's legacy. These include:

- **E-learning resources, uploaded onto the HEE 'E-Learning for Healthcare' platform** www.e-lfh.org.uk/programmes/promoting-careers-in-the-allied-health-professions/), designed to 'bottle the magic' of the outreach team's work in schools, at careers events and in the online webinar series. Content is designed to provide practical guidance on how to deliver outreach as a volunteer, including how to approach schools to offer support, how to plan a session, tips for communicating with young people and advice on online delivery.
- **Resources on the *ISeeTheDifference* website** targeted at primary, Key Stage 3, GCSE, A Level and career changers, including webinar recordings, presentations, lesson plans and career planning resources.

4.36 Many Challenge Fund projects have also explored new approaches to recruitment and/or developed new recruitment resources (see text box for examples of these).

New resources and approaches to recruitment

- The University of Liverpool's use of clinical simulation and the University of Birmingham's escape rooms could provide innovative recruitment activities to attract students.
- In addition, new recruitment approaches such as the University of Wolverhampton's 'Preparing to Succeed' and the University of Leeds' 'Head Start into Healthcare' programmes may also be transferable to other institutions.
- In terms of new marketing resources and tools, examples include Sheffield Hallam's new marketing resources, school and college engagement toolkit and recruitment strategy, which is due to be disseminated to other professional courses, and the University of Brighton's web resource and suite of materials that could be used to aid the promotion and marketing of the podiatry profession in schools.

Outreach officer work with young people

4.37 The monitoring paper in Annex C provides a summary of outreach officer activity between January 2019 and December 2020. The data shows that officers spent their time on a range of different activities, but overall, most of their time was spent organising and attending events to raise knowledge and awareness among young people. In 2020 the highest proportion of their time was spent preparing career information materials and other resources, as officers focused on the legacy of their work. The key points to note are:

- Since January 2019, the officers attended **approximately 470 events**, equivalent to an **average of 20 events attended per month across the team**
- During these events **over 25,000 encounters with young people** were recorded, predominately with young people in Year 12 (29% of all encounters)
- Webinars held during the summer term of 2020 (in response to coronavirus) were recorded and made available via the website; these continue to attract views
- **Over 1,400 encounters were considered 'serious enquiries'** about AHPs, where the young person asked questions or otherwise demonstrated serious interest. However, it should be noted that the switch to online outreach owing to coronavirus made it more difficult to accurately record serious enquiries, thus the actual number may have been different.

4.38 Initially, outreach activities were largely focused on targeting young people, either through attendance at large careers events (such as, What Career Live, The Big Bang Fair and National Careers Guidance Conference London), careers events at school, assemblies or smaller classroom sessions. The mature student market was focused on to a lesser extent. A **key enabler in delivery of outreach activities was the diversity of skills and**

experience across the outreach team, which encouraged the officers to 'bounce ideas off each other.' Further, each officer effectively drew on their particular expertise—for example, a previous teacher focused on outreach in schools.

4.39 Following the coronavirus outbreak, the outreach team adapted effectively to delivering outreach virtually. Over summer 2020, **approximately 100 webinars were held, reaching 2,500 people;** this is a significant number for small specialist professions. A variety of groups were targeted, including GCSE and A Level students, mature students, teachers, careers advisors and parents. Webinars involved **guest speakers**, such as a dietician, which attracted over 100 attendees.

4.40 The outreach officers had to overcome several initial challenges including the lack of face to face interaction and the inability to have individual conversations following sessions. There were also practical challenges around schools/colleges struggling to access the webinar software and GDPR considerations when interacting with young people online. Despite these challenges, the overall feedback shows that the webinars were well received. Feedback data collected online from 433 participants showed that respondents consistently rated the content, delivery and webinar overall as between 4 and 5 stars (with 5 being the most satisfied). Webinars enabled the team to continue to reach students, teachers and parents when schools and colleges were closed. It is also important to note that, while it was not the original intention to deliver outreach in this way, valuable lessons have been learned, because virtual AHPs outreach was a relatively untested approach. Key lessons learned include:

- Check that the webinar software is compatible with school/college firewalls
- Always use a moderator for questions and leave adequate time for questions
- Avoid using videos; talk instead and offer links to videos as follow up material
- Check GDPR requirements before webinars (for example, the use of cameras and recording).

4.41 The evaluation team spoke with four of the outreach officers at the end of their contracts. They cited anecdotal evidence to suggest that the work of the outreach officers has led to greater awareness of the four professions among young people and students—for example, greater awareness of the *ISeeTheDifference* campaign and greater interest in the careers they talked about. However, it was acknowledged that is it is not possible to 'change things overnight,' and the **impacts of the outreach are more likely to be evidenced beyond the lifetime of the project**. There are also many different factors that affect young people's career decision making, including their family background, preferred subjects and learning style, choice of university to study at and need/ability/willingness to travel away from home for study, as well as vocational aspirations.

Outreach work: Orthoptics secondment

A practising orthoptist was seconded to SIHED on a part time short term basis. They worked closely with both the outreach officer team and their professional body to undertake a range of actions to contribute to SIHED objectives. This included:

- Working with the professional body to redesign and refresh the BIOS website
- Creating a network of orthoptics practitioners to connect them with Inspiring the Future to become career champions, and to respond to requests for work shadowing experience
- Being the named contact on the BIOS website for prospective students to apply for work shadowing experiences anywhere in England
- Creating lesson plans to link core curriculum subjects with examples from orthoptics practice
- Creating a virtual work shadowing online learning module.

These actions have led to 44 orthoptists registering with Inspiring the Future, and 104 practitioners willing to offer work shadowing experience and be part of a national network (drawn from the 117 orthoptist departments in English hospitals). In the 2019/2020 academic year, there were 88 applicants for work shadowing in England; in comparison, the first three months of 2020/2021 alone saw 52 applications.

Work with educational professionals

4.42 During the latter stages of the outreach activities the focus shifted to improving connections between the outreach officers and key stakeholders, such as careers advisors in schools/colleges, Careers and Enterprise Company networks and private careers companies. This was to increase the visibility of the AHPs among educational professionals, and better equip them to promote the professions in future; this is an important legacy for the programme. Over the course of the programme, outreach officers recorded a substantial number of encounters with adults, namely educational professionals (n=1,546, 55% of all encounters with adults), parents (n=564, 20%) and others (n=676, 24%). Again, encounters became harder to record accurately when outreach activities moved online (see Annex C).

Building work shadowing capacity

4.43 Owing to restrictions caused by coronavirus and the inability to accommodate applications for work experience/work shadowing in a clinical setting, the orthoptist secondee had to rethink how work experiences could be offered virtually while still conveying the key messages about what orthoptics entails. The first phase involved a scoping exercise to

explore what information was already available online; this included inputs from admissions tutors. The findings showed a gap in information on the fundamentals of orthoptics and how the sciences such as physics and biology can be applied to a real life profession. Drawing on inputs from careers advisors and students, an e-learning module supported by an augmented reality experience of the orthoptic clinic and virtual Q&A sessions with an orthoptist has been created. The module is expected to be uploaded onto HEE's 'E-Learning for Health' platform in early 2021. While the resource is intended for school aged and STEM students, it might have a wider application, for example, with career changers. Moreover, it should provide greater resilience if similar barriers to work experience occur in future.

Case Study—University of Liverpool

The orthoptics department's primary involvement in SIHED has been through the outreach activities; the course has benefited from a part time outreach officer based at the University, alongside support from other officers. The course has also been in regular communication with the BIOS secondee based in Manchester, has utilised the *ISeeTheDifference* campaign branding and marketing materials, and attended SIHED stakeholder events. Interviewees reported that the programme has 'been a really good success,' credited with leading to several outcomes for the course:

- **Increased course applications and enrolments**, therefore, the course has not needed to enter clearing over the past two years; the work of the **outreach officers was cited as a key factor** in supporting this outcome
- The increase in applications/enrolments has enabled the department to put forward a case to the University to **increase student places and staff numbers**
- **Increased partnership working between the AHPs and wider healthcare courses in the University**, which has been facilitated through the Challenge Fund monies; the Challenge Fund provided the impetus to collaborate, share experiences and discuss solutions to common problems across a range of disciplines.

4.44 In addition to the work shadowing project, Sheffield Hallam's Challenge Fund project explored the role of preadmission work shadowing/clinical visits in therapeutic radiography, diagnostic radiography and operating department practice. The initial phase of the project included a review of university prospectuses online and focus groups with stakeholders—including first year students, placement educators and service managers—to explore preadmission work experience requirements and the challenges and strengths of work shadowing. Following this the plan was to create videos in two NHS trusts, but filming was suspended owing to coronavirus. The project has therefore been adapted to include an

online stakeholder survey to explore the value of clinical visits and possible alternatives and developing a 'best practice' guidance document for clinical visits (or alternatives).

Challenge Fund interventions

4.45 Challenge Fund projects also trialled a range of different ways to engage prospective students. These included:

- Sheffield Hallam **produced new marketing resources, a school and college engagement toolkit and recruitment strategy aimed at Year 10s and 11s.** This strategy will be disseminated to our other professional courses where recruitment (and specifically the recruitment of male students) is a challenge. They have also broadened the focus of recruitment outreach to include maths, physics and chemistry courses.
- **Ensuring a representative and diverse intake of students.** Several universities focused on this: the University of Coventry (male career changes, including ex-military), the University of East London (arts students), the University of Leeds (male students across all ethnic backgrounds) and the University of Wolverhampton (mature, male students). The University of Huddersfield targeted underrepresented groups in the community, while also providing students with the opportunity for transdisciplinary community engagement projects.
- Providing **intensive or immersive preapplication student experiences**. The University of Wolverhampton ran a two day course over a weekend to show prospective students what working in the healthcare sector is like and what is expected at Level 4 study. The initial plan was for this to be a four day engagement over two weekends but plans had to be adapted owing to coronavirus. All participants subsequently applied for places on healthcare courses at the University.

4.46 Perhaps the most striking learning from several Challenge Fund projects was **that course leaders and admissions teams with outreach resources can increase the number of applications by actively engaging with 'non traditional' potential students**. This included mature students, male students, young people from less well represented communities in their areas, career changers and former military personnel. The project leaders said they recognised that potential recruits with differing life experiences could offer a lot to their professions. In order to reach these potential students, the Challenge Fund projects supported a range of different forms of engagement, from web based information, weekend immersive experiences, active collaboration with British Forces Resettlement Services, use of current students to mentor potential students and evening class provision.

4.47 Projects also all reported that this range of activity would not have been possible without the additional resources made available through SIHED. It provided a **practical resource** (for example, being used to buy out staff time, employ student researchers, pay for video production and technical innovation), and it also provided a **sense of priority and legitimacy** among colleagues, attracting engagement from senior academics within several institutions.

Examples of university outreach

- The University of Brighton's 'Pop Up Podiatry' Challenge Fund Round 1 project had some similarities with the outreach work, in that it developed web based resources for use by people going out to schools and colleges to tell young people about podiatry, alongside a web based resource that can be hosted on a university site to inform potential students about 'a week in the life of.' The aim was to facilitate wider engagement with young people who may not have considered podiatry as a career option. The project led to links with six local schools/colleges and the University is now codelivering parts of the STEM curriculum with teachers. Year 10 pupils also visit the campus more frequently and access the university's clinical facility for work experience.
- The University of the West of England received funding from HEE for a radiotherapy outreach recruitment post. According to interviewees, evidence developed through the SIHED programme regarding awareness raising of AHPs and retention challenges in radiotherapy supported their bid for funding. The post is focused on recruitment, preparing prospective students for university and improving student retention.

Outcomes

4.48 Overall, the quantitative data provided through the student data returns suggested a general increase in demand for small allied health disciplines during the programme's lifetime. This was reiterated by qualitative feedback from interviews, which suggested that **the activities delivered through SIHED have led (in part) to a rise in application and enrolment numbers across the four allied health disciplines, alongside other external factors**.

4.49 The majority of course leaders who responded to the January 2021 survey said that the **SIHED programme had informed student recruitment activities, outreach and widening participation activities.** Respondents reflected on the ways in which SIHED had informed or changed student recruitment and the student experience, with a variety of impacts identified. SIHED was noted to have improved and informed recruitment activity, with one respondent indicating that they have developed their outreach delivery to become more interactive and engaging by using tailored language to encourage more male applicants, while another had increased their targeted recruitment and implemented more focused marketing messages. Further, several respondents indicated that SIHED had provided a 'much needed resource' to signpost applicants to aid recruitment into their profession.

4.50 Feedback from various SIHED stakeholders indicates that applications have probably been positively impacted by SIHED—for example, one indicated that there has **been 'year on year improvements since the programme started.'**

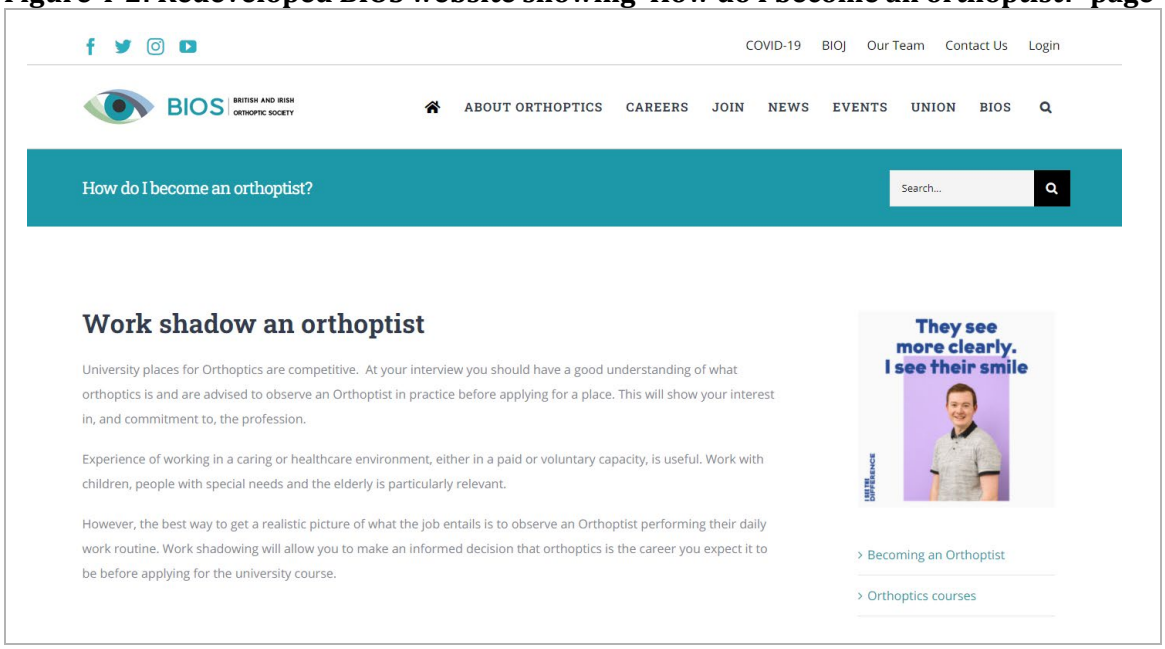
4.51 Several respondents reflected on the difficulty in attributing the rise in applications to the programme alone, referring to external factors such as student funding reforms and coronavirus. However, the importance of maintaining momentum was noted. Here, **maintaining continued awareness raising activities as conducted through SIHED was highlighted**, with one interviewee fearing that in three years 'applications will be rock bottom again' if this does not happen.

4.52 In particular, orthoptics was commonly cited as an exemplar of 'really good success' following its involvement with SIHED, with both courses seeing strong increases in applications and enrolments since the start of the programme. The positive effects observed with student interest and enrolment were thought to be in whole or part attributable to SIHED.

4.53 The SIHED programme has stimulated greater involvement in careers work across the four professional bodies. All four bodies have been involved in the *ISeeTheDifference* campaign and their websites are linked to the *ISeeTheDifference* website. In general, there has also been a 'push' from the professional bodies to invigorate their membership to support careers work and provide resources if practitioners wish to undertake outreach.

4.54 BIOS has used the campaign to completely redevelop its website and parts of its communication strategy. For example, BIOS focused its communication to young people on Instagram, tailoring it accordingly. Also, to support the work of orthoptics champions (outlined above) a set of presentations, banners, infographics and other materials are available on the BIOS website, negating the need for individuals to spend time preparing this information (see Figure 4-5).

Figure 4-2: Redeveloped BIOS website showing 'How do I become an orthoptist?' page



Source: www.orthoptics.org.uk/become-an-orthoptist/work-shadowing/

4.55 The professional bodies are keen to continue some aspects of the SIHED programme where possible. For example, one of the outreach officers has transitioned to a careers and outreach post at the Society of Radiographers, while BIOS is hoping to find the resource to keep the orthoptics secondee post for one day per week.

Assessment

4.56 Overall, the evidence presented above suggests that in many ways the objective to increase understanding of and demand for small and specialist allied health disciplines has been achieved. Outreach activities reached a significant number of young people and adults; many courses have seen increased applications and enrolments leading to a national upward trend.

4.57 However, it is worth noting that the impact of the programme has varied by subject and provider. For example, therapeutic radiography has not experienced an increase in enrolments like the other three professions, and interviewees raised concern over the sustainability of an increase in demand post SIHED. It is also the case that some providers have seen no change in their recruitment in terms of applications and enrolments, although it is unclear whether they fully engaged with the programme but experienced no benefit or whether they continued recruitment as usual.

4.58 An important element for the longer term legacy of the programme is the increased awareness of the role that members of the professional bodies can have in supporting outreach, helping young people and their families to become aware of the AHPs and making resources more available and more relevant to their audience. If the professions actively use the resources created by the outreach officers, connect with intermediaries like Inspiring the Future or through their Careers and Enterprise Company connections, and provide

careers talks or interventions with their schools and colleges, this will mark a significant turning point in terms of sustainability and longevity of the programme. Unfortunately, there is currently no systematic way to capture whether this is taking place.

4.59 Despite the positive data, it is very difficult to attribute any increase in demand for small and specialist health disciplines directly to the programme owing to the variety of environmental factors (outlined in Section 5) that are likely to have contributed to this outcome. This said, the evidence indicates that **outcomes around increasing awareness of work shadowing among practitioners and new recruitment resources/approaches can be attributed to the programme**, because these **would not have occurred without SIHED funding.**

Objective three: Strengthen and diversify the delivery of the small and specialist disciplines covered by this initiative

4.60 This objective was set to look at the overall nature of provision in terms of its location, the type of training route (for example, apprenticeships) and to ensure that students did not drop out once they had started their studies. There were two elements of SIHED particularly focused on this objective: the Challenge Fund projects and the secondment project looking at work placements for prosthetists and orthotists.

4.61 More broadly, changes to course provision and learning pathways (apprenticeships in particular) have also diversified the delivery of the four small and specialist disciplines.

SIHED actions

Innovative approaches to course delivery

4.62 12 Challenge Fund projects undertook local actions designed to either strengthen or diversify their delivery. These included:

- Ensuring a representative and diverse intake of students through the creation of new media resources[47] to help students understand more about the professions and what to expect of university-level study
- Creating a stronger sense of belonging and teamwork among undergraduate students
- Improved use of simulation to support students before they go on placement
- Better training and support for clinical supervisors while students are on placement.

[47] See, for example, the University of Coventry's Healthpro campaign www.coventry.ac.uk/study-at-coventry/faculties-and-schools/health-and-life-sciences/healthpro-project/ or the University of Leeds' Headstart campaign resources www.dropbox.com/sh/bdu67v4sbvluzsg/AAA4aL4VjhQvlJMLN99Osg_pa?dl=0

Supported innovation in placement provision

Placement reform

4.63 SIHED supported a secondment to focus on placement issues for P&O students. There was a shortage of placements and it was thought this might be exacerbated if employers chose to recruit an apprentice rather than take a series of placement students. Initial survey work (although inconclusive) did raise questions about the structure of placements. At that time, placements were delivered in two lengthy 16-week blocks, accounted for a third of course credits, needed to have different learning outcomes to reflect Level 5 and Level 6, and had to be split so that students spent time on both prosthetics and orthotics. As part of the periodic P&O course review, the secondee developed a different structure so that placements are delivered in three shorter blocks, with students completing either a prosthetics or orthotics placement or research.

4.64 The main focus of the secondment moved on to improving placement provision coordination for both podiatry and P&O. The rationale for the project was that a single placement provider might offer placements to students from multiple universities, each of whom have their own documentation, systems and requirements. There was a need for greater coordination and alignment of requirements by universities of placement providers. The project aimed to improve coordination by first creating a single set of paperwork, and second by creating an online resource to digitise the core document and enable information to be shared more easily. Collectively, a group of universities developed a draft set of documentation based on a competency model aligned to the national occupational standards and learning outcomes. This competency based document is accompanied by a toolkit that provides links to online materials including E-Learning for Healthcare. At the time of writing, the next step of the project was to digitise the resource by August 2021. This will then be an extension of an existing system called the 'PARE' (Practice Assessment Record and Evaluation), led by University of Chester.

Placement expansion in private practices

The University of Salford's Challenge Fund project explored private practice placement opportunities for podiatry students. The project had three partners—namely, the University of East London, the University of Brighton and Birmingham Metropolitan College. Key activities included mapping existing podiatry placement models and barriers to accessing placements, as well as alternative AHP placement models, and piloting placements at private practice sites with two higher education providers. Student feedback on private placements was positive, and supportive of widening student placements to include non NHS settings.

Because of the pilot, Birmingham Metropolitan College decided to change its policy and will in future offer students the opportunity to participate in the preplacement interviews. All organisations remain supportive of the ongoing private practice placement national scaleup, and the two private practices agreed to be part of the ongoing project and to act as 'champions' going forwards. Further, the project has the potential to generate far reaching effects because dissemination activities led to nine higher education institutions in England signing up to the ongoing national scaleup of the project.

One of the private practices that participated in the Challenge Fund project was subsequently successful in its bid for HEE Clinical Placements Expansion Programme monies.[48] It has partnered with the University of Brighton to work on this project—which includes establishing a private practice exchange hub to match up locality specific practices with the nearest higher education institution—to enable a local expansion in private practice placements.

4.65 Several other Challenge Fund projects also focused on different aspects of placement provision:

- The University of the West of England, in collaboration with City University of London, explored better training and support for placement supervisors while students are on placement. The project delivered 'study days' for placement supervisors, and despite challenges in engaging supervisors, the intervention had a positive effect on the confidence levels of participants to support students in the practice environment. The project also developed a toolkit that provides guidance and signposting, so that supervisors are better equipped to support students during times of poor mental health. The online resources have been accessed by several clinical supervisors; informal feedback indicates that the resources have proved valuable in enhancing the support for students in practice. However, it is too early to assess the impact on student wellbeing and retention.
- The University of Liverpool explored the use of simulation to reduce the length of clinical placements, thereby seeking to reduce the training burden on clinical providers.

[48] www.hee.nhs.uk/our-work/education-funding-reform/clinical-placements-expansion-programme-nursing-midwifery-allied-health-professionals-ahps

Following this work the University is developing a simulation strategy and investing in simulated placement resources.

Outcomes

Shared learning

4.66 Challenge Fund projects were expected to be locally evaluated and have their learning shared among the wider AHP community. At the time of completion:

- 12 projects had produced written outputs in the form of evaluation reports, slide packs, web resources and conference or poster presentations (for example, HEE Podiatry Symposium 2020, the International Meeting on Simulation in Healthcare in Texas 2019, the University of Liverpool Pedagogical Conference 2019)
- Six were in the process of writing peer reviewed academic papers
- All had shared their learning either within their institution or externally at conferences and events including the SIHED networking events.

Enhanced networks of course providers

4.67 Networks of providers have been supported by the professional bodies for many years through different groups and forums. However, the SIHED programme has provided opportunities for those networks to be reinvigorated, extended or refocused. For example, the placement work has brought forward a collaboration between the University of Salford, along with both new apprenticeship providers—the University of Keele and the University of Derby—and all providers remain committed to the project going forward. More broadly, the work also resulted in a forum of practice educator leaders being established for P&O, led by the British Association of Prosthetists and Orthotists and including both English and Scottish providers.

Embedding learning in course design

4.68 Final reports from Challenge Fund providers shows evidence of emerging changes to strengthen and diversify delivery in future:

- Coventry University has **developed new relationships with military teams** that support ex-military personnel into new careers. Going forward, the **University plans to work with NHS partners on joint recruitment campaigns**. They also aspire to being awarded the accolade of 'Military Friendly' and will work towards this with partner NHS trusts.
- The University of Wolverhampton plans to **explore the feasibility of running its Preparing to Succeed Programme (P2S) going forward**. P2S is an on campus

programme for mature students/male students aged 18+ to support recruitment, retention and success on health professions courses.

- The University of Huddersfield has **begun to offer a wider scope of outreach practices** and the **student led community initiative is becoming a standard part of the curriculum**.

Assessment

4.69 SIHED activities to strengthen and diversify provision have helped to build both an evidence base and a dialogue regarding the need for innovation in the delivery of all four subjects, and indeed, across many AHP courses. Challenge Fund recipients received modest financial support; however, this was funding that many providers would not have been able to source elsewhere. **Going forward, it is not clear how, or if, Challenge Fund activities will continue to progress**. However, many projects have shared learning and disseminated findings between providers and professional networks; this has been supported by SIHED, for example, through the stakeholder events. There is, as ever, scope for more shared learning and dissemination focused on ongoing interventions to strengthen and diversify provision.

4.70 It was reported by most Challenge Fund projects that **without the SIHED programme, the projects would not have been possible, and therefore any outcomes would not have been achieved**. According to their final evaluation reports, projects would not have been possible primarily because of a lack of financial resources, specifically for implementation of activities such as escape rooms, dissemination activities, staff time, production of marketing materials or formal evaluation.[49]

4.71 The exception to this is change to course provision; while a few interviewees suggested that the opening of new courses provided evidence that SIHED has improved the viability of the professions, on the other hand, **there are a myriad of other factors (such as HEE funding) that are likely to have greater impact on the opening and closure of courses**.

Objective four: Develop a better understanding of the market for nursing, midwifery and allied health courses

4.72 This fourth objective for the programme was linked to providing a more comprehensive strategic overview of the wider factors shaping student choices across the healthcare professions. Activities to support achievement of this objective were focused on research studies and student insights through the Challenge Fund projects.

[49] No evaluation reports included details as to how they would sustain activities post Challenge Fund project completion.

SIHED actions

Enhanced the research base

4.73 The programme's design was informed by research into the challenges of recruiting to AHPs. During the delivery of the programme, two further research studies were completed with the aim of gaining a better understanding of the student market for NMAH courses:

- Barriers to mature student engagement in healthcare courses
- Male participation in NMAH.

4.74 Collectively, these research studies have increased the research base on the market for NMAH courses.

4.75 The design of the SIHED programme was informed by a study undertaken for HEE that explored why **recruitment to AHPs** generally was low.[50] One of the key factors identified was low awareness among children and young people that the professions exist, and very limited understanding about what they do. The findings of this study were influential in designing the programme, and the study continued to be mentioned by key stakeholders.

4.76 The research into barriers to **mature student engagement in healthcare** (and how to address them) was published in March 2019. Since tuition fees increased to £9,000 per year, mature student participation in higher education has decreased. The subsequent 2017 funding reforms for NMAH courses intensified concerns regarding mature student engagement.

4.77 The study comprised three case studies (geographically dispersed) involving interviews with further education access courses, teachers/recruiters, NHS Trusts involved in recruitment/training, and other stakeholders such as university department leads and deans. The case studies were supplemented with quantitative data from universities and colleges. Focus groups with prospective students found low awareness of the four specialist AHPs, thereby there were limited insights regarding barriers to mature student engagement across the four individual professions. Overall, **the research concluded that the key interventions to address mature student participation were better promotion and clearer pathways into NMAH professions.**

4.78 The study on **male participation across different healthcare disciplines** was commissioned in spring 2019 and published in January 2020. The rationale for commissioning the study was low male representation across all NMAH courses compared to all other undergraduate courses; however, there is variation across AHP courses (for example, P&O has a higher proportion of male students compared to other AHP courses).

[50] Health Education England (2017) https://webarchive.nationalarchives.gov.uk/20190501145020/https://www.healthcareers.nhs.uk/print/3369. Define Research and Insight.

The objectives of the research were to better understand the barriers and to explore ways to redress the gender gap.

4.79 The research involved several stages including a literature review and analysis of quantitative data, and subsequent qualitative research with potential and current students, plus stakeholders and influencers. The research also confirmed there were significant barriers to male student NMAH careers. While some barriers were general to all healthcare careers, such as the stresses and responsibilities of healthcare, others were more specific, including gender stereotypes, low awareness and negative perceptions of pay, workload and status of NMAH careers. The evidence informed a list of specific recommendations for all stakeholders involved in marketing NMAH careers, including universities and colleges, professional and health sector bodies, healthcare employers, career advice providers (see Table 4-4).

Table 4-1: Recommendations on how to increase male participation in NMAH careers

Recommendations
Universities and colleges, professional and health sector bodies, healthcare employers, career advice providers
• Ensure career information, marketing and outreach content promotes nursing and allied health careers in ways that appeal to both genders. • Develop a coordinated media strategy to increase male student participation in nursing and allied health careers.
Universities and colleges
• Set targets and develop initiatives to increase male participation in nursing and allied health subjects. • Use or develop mentoring programmes to provide male role models and support to potential and current male students in nursing and allied health subjects. • Structure open days, taster sessions and foundation/access courses in ways that maximise opportunities to raise male students' awareness of varied nursing and allied health subjects. • Review the university recruitment process to ensure it is gender sensitive.
Professional and health sector bodies
• Promote the core messages that 'healthcare careers are about skills, not gender' and that 'there is a huge range of careers in healthcare' to children and students throughout different stages of education, starting from primary school. • Support schools to meet Gatsby benchmarks in providing career advice on nursing and AHPs. • Ensure that outreach activities target potential mature students too, as mature men are more likely to consider nursing and allied health subjects and careers. • Promote allied health careers together to highlight the diversity of opportunities, as well as maximise the reach of allied health marketing.
Schools and career advice providers
• Ensure information about nursing and allied health careers is provided to all male and female students whose subjects, interests and perceived qualities are relevant to these careers.

Recommendations

- Establish partnerships with local health employers, universities and colleges to provide career advice about nursing and allied health subjects, mentorship and work shadowing opportunities.

Healthcare employers

- Increase opportunities for work experience and shadowing at the NHS and other healthcare employers for male and female secondary school students, as well as mature students interested in healthcare.
- Use hospital lobbies and GP surgeries to promote the diversity of allied health and nursing careers, in gender-sensitive ways.
- Increase opportunities for career progression into nursing and allied health careers—for example, through apprenticeships.
- Ensure male mentors are available in the workplace to support men who are starting their careers in nursing and allied health careers.

The Office for Students

- Consider how regulation of access and participation can encourage and recognise targeted activity to address gender imbalance in courses leading to careers in nursing and allied health.
- Encourage gender neutral promotion of nursing and allied health through those National Collaboration Outreach Programmes (NCOP) partnerships engaging with these disciplines.
- Consider other approaches to stimulating and influencing higher education provider behaviour to increase male participation in nursing and allied health.

Government

- Take action to stimulate mature student entry into these professions.
- Use the NHS People Plan to drive action to attract both genders to nursing and allied health professions and increase male participation.
- Review school curriculum to raise awareness of allied health and nursing through the science curriculum.

Source: Research Works (2020) Male participation in nursing and allied health higher education courses. Office for Students.

4.80 Challenge Fund leaders have been sharing their learning. For example, Sheffield Hallam University's project involved national research and engagement into the role of clinical experience in the application process that is being shared nationally to initiate discussion and a greater awareness of the implications for this practice on students and clinical partners. Liverpool University hosted a 'Simulation Based Education in Radiography: a response to COVID-19 Virtual Conference' on 24 June 2020, which attracted over 900 delegates and enabled sharing of findings from their project and others across the globe. Following a presentation at the Higher Education Admissions Conference about their Headstart into Healthcare project, Leeds University was invited to chair a roundtable session on the theme of 'Overcoming barriers for BAME students and underrepresented groups' and to submit an article for the Inside Government Higher Education Blog.

Marketing expertise

4.81 The campaign was supported by a marketing officer and communications consultant who further developed the campaign following initial concept development and design by an external agency. The officer also provided communications, media and social media support for the SIHED programme. This included website improvements, digital marketing through advertisements, email marketing, social media campaigns, webinars, print advertising publications and other techniques, including marketing campaigns in GP surgeries and gyms.

4.82 During the programme lessons have been learned regarding 'what works' in communication and marketing, which can be used to inform future interventions. For example, Google[51] and social media adverts were found to be most effective in driving visitors to the *ISeeTheDifference* website. The move from using an external agency to bringing the management of digital adverts in-house led to a significant increase in traffic to the website. In addition, email marketing to careers leaders in schools was reported by the SIHED marketing team to be particularly effective, especially for promoting webinars.

4.83 This has generated a better understanding of ways to communicate with the potential student market for AHPs in particular. In interviews, some course leaders acknowledged how helpful they found this because a) they are not marketing experts and appreciate the new ideas and b) their own institutional marketing teams were not readily accessible to them.

We all thought that we had exhausted all our ideas, we are not marketing people and so it was great to be able to access marketing expertise… For us, resourcing that would have been impossible, and they have done some things that we just would not have thought about. We were at the point of 'improve or die' and you can see that we have improved.

Interview with a course provider

Greater use of student voice

4.84 Many Challenge Fund projects have involved student participation through codeveloping, testing or evaluating new interventions or resources. Therefore, through listening to the student voice, providers and stakeholders have gained greater understanding of student motives, behaviours and decision making.

4.85 Sheffield Hallam University provides an example. Its Challenge Fund project researched factors influencing the recruitment of male students, which informed the development of innovative strategies and marketing materials to better engage with underrepresented male applicants. Focus groups were conducted with male therapeutic radiography students,

[51] The SIHED marketing team note that the average cost per click from Google, Facebook and Instagram display ads was 0.35 pence. The display ad impressions translated into 232,662 website users between July 2019 and January 2021. A further 23,683 users were generated by social media advertising during the same period.

across all years of study. The findings from the focus groups on the factors influencing males at application stage were summarised into four major themes: the male applicant journey (career choices), their perceptions of the profession (the invisible profession), recruitment materials from a male perspective (gender influences) and suggestions for gender sensitive recruitment approaches. These insights were used to inform new marketing resources which were piloted with Year 12 students. Overall, the feedback from Year 12 students was positive and they felt the video was informative and explained the role of a therapeutic radiographer clearly. This said, it was apparent that many of the students had already made their course choice and the video did not make them question that choice. Therefore, learning indicates that **it is imperative that applicants are targeted before they enter Year 12, to inform them about lesser known professions, and that courses are targeted that are likely to have a greater proportion of male pupils (for example, physics).**

4.86 Further examples of projects that were informed by student feedback include:

- The University of Brighton's Pop-up Podiatry Challenge Fund Round 1 project, which developed web based resources for outreach. **Findings from five focus groups with podiatry students and college groups (aged under 23) were used to inform the resources developed**. The key findings from students involved included:
  - Low awareness of podiatry unless pupils had attended a taster day in podiatry or had received treatment
  - Most suggested that before their GCSEs would have been the most helpful time to receive information about the profession
  - Most podiatry students originally intended to study physiotherapy, but via various routes found podiatry
  - Students noted how university websites do not showcase the breadth of the podiatry profession.
- For the University of the West of England's project, **25 Year 2 radiotherapy students completed feedback questionnaires on placements**. Students' experiences on placement differed greatly and appeared to relate to their specific interactions with different members of staff. The findings—which suggested that additional training around providing wellbeing support to students could benefit placement supervisors and thus students—informed the subsequent delivery of 'study days' and a toolkit for placement supervisors.
- Students from across different healthcare courses were central to the delivery of the University of Huddersfield's **student run community engagement initiative**. Students were encouraged to input into aspects of delivery and benefited from an innovative approach to clinical practice.

Case Study—University of Salford

Many podiatry and P&O students considered and/or applied for other healthcare courses, either radiography, occupational therapy or dietetics (all AHPs). The reasons for dismissing these alternatives were varied, and included not meeting the entry requirements, finding Salford more welcoming compared to other institutions and deciding podiatry or P&O was better aligned to their interests.

Students were enjoying their first term of the course. In particular, podiatry students liked the practical podiatry clinics and P&O students were enjoying making casts, the anatomy sessions and seeing patients.

[P&O is] really hands on, really practical… can see results quite instantly. Student

Some students were finding that the online learning suited them, while others would prefer more face to face learning. Students commented that getting to know people on the course was difficult as they were not meeting many people, because any face to face sessions were conducted in the same 'bubbles' in accordance with coronavirus restrictions.

Students were most looking forward to more practical learning, including clinics and placements, being able to independently diagnose conditions and learning more about the upper limb.

Outcomes

Research dissemination and use

4.87 The report exploring mature students was published on the Office for Students' website in March 2019[52] and the study on male participation was published in January 2020.[53] Table 4-5 shows that the research reports have been seen by 1,650 and 1,250 people respectively. Given the number of courses that were the primary focus of the SIHED programme (n=21), the number of professions across all AHPs, higher education providers across England (n=165) and the number of trusts supporting AHPs (n=145), we suggest that these are good awareness figures.

[52] Accessed at: www.officeforstudents.org.uk/publications/research-on-recruitment-of-mature-students-to-nursing-midwifery-and-allied-health-courses/
[53] Accessed at: www.officeforstudents.org.uk/publications/male-participation-in-nursing-and-allied-health-higher-education-courses/

4.88 Unfortunately report download data could not be accessed to provide an indication of engagement with the research.

Table 4-2: Website views of pages hosting SIHED research reports (January 2021)

Report page	Views since	Page views	Unique views
Research on recruitment of mature students to NMAH courses—Office for Students	March 2019	1,773	1,650
Male participation in nursing and allied health higher education courses—Office for Students	January 2020	1,358	1,250

Source: Office for Students Digital Publishing Team

4.89 A small number of interviewees referenced the research studies. Overall, the feedback regarding the male participation study was positive. Interviewees described the study as interesting and informative, and highlighting key challenges and solutions to addressing gender imbalances. In particular, one provider said that they emphasised the role of science in their recruitment materials about the course and the role to respond to the findings that this might connect better with potential male students. However, consultee feedback regarding the mature student engagement study was more mixed; it was argued by some consultees that the study had limited added value and less of an impact compared to the other studies.

Assessment

4.90 Overall, **the evidence indicates that the SIHED programme had a moderate impact on developing a better understanding of the market for allied health courses**. The research studies have increased the research base. Positively, the student voice has been prevalent through the programme, and in particular in Challenge Fund projects, leading to new and improved insights about student motives, behaviours and decision making. In the main, the activity that supported this outcome, in particular the research studies, would not have happened without the programme. There is some evidence that the findings are beginning to inform ongoing recruitment activities such as emphasising the scientific nature of course content in recruitment materials, but the continuation of this is dependent upon further dissemination and sharing among those who can influence recruitment practices and decisions.

5. External factors affecting the programme

External factors

There are three primary factors that have affected experiences of the SIHED programme. These are:

a) **Reintroduction of the bursary** to provide financial support and incentives to new students studying healthcare subjects

b) **Other national campaigns** promoting work in the health sector including 'We Are the NHS' and 'AHPs Day'

c) **Coronavirus**, which has affected the public perception of working in the NHS while making training and course delivery more problematic. Healthcare courses have seen increased numbers of applications in 2020 compared with a year earlier.

Introduction

5.1 The SIHED programme was developed and designed to mitigate the effects of planned changes to the student funding system in England. Its implementation coincided with significant external factors that have affected almost all aspects of its delivery to some extent. In this section those factors are explored, as they provide important context for considering the extent to which the programme could be said to contribute to observed outcomes.

Bursary and NHS Learning Support Fund

5.2 In December 2019 the government announced new support for nursing, midwifery and many AHP students from the academic year 2020-21. The financial support is an extension of the existing NHS Learning Support Fund (NHS LSF). The new support includes an annual maintenance grant of £5,000 for students involved in eligible preregistration undergraduate or postgraduate courses (listed in Table 5-1).

Table 5-1: Courses eligible for the £5,000 maintenance grant

Courses
• Dental therapy/dental hygiene (level 5 and 6 courses) • Dietetics • Midwifery • Nursing (adult, child, mental health, learning disability, joint nursing/social work) • Occupational therapy • Operating department practitioner (level 5 and 6 courses) • Orthoptics • Orthotics and prosthetics

Courses

- Paramedics (bachelors and masters courses are eligible, DipHE and FD courses are not eligible for NHS LSF)
- Physiotherapy
- Podiatry/chiropody
- Radiography (diagnostic and therapeutic)
- Speech and language therapy.

Source: www.nhsbsa.nhs.uk/nhs-learning-support-fund

5.3 There is also up to £3,000 additional funding available for students in certain areas, specialisms or with childcare responsibilities:[54]

- An annual parental support payment of £2,000 to help with childcare costs
- Specialist subject payment of £1,000 per year for students on degrees that struggle to recruit (for new students only):
  - Mental health nursing
  - Learning disability nursing
  - Podiatry
  - Orthoptics
  - Radiography (diagnostic and therapeutic)
  - Prosthetics and orthotics
- A regional incentive payment of £1,000 per year for students studying in certain regions of the country where recruitment is particularly challenging (for new students only)
- Help towards additional travel and accommodation costs for clinical placements that are additional to normal daily travel costs
- An exceptional hardship fund of up to £3,000 per student per academic year.

Other national health sector campaigns

NHS Campaigns

5.4 Over recent years there have been various large multimedia NHS campaigns designed to support recruitment. In March 2020, the Department of Health and Social Care ran a campaign called 'Our NHS,' which among others featured occupational therapists and physiotherapists as they cared for people across the country.

[54] Accessed at: www.healthcareers.nhs.uk/career-planning/study-and-training/considering-or-university/financial-support-university

5.5 In addition, the 'We are the NHS' recruitment campaign is now in its third year. The workforce campaign aims to help the government reach its target of 50,000 more nurses and 26,000 more primary care professionals and reduce vacancy rates across the NHS. It has several different routes focused on recruitment, retention and returning to practice.

5.6 This year's campaign, launched in November 2020, expanded significantly to promote 'the NHS as a modern and inspiring employer with over 350 rewarding roles,' including targeted advertisement and webpages for specific nursing, AHP and healthcare support worker roles. The intention was to drive people to the NHS Careers website (www.nhs.uk/wearethenhs), where they could register their interest and be added to the Customer Relationship Management system, which provides information on the different roles within the NHS and supports applicants through their decision journey.[55]

HEE Campaigns

5.7 As outlined in Section 3, HEE has a growing workstream designed to strengthen and develop the supply of AHPs by looking across all aspects of recruitment—including new recruits, returners and apprenticeships—alongside aspects of delivery such as placements. The programme of work is being overseen by an Allied Health Professions lead and managed by a national HEE AHP programme manager. The team also includes a network of regional AHP leads, whose roles include promoting interest in the AHPs, supporting apprenticeships and advising practitioners on how to encourage people to join the workforce.

5.8 Further, 'AHPs Day' provides an opportunity for all AHPs to come together across the country and celebrate their achievements, while improving awareness of the roles of professions. The most recent AHPs Day was held in October 2020[56] and featured some cross promotion by the SIHED social media accounts.

The implications of coronavirus

5.9 The coronavirus pandemic continues to be very challenging for academics, practitioners and students across all the AHPs.

5.10 **Academic delivery has been forced to adapt to online delivery,** with smaller and less frequent face-to-face clinical sessions. **During the first wave of the pandemic the majority of placements were cancelled.** Even when placements resumed challenges arose, such as uncertainties over students travelling between tiers and staying overnight, and concerns for student wellbeing given the pressures on the NHS. In some cases, third year students graduated early to help fill staffing shortages across the NHS.

5.11 **Recruitment activities have similarly adapted to virtual delivery**, including open days and interviews, but outreach activities into schools and colleges have largely paused as they

[55] Accessed at: https://campaignresources.phe.gov.uk/resources/campaigns/77-nhs-recruitment-/overview
[56] Accessed at: www.england.nhs.uk/ahp/ahps-day/

have faced their own COVID-related challenges. Positively, the shift to virtual recruitment and virtual work experience has removed geographic barriers, potentially widening the pool of potential students.

5.12 **Overall, applications to university increased and UCAS reported applications up 1.6% in 2020 compared to 2019 overall**. This is true of AHPs. Consultee evidence suggested that the 2020 recruitment cycle saw a general increase in application and enrolment numbers across all AHPs (except for operating department practitioners), including the four small and specialist professions. **Consultees also reported a notable increase in the number of mature students**. However, feedback from some providers suggested changes in applicant behaviour, mainly a **higher number of withdrawals and/or deferrals** because of financial uncertainty, family circumstances and/or international travel restrictions.

5.13 Concerns were also expressed that the pandemic **had dampened the labour market for graduate entrants**. One stakeholder reported that for the first time their 2020 graduates had not gone straight into jobs and thought this was because of limited capacity to recruit and induct graduates by employers.

5.14 The effects of coronavirus are still being experienced and its legacy will take time to become clear. Interviewees commonly **attributed the rise in applications and enrolments to positive public perceptions about the work of the NHS** (for example, demonstrated through 'clap for carers') and the value of an NHS career, which has come to the fore during the pandemic. Specifically, the reported increase in mature students may be attributable to demand for upskilling and reskilling as a result of redundancies, the economy entering recession, the new bursaries and/or individuals having more time to reflect on career pathways.[57] Perhaps a career in healthcare is considered a stable option during a period of uncertainty.

5.15 Looking forward, **concern was raised by stakeholders over the impact of the pandemic on attrition.** For example, the pandemic may exacerbate feelings of isolation and stress among students, or during placements the first hand experience of the pressures on the NHS may dissuade students from continuing their studies. Further, the increase in applications/enrolments might not be sustained during the 2021 recruitment cycle and beyond. Feedback suggested that coronavirus could impact recruitment over the next few years, particularly because activities such as outreach designed to 'plant the seed earlier' have had to be redesigned.

[57] UCAS (2020) What happened to the COVID cohort? Available to access here: www.ucas.com/file/396231/download?token=qcQl7Fyy

6. Conclusions and recommendations

Introduction

6.1 In this section of the report we bring together reflections on the findings of this two and a half year evaluation study. It is important to acknowledge that SIHED encompassed a range of interventions to ensure that all programme objectives were progressed. **SIHED was an ambitious programme, which achieved progress towards all its objectives**. Stakeholders valued the **volume and variety of activity undertaken**, as well as the **enthusiasm** with which the programme was implemented both on the ground and at management level.

6.2 The SIHED programme simultaneously delivered a set of interactions with young people and potential students to promote and inform them about AHPs, while creating opportunities for stakeholder organisations to connect and work together. It delivered many diverse activities that combined to **create a multitude of small changes to practice and behaviours**. It has not, unsurprisingly, delivered a step change in the student market. Some courses have paused or closed while others have expanded. **Student applications are rising but remain at a level lower than five years ago.** The impact of the programme is therefore characterised by **positive elements, progress and lessons learned regarding aspects where problems and barriers remain.**

6.3 Despite the variety of activity delivered**, SIHED is seen to be a coherent programme of work**, with well targeted activities and priorities. The variety of activity under SIHED, and its focus on four different AHPs in particular, has enabled (and encouraged) several different stakeholder groups to work alongside each other. This has **created links and networks** that in some cases might not have been planned or anticipated at the outset, but which nonetheless offer potential for sustaining the momentum created by SIHED. It has also helped **to stimulate new thinking and increased focus** on both recruitment and retention across a wide range of stakeholders.

6.4 Any assessment of the effect of a single intervention on something as complex as career choice and the provision of learning opportunities needs to acknowledge the **wider environment and web of factors** that interrelate to generate observed outcomes. For SIHED, these primarily centre around:

- The **diverse range of structural factors** (such as family background and educational experience) **and personal experiences** of subjects, interaction with the professions and preferred location of study, which interact to influence subject and career choice for individuals. Many of these are outside the influence or control of SIHED.
- It **operated alongside other policy interventions, strategic programmes and local activities**, including recruitment activities led by HEE and individual course providers as part of their overall (or health specific) recruitment strategies.

- **The landscape in which SIHED operated has changed significantly** since it was initially conceived. The all-encompassing effects of the coronavirus pandemic, with its direct effects on the healthcare system and the indirect consequences of its mitigation measures cannot be ignored, and arguably are likely to have had a bigger influence on recruitment and retention (both positively and negatively) than the programme. In addition, the reintroduction of bursaries, Brexit and the introduction of apprenticeship schemes in some of the AHPs have also changed the landscape in terms of the offer to (and pool of) potential students.

6.5 These were clearly factors outside SIHED's influence, and it is important to keep these in mind when considering outcomes evidence.

6.6 It is also important to **maintain realistic expectations regarding expected outcomes and impacts within programme scale and timescales**. The SIHED programme could not by itself resolve all the challenges facing the four small and vulnerable professions regarding bringing newly qualified people forward or increasing wider awareness of (and interest in working in) the AHPs and nursing and midwifery roles. SIHED was one programme operating alongside others. In addition, some interventions and projects will also take years to affect course recruitment, with outcomes in some cases likely to fall far outside programme and evaluation timescales.

6.7 The factors outlined above **make attribution of outcomes to SIHED, or any of its constituent parts, particularly difficult.** SIHED operated in a complex landscape and it is likely that its different component projects and activities interlinked to help to influence student decision making and experiences; indeed, **a strength of SIHED is that it combined multiple interventions targeting different elements of both course demand and supply**.

6.8 That said, **the SIHED programme can be said to have made a positive contribution to achieving progress towards each of its four strategic objectives**, but attribution remains difficult, and not every element has been equally effective or as expected. Below we draw together a set of conclusions reflecting the identified strengths and weaknesses of the programme, before offering a set of recommendations for future activity and focus.

What has been effective?

Strategic partnerships

6.9 **The Programme Board worked well** and provided a sustained and engaged membership. Board members also provided individual support and resource to some key SIHED priorities and actions.

6.10 **The leadership of the agenda has morphed over the SIHED delivery period**. In particular, the role of HEE within the partnership evolved and increased over time as SIHED progressed, which other stakeholders welcomed. HEE has a workstream associated with

AHPs that looks at all aspects of recruitment, including new recruits, returners and apprenticeships. Their closer engagement with the professional bodies and higher education institutions is therefore to be strongly welcomed, as they bring capacity and can sustain learning.

6.11 The plans outlined in HEE's Interim People Plan regarding refreshing the NHS Health Careers website complemented SIHED objectives 1 and 2,[58] while NHS Careers welcomed the capacity and resources that the outreach officers brought to the market. HEE's People Plan 2020-21 continues to emphasise the importance of recruitment to NMAH roles, as well as widening participation and diversity among the workforce—all of which aligns with (and builds on) SIHED aims and activities.

Working with the professional bodies

6.12 **Partnership working and collaboration** have been at the heart of the programme, including **bringing the four small and specialist professional bodies together**. They found the joint working on the issues of student recruitment and retention valuable:

- The smaller bodies in particular have limited resources and would not have been able to support this type of activity without the SIHED programme
- The partnership gave them a voice; in other circumstances they find they are the smallest voices in a large medical and healthcare field among 350 NHS careers, and even when just AHPs are considered.

6.13 While they valued working together as part of SIHED and appreciated the economies of scale, the professions were also keen to assert their professional status and their difference. For example, the engineering and problem solving skills associated with P&O are different to the clinical, technical and communication skills required of therapeutic radiographers; other professionals are more likely to find employment opportunities in private clinics or practice than in the NHS. **Navigating a path whereby they could use the capacity and resources generated by SIHED and tailor it to their own specific needs and requirements has been key, and some have found this more achievable than others.**

Mobilising members to raise awareness

6.14 Mobilisation has taken different forms in each of the four small and specialist subjects, but was observed across them all. For example, engaging the interest of private sector potential placement providers for podiatry and P&O students was a key feature of the programme, as was the encouragement of orthoptists to sign up as career ambassadors to give talks in schools and to join a network to offer work shadowing placements.

[58] Interim NHS People Plan www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan_June2019.pdf

6.15 This **mobilisation and engagement of the workforce will be key in sustaining SIHED's legacy**; practitioners have engaging stories to tell and are vital to supporting students in their journeys. The joint working with Inspiring the Future and other career providers and networks offers great potential, and it will be important to understand to what extent practitioner involvement is sustained.

6.16 Placements continue to form an essential part of AHP training, and these rely on practitioners being willing and able to successfully accommodate students within their workplace.

6.17 Linked to both of these, it will be important to make it clear to the workforce 'what's in it for you,' emphasising why their involvement is of benefit to both students (who are their colleagues of the future), but also to their own practice or personal development and fulfilment. **Capturing insights from professionals taking on these roles, and sharing these more widely across the profession, could perhaps help with this and encourage others to engage.**

Harnessing digital technology

6.18 **SIHED used digital tools in several ways to amplify the reach of the programme**, to go beyond one to one interactions and support one to many, or indeed many to many interactions. Some of this was necessitated and expedited by the coronavirus pandemic, whereas other developments were progressed specifically to maximise reach and impact. Examples included:

- Campaign materials and the *ISeeTheDifference* website, which acted as a hub for digital communication and a library for key resources
- Virtual networks of practitioners supported through communications apps including Microsoft Teams and Facebook to share learning, keep up to date with key events or provide peer support and encouragement
- Digital resources for use by school and college teachers (such as lesson plans), or careers leaders and potential applicants (such as webinars and recordings)
- Innovative alternatives to real world work experience or work shadowing, using simulated experiences and virtual reality headsets.

6.19 This was made **possible because of the foundations of work laid by the SIHED programme, and the network of people with a commitment to the agenda**. These offer great potential for sustaining SIHED's reach longer term, but maintenance and review will be vital to ensure outputs do not become out of date, and to continue to explore their effect.

6.20 There may also be **potential for expansion**; for example, of simulation based alternatives to cut down placements or clinical practice, particularly for some students early in their courses. The Royal Colleges and universities have key roles to play in both sharing learning

and harnessing the potential of evolving technologies; continuing the collaborative nature of SIHED may prove key here.

Networking, collaboration and open communication

6.21 The programme was thought to have been **well managed with good and clear communication at all levels.**

6.22 The programme was set up to build new (and strengthen existing) networks. It achieved this, at least in part, through the design of the Challenge Funds that required collaborative working, and the networking events that were well attended both online and in person. There was impetus given to dialogue by the creation of the partnership and the campaign.

6.23 The **application of new thinking to stubborn problems** was appreciated by those closely involved in the programme. This included bringing in new marketing expertise to bring different ideas and a new way of doing things, and connecting people across different parts of the same sector to view issues from a different perspective (including, for example, reviewing the issue of placements from a student or employer perspective).

6.24 There was a willingness and desire to learn from others, both at university and at profession levels. **SIHED delivered messages through a variety of formats; this diversity of format helped to engage a wide range of different stakeholders**, and fund recipients actively contributed by sharing their insights.

6.25 Initial research into recruitment patterns across the AHPs, and subsequent investigations into mature and male student decision making, have **helped to create a dialogue about vital and timely issues that are bigger than the SIHED programme** and have important implications for NMAH recruitment more broadly. In addition, Challenge Fund projects that have included the student voice have found their new insights illuminating regarding recruitment and retention.

Sustainability considered and built into plans

6.26 The final few months of the programme were focused on two things. The first was building longevity and sustainability, and the second was providing mitigation measures in the context of the COVID-19 pandemic. With regards to the former, plans were being considered for capturing legacy effects from the end of 2019, and that led outreach officers to have plans for moving their work to the creation of digital resources. Similarly, plans for continuation of the campaign and its core objectives beyond March 2021 were developed and put in place during its final year to generate continued activity and to embed some of its lessons in 2021-22.

What could be improved?

Sharing learning between and within course providers

6.27 The higher education environment remains uncertain. Some institutions have had (or still do have) an academic staff recruitment freeze and are not replacing posts as staff leave or retire, because of concerns about student recruitment and longer-term course viability. There is a risk that this becomes a **self-fulfilling prophecy; if the quality and/or capacity of teaching diminishes, student demand is likely to also fall**. In turn, when or if teaching posts are recruited to, they may be less desirable for potential applicants if courses are less popular or seen to be vulnerable. While we have no evidence regarding this latter point, the situation creates tension in the system. These **risks are likely exacerbated for those courses which are less profitable or more costly for institutions to run, further risking course viability and sustainability, with potentially serious implications for the future of the professions.**

6.28 The **competitive higher education landscape has also posed some challenges for Challenge Fund initiatives**, where lecturers and course leaders have appreciated the opportunity to share practice, but have experienced difficulties at an institutional level regarding branding requirements and being able to share resources more widely. This also limits uptake; organisations will be unwilling and unable to utilise resources featuring other institutions' branding. Challenge Fund projects also reported on the practical challenges of securing engagement to collaborate from colleagues in other institutions, because of the need to manage time commitments between institutions, requiring time from colleagues that might not be fully recompensed, and the additional stresses of coronavirus on people's time.

6.29 Some Challenge Fund leaders have appreciated the opportunity to work with their peers. Their time has been covered by SIHED, and there was a concern that future development might be hampered through lack of resource. In addition, the same people have said **how difficult it can be to leverage marketing support from within their own institutions because they have relatively few students,** and therefore on a per capita basis can leverage less support than other larger (but possibly more popular) courses. All of this poses risks to the future of the courses and professions. These are issues which are bigger than the SIHED programme, but affect its outcomes and legacy.

Alignment with other campaigns regarding messaging and timing

6.30 The campaign has reached large numbers of young people and potential students that otherwise might not have heard of the professions or considered them as a potential career. It has also raised the profile of AHPs within the context of the 350 NHS careers. But its resourcing relative to other concurrent NHS campaigns was modest, and this is reflected in the evidence around campaign impact. The idea behind the campaign and its focus was praised, and it was seen as a useful resource for those young people who recalled viewing it.

However, it does not appear to have been a key influencing factor in many students' decision making.

6.31 In this respect, the campaign should be seen as complementary to the other NHS recruitment campaigns, rather than an alternative. We suggest that moving forwards, efforts to align the marketing activities of NHS Careers, HEE, the professional bodies and SIHED, either through sharing resources, referral or sequencing campaigns and routing navigation, could usefully be pursued, to maximise the 'sum of the parts' rather than running similar but differently targeted campaigns and activities largely in isolation from one another. The collaborative nature of SIHED and active involvement by stakeholders including HEE offers real potential to ensure further alignment and coordination of activity. The campaign offers a smaller but targeted and in depth lens on the four small and specialist AHPs, which otherwise risk being hidden among wider NMAH recruitment efforts.

6.32 The challenge moving forwards will be to sustain the campaign in an active way, with continuing promotion and updated stories, examples and course information, without the resourcing, project management and marketing expertise allocated to SIHED. In addition, managing the balance between national generic campaigns and the specific and special nature of each of the smaller AHPs will be key.

Connecting with career networks

6.33 SIHED has links with NHS Careers and this is something which could be further strengthened through alignment with their campaigns and shared content. **Other professional careers networks could prove useful mechanisms to engage and manage wider networks of professionals.** The outreach officers have made links with Inspiring the Future, which helps broker relationships between schools and colleges that want careers support with professionals willing to offer it. In addition, there are other careers guidance organisations, including the Careers and Enterprise Company and STEM Ambassadors, with the former offering ways to volunteer in schools and colleges anywhere, and thus offering potential to reach those not previously considering a healthcare related career. The latter offers a dedicated focus on science and technology focused opportunities, which may help to raise the profile among those for whom the engineering and scientific element of the AHPs may not have been immediately obvious. Connecting with these networks could help amplify future work by extending their reach.

Sharing learning across professions

6.34 **Challenge Fund project leads cited examples of good practice being shared and adopted more widely within their organisations, by other courses and departments**. This is encouraging and indicates that SIHED has helped to generate new insights, provided resourcing and scope to test new approaches (which in many cases would not have happened otherwise), and has led to changes in practice.

6.35 However, this **appears to have (so far) happened within organisations, rather than across different institutions or at an AHP/four small AHPs level**. This is perhaps to be expected, given the branding barriers outlined above, and may indicate that SIHED's effects have reached outside NMAH courses into other disciplines. However, it does pose questions as **to what extent the Challenge Fund projects can be said to have identified and encouraged the uptake of good practice across the four small specialist professions**, as opposed to leading to specific changes within specific institutions. Following up with Challenge Fund projects over the coming months will prove key in helping to understand this.

6.36 The **research reports** have been made available on the Office for Students' website and have created interest in and a focus on issues associated with mature students and male students. There is **limited evidence to date, however, regarding their dissemination** and the extent to which these research pieces have made people think about these issues, or the **extent to which their recommendations have been actioned and practice influenced.**

Future plans

6.37 SIHED activity does not cease when programme funding ends in March 2021. **The SIHED programme will continue in a different form for 2021-22.** It will be managed by CoDH, on behalf of the Office for Students, and will continue the campaign, maintenance of the *ISeeTheDifference* website and the dissemination of the Challenge Fund projects. There is optimism around sustaining SIHED campaign activities, and programme stakeholders are pleased that CoDH has agreed to take on this role.

6.38 While Challenge Fund financing through the programme has ended, individual **Challenge Fund leaders have suggested that they would like to continue to develop their ideas and practice** around student recruitment and retention. Partly this is to pick up where they had to leave off as a result of the pandemic, and partly to share learning and further strengthen their courses. Some already have commenced spread activities; others report plans and desire to do so, both within their own organisations and to share learning more widely.

6.39 Each **professional body** we interviewed had plans for continuing to work with their members to connect with potential students, support efforts to reform placements, and use social media and their websites to inform people about who they are and what they do. They were **very supportive and committed to the SIHED programme as a way to work with others** and to bring resources and expertise that would not have been possible otherwise.

6.40 The recommendations in the next section are therefore made in the context of there being a final year of activity to capture learning, embed practice, collaborate and capture the legacy of the SIHED programme.

Recommendations

Raising awareness about the wider AHPs and the four small and specialist subjects

Continue the communication campaign

6.41 The national campaign, outreach officers, Challenge Fund activities and the seconded posts for placements and work experience have all generated sets of documents for recruitment, inspiration, information and good practise learning, to create a SIHED legacy. Such materials can quickly become dated, and therefore there is a need to ensure they are shared, adopted and used as much (and as widely) as possible in the short term, to ensure maximum value.

- **Recommendation 1**: **All materials be made available to members of the AHPs via their professional bodies.** Materials produced by SIHED funding could perhaps be debranded so that they can be adopted under Creative Commons licencing by any university marketing teams. This may offer one route through which Challenge Fund outputs could be shared across providers and AHPs, building on the more targeted learning share activities undertaken to date.

Align with national campaigns

6.42 SIHED operated alongside other recruitment campaigns, including the far larger 'We are the NHS' campaign. SIHED's campaign offered focus on the smaller AHPs and their unique features, but the multiple different campaigns and messages targeted at potential applicants may have at times seemed confusing or not very joined up.

- **Recommendation 2: Future campaigns should be planned and aligned with other campaigns and promotion activity**. This is to ensure that AHPs can follow up on any interest generated through wider recruitment campaigns with their own specific information and priorities. The close collaboration with HEE through the SIHED programme is likely to offer opportunities for improved alignment going forwards.

Connect the connectors

6.43 The professional bodies create a connection with AHP members; admissions teams at higher education providers connect with potential students; and careers organisations connect with all schools and colleges. Continued work to connect these groups should create synergies across the market.

- **Recommendation 3**: **Encourage the campaign to connect with other career networks to reach careers advisers and STEM ambassadors.** This will help extend the reach of the campaign to people who advise and support young people as they make their career decisions.

Target outreach work

6.44 Sustaining the AHPs is vital to meet demand for healthcare within a multidisciplinary workforce. Even with dedicated outreach officers and harnessing the reach of digital forms of communication, the extent to which SIHED activity by itself directly shaped the choices of potential students will have been modest, because of the multiple influencing factors and wider context. However, the programme has seen how targeted, energetic and proactive efforts to engage underrepresented groups can create more interest and more applications.

- **Recommendation 4**: **Resource targeted outreach work**. It is important that active outreach work, through the professional bodies and with university widening participation teams, is carefully targeted. Targeting criteria could perhaps include potential applicants in geographical locations with actual or anticipated skills shortages, underrepresented groups within the workforce, or areas within a realistic 'travel to learn' radius of learning opportunities.

Listen and learn

6.45 SIHED has facilitated a range of networking experiences and sharing events that have been well attended by course providers, both online and face to face. The programme has encouraged Challenge Fund leaders to publish their work and share both within their institutions and with their wider networks. There have already been a few examples of changed practices within institutions.

- **Recommendation 5: Continue evaluation and self reflection activities to capture the ongoing effects on the delivery of the programme, and to share learning emerging from the programme.** This includes capturing learning and outcomes insights from Challenge Fund projects and to monitor recruitment and retention levels in the four small courses, as well as drivers for student decision making. It also includes encouraging professional bodies to maintain their networks of admissions tutors and researchers within their professions.

Strengthening and diversifying provision

Prioritise placements

6.46 The SIHED programme has highlighted the vital role of employers and the qualified workforce as placement providers, educators and champions for their profession. It has challenged perceived barriers to participation for private sector employers, and highlighted the role of trainers in real world settings in supporting student learning and inspiring and enthusing the future workforce. This is key for both attracting recruits in the first place, and retaining those already on courses.

- **Recommendation 6**: **Course providers and professional bodies should explore and embed good practice in support for placement supervisors, in both public and private settings.** Professional bodies should consider how to recognise and celebrate individuals who make a difference to students, through student nominated awards for 'placement supervisor of the year,' for example, and further work to professionalise the role of the trainer.

6.47 While recognising how busy practitioners are, it is also important to ensure that students make good progress in their learning while on placement. Placement supervisors therefore may benefit from training or support, perhaps as part of their own required professional development, that focuses on their role as educator alongside that of clinical supervisor.

- **Recommendation 7: Create opportunities for placement supervisors to network and share learning.** SIHED has shown that practitioners can belong to different subgroups such as ambassadors for their profession in schools, or work shadowing lead contacts. There may therefore be opportunities for them to reflect on good practice, share their experiences and encourage others.

Explore potential role of integrated care systems

6.48 The roll out of integrated care systems (ICSs) remains an NHS England priority, bringing together local commissioners and providers across local subregional population footprints to improve the coordination of local health and social care services. AHPs into Action[59] highlights the potential for AHPs to support ICS agendas, including their potential role in system transformation, firmly placing AHPs at the heart of modern healthcare and the delivery of strategic priorities. ICSs may offer potential to support the AHPs, by helping to recruit provider organisations to offer placements for AHP students.

- **Recommendation 8: Work with partners to explore the potential role of ICSs in supporting placement provision.** Partners involved in the SIHED programme may wish to focus on exploring the potential for working with an ICS to support placement provider recruitment and encourage collaboration with local course providers in planning provision and alignment with the curriculum. While recognising that this falls outside the control of the Office for Students, and would likely require involvement by HEE and/or NHS England, this could help to build on the other placement focused developments that have taken place within SIHED, and generate learning for others.

Use simulation

6.49 The programme has focused on the role of simulation in both recruitment and retention. Simulation can provide a satisfactory alternative or addition to placements, and in particular might offer great potential in the earlier stages of learning.

[59] www.england.nhs.uk/wp-content/uploads/2017/01/ahp-action-transform-hlth.pdf

- **Recommendation 9**: **Continue to embed simulation and use of new technologies in providing practical learning opportunities.** Exploring the continued potential and actual role of simulation will likely help to minimise the burden associated with placements, and provide an alternative and engaging learning format for students.

Seek economies of scale

6.50 The small and specialist subjects are arguably in a stronger position in 2021 than they were at the start of the programme. However, when student numbers alone are considered, they remain smaller than they were five years ago. The situation is better than it has been in the intervening years but remains worse than it was, and there are persistent risks, as shown by the closure of a small and specialist AHP course during the SIHED programme.

6.51 There are also potential external risks; recruitment of 2020 graduates was reported via consultation to be lower than in previous years, which arguably weakens the case for studying the professions. Similarly, the impacts of the coronavirus pandemic on student experience, longer term recruitment into healthcare courses, student attainment and the wider finances of the higher education sector have all yet to be fully realised. These trends may be felt more acutely by the four small and specialist subjects, but they are similar to those experienced across the AHPs. The risks of course closures have not gone away, despite the best efforts of SIHED and the stakeholders involved.

- **Recommendation 10: Encourage closer collaboration between course providers, regulators and professional bodies.** Joint working between course providers and the professional bodies is likely to prove key. This is with a view to finding collaborative ways of working that strengthen the financial viability of all courses, seek economies of scale, and minimise duplication of effort across teaching and learning systems.

Explore new models of provision

6.52 The four small and specialist subjects have seen some new apprenticeship based opportunities introduced, but these have not been of sufficient scale to have significantly changed the landscape. However, in other parts of the healthcare sector, apprenticeships are providing significant new opportunities for students. Apprenticeship models may risk increasing competition for potential course applicants; however, from a workforce perspective they offer opportunities to expand the qualified workforce and help to meet increasing demand for AHPs.

- **Recommendation 11**: **SIHED stakeholders should continue to discuss apprenticeship pilots with NHS employers and private sector providers.** This is with a view to maximising opportunities created by the application of the apprenticeship levy alongside bursaries.

Abbreviations

Abbreviation	Meaning
AHP	Allied health professional
AHPF	Allied Health Professions Federation
BIOS	British and Irish Orthoptic Society
CoP	College of Podiatry
CoDH	Council of Deans of Health
HCPC	Health and Care Professions Council
HEE	Health Education England
HEFCE	Higher Education Funding Council for England
HESA	Higher Education Statistics Agency
ICS	Integrated care system
NHS	National Health Service
NMAH	Nursing, midwifery and allied health
PARE	Practice Assessment Record and Evaluation
P&O	Prosthetics and orthotics
SIHED	Strategic Interventions in Health Education Disciplines
UCAS	Universities and Colleges Admissions Service

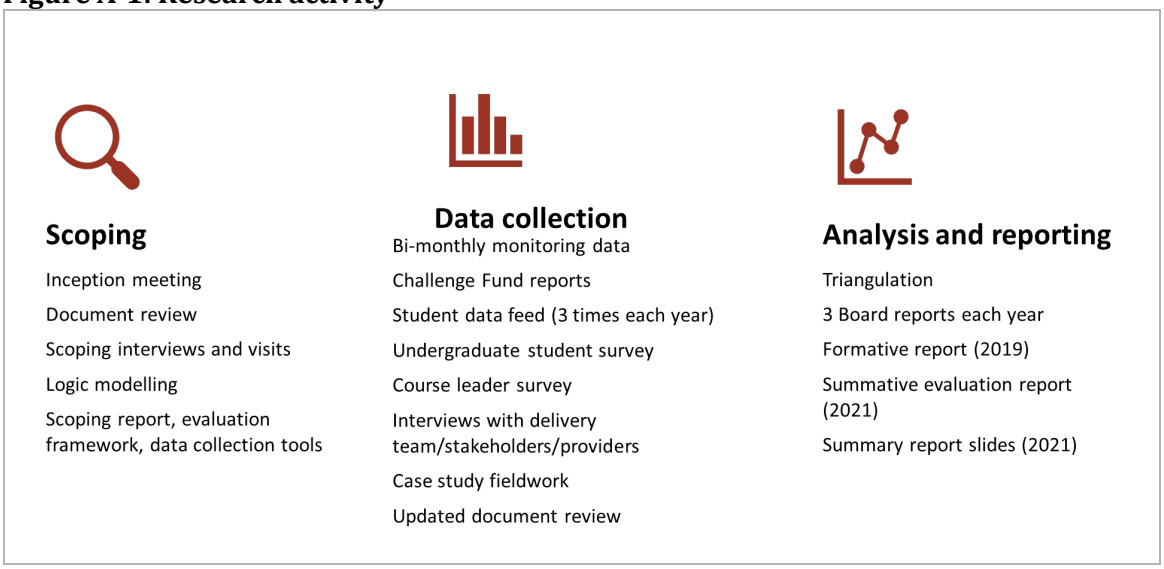
Source: SQW

Annex A: Methodology

Introduction

A.1 The evaluation research was conducted over a period of 2.5 years to provide both formative and summative evaluation insights. Within this period there were three cycles of research activity as summarised in Figure A-1.

Figure A-1: Research activity



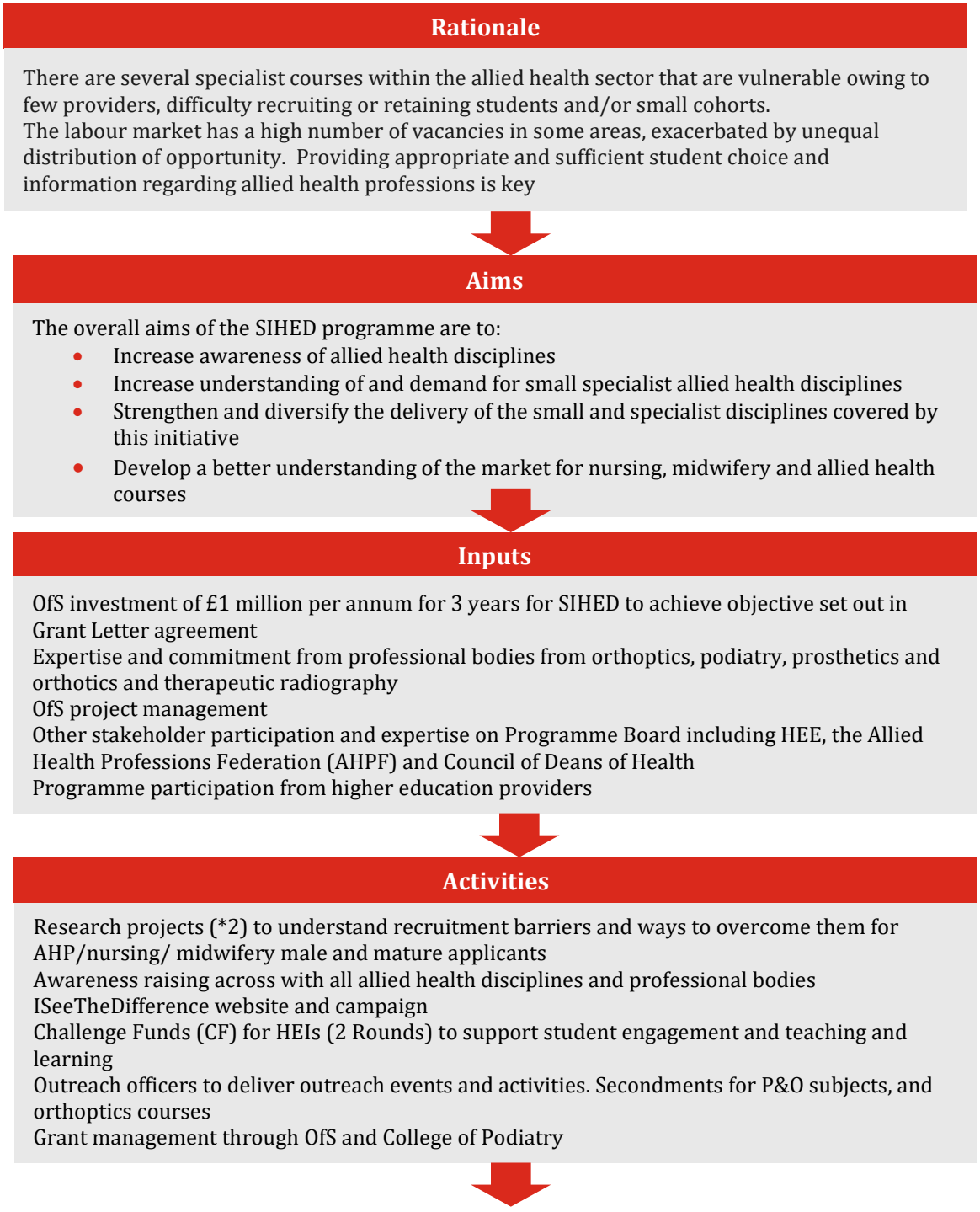
Source: SQW

Scoping

A.2 A scoping report (November 2018) outlined the logic model (Figure A-2) and a set of research questions that were developed following a series of interviews and document review that expanded the following core evaluation questions:

- What activities have been delivered to date, compared to expectations?
- How effectively is the programme being delivered?
- What outcomes and impacts have been achieved to date?
- How are outcomes and impacts achieved?
- What is the contribution of the programme relative to other factors?
- What are the key lessons?

Figure A-2: SIHED logic model



Outputs

2 million people reached within the year
25,000 unique individuals access information via ISeeTheDifference
16,250 young people, school and college teachers engaged at 250 events
450 serious conversations with potential applicants
15% increase in applications with 10% increase in enrolments
All CF to present and attend networking meetings, dissemination events, research conferences
32 CF publications
Practitioners supporting more work shadowing experiences
67 new active Inspiring the Future members and 10% attend an event

Outcomes

For current and potential learners
- More people applying for courses at all stages of the recruitment process
- Better information for prospective students on allied health disciplines and funding for higher education studies

For learning providers
- Increasing awareness and take up of the disciplines to secure the sustainability of provision
- Increased retention in therapeutic radiography
- Innovative recruitment and delivery approaches from higher education providers

For professional bodies and policy makers
- Widened access and participation in AHPs
- Greater interaction between professions
- Access to evidence to inform policy

Source: SQW

Data collection

A.3 Data collection methods varied in relation to the different strands of SIHED work. Impact data focused on student application and enrolment numbers. Outcome data was captured through reflections from participating stakeholders, while output data was derived from monitoring information provided by the project management and delivery teams. In summary this data was collected in the following ways:

- Challenge Fund project leaders completed a reflection feedback form at interim stage and on completion of their work
- SIHED marketing specialists provided website and social media analytics data
- Course providers were asked for monitoring data three times a year
- Interviews with outreach officers and secondees delivering placement and work experience projects
- Commissioned researchers (for male and mature student recruitment) were interviewed

- Attendance and observation at SIHED events in London (October 2018, September 2019), Liverpool (April 2019) and virtually during 2020
- Outreach officers and those associated with student recruitment provided monitoring reports of their activity to the SIHED programme manager bimonthly
- Key stakeholder interviews were undertaken at scoping and again in autumn 2020 (sample included the Office for Students, four professional bodies, CoDH, Health Education England and NHS Careers, Inspiring the Future)
- Inclusion of HESES data from public access sources
- SIHED programme manager provided a report of events and networking activities three times a year to Programme Board meetings.

Reports

A.4 The following reports have been prepared during the course of this evaluation:

- Scoping report (February 2019): included a summary of research progress to date, an overview of the SIHED programme with associated logic model, a set of research questions, methods for data collection and a risk register.
- Formative report (November 2019) provided an interim update and evaluative assessment of programme progress for the Programme Board and management team.
- Student data feed working papers to each Programme Board based on returns from course leaders about applications, offers and enrolments three times annually.
- Student undergraduate survey key findings working papers in 2019 and 2020.

Annex B: Challenge Fund project summaries

Table B-1: Summary of Round One SIHED Challenge Fund projects and activities

Lead organisation | Project title	Funding (£)	Partners	Objectives	Actions
Birmingham City University Radiotherapy escape rooms to improve retention	£24,696	N/A	The aim was to improve retention of students through the design, creation and evaluation of innovative escape room events for the development of communication, team working and non-technical skills.	Escape room designed and held with radiotherapy students Escape room designed and held with clinical colleagues Evaluation of escape room activities.
University of Brighton Experiencing podiatry—developing an online and hands on approach	£24,418	• STEM Sussex • Sussex College • University of Southampton • UoB Widening Participation team	The aim was to facilitate engagement with a wider range of pupils who may not have considered podiatry as a career option.	The project developed a web based package 'Podiatry Insight—A Week in the Life of a Podiatry Student' and hands on 'pop-up podiatry school.'
University of Liverpool Reducing clinical placement pressures through simulation	£29,720	VERTUAL	Aim was to develop simulation activities capable of reducing the overall length of clinical placement required for radiotherapy students, thereby reducing the training burden on clinical providers while maintaining quality learner experience.	Simulation resources created and deployed with students Measurement of the impacts of simulation Project outcomes disseminated.
University of Salford	£60,000	• University of Brighton	The project aimed to explore alternative placement	Key actions included mapping

Lead organisation | Project title	Funding (£)	Partners	Objectives	Actions
Podiatry placement project— Supporting the future of podiatry education		• Birmingham Metropolitan College • University of East London	opportunities for podiatry courses in the context of increasing difficulties in securing sufficient placements for students.	existing podiatry placement models and barriers to accessing placements, as well as alternative AHP placement models, and piloting placements at private practice sites with two higher education providers.
Sheffield Hallam University Male therapeutic radiographers: barriers to higher education institute recruitment	£ 29,831	N/A	The overall aim of the project was to explore the factors influencing the recruitment of male students onto the BSc (Hons) Radiotherapy and Oncology programme at Sheffield Hallam University.	Key activities included focus groups with male therapeutic radiography students, a review of existing recruitment resources, and the design and piloting of new resources.
University of The West of England Improving retention in radiotherapy. Delivering an intervention to enable clinical supervisors to support and nurture students to achieve their full potential	£57,066	• City, University of London • School of Health Sciences	The aim was to increase retention by engaging with radiotherapy clinical supervisors to foster an inclusive, nurturing, supportive clinical training environment for students.	Study days with clinical supervisors for UWE and CUoL placements. Online toolkit with guidance on identifying placement students in crisis and signposting them to support. Evaluation and dissemination of results.

Source: SQW review of project applications, interim and final reports

Table B-2: Summary of Round Two SIHED Challenge Fund projects

Lead organisation | Project title	Funding (£)	Partners	Objectives	Actions
University of Chester Coordinated support to help students successfully reapply to healthcare disciplines	£43,500	• Health and Education Cooperative • STPs • University of Salford	By developing a targeted online tool, the project aimed to bridge the knowledge gap between unsuccessful applicants, prospective employers and higher education providers, through targeted information advice and guidance resulting in a better fit between applicant and course.	• Online career resource tool developed, piloted and evaluated.
Coventry University HealthPro challenge: using simulation and gamification interventions to support mature, male career changes into the health professions[60]	£50,000	• Coventry and Warwickshire Strategic Transformation Partnership • Coventry University Service User and Carers Group	To address gender inequalities in allied health disciplines and to target men in non-health careers facing uncertainty in their employment—such as, risk of redundancy or rebalance and restructuring.	• Social media campaign to encourage interest in health careers and boost traffic to HealthPro website. • Creation of marketing materials (such as 16 videos) promoting male health careers. • Attendance at recruitment events.
University of East London CUREate: Health as an Arts career pathway	£50,000	• Bucks New University • City University London • University of Greenwich	This programme, delivered in tandem with students in health and the arts across London, sought to raise	• Codevelop a framework and resources for engagement • Promote website and related

[60] Previously named 'Interventions to raise awareness of health careers among men considering a career change, including taster days using clinical simulation' but changed owing to the implications of COVID-19 on delivery.

Lead organisation | Project title	Funding (£)	Partners	Objectives	Actions
		• University of Hertfordshire • London South Bank University • Middlesex University London • University of West London • Kingston University	awareness of and affinity with health professions across nursing and allied health, with a view to encouraging final year arts students to consider pursuing a postgraduate or second health-related degree.	social media presence • Co-deliver events/activities in university settings.
Huddersfield Student-run, community engaged health initiative	£50,000	Local clinical commissioning group/transformative care group, all the local NHS and some local industry partners	1) Develop health activities that target hard to reach and underserved community groups. 2) Establish a coordinated curriculum that provides innovative transdisciplinary educational opportunities for health students and promotes engagement with the broader public.	• Analysis of community healthcare needs • Recruitment of students to volunteer at events • University student-led and community outreach student-led clinics.
University of Hull Alternative route into health and social care	£49,808	N/A	'New Routes into Health and Social Care' initiative aimed to encourage mature students from low income demography to be attracted to health and social care as a valid career destination, with attainable entry routes.	Recruitment to and delivery of a new blended delivery pathway (out-of-hours) for an existing foundation programme.

Lead organisation | Project title	Funding (£)	Partners	Objectives	Actions
University of Leeds Headstart into healthcare	£46,925	• Leeds Health and Care Partnership • Leeds and York Partnership Foundation Trust (LYPFT)	Increase applications from male students across all ethnic backgrounds to adult and mental health nursing and cardiac physiology undergraduate programmes.	Production of a virtual reality (VR) film. VR workshops with students, a virtual summer school, and e-mentoring programme. Develop bespoke Headstart into Healthcare website.
University of Liverpool Reducing clinical training burden through integrated simulation placements for students in allied health disciplines	£50,000	• Vertual • Shaderware • ROMPA	Evaluate the feasibility of embedding integrated simulated placements in a range of allied health disciplines as well as determine how this can best be used to reduce clinical training burden and increase cohort sizes.	Design and implement simulated placements across all allied health courses at the University of Liverpool. Gather anonymised clinical data to support simulated placements. Conduct Delphi consensus study and disseminate findings.
University of Nottingham[61] Summer school: Supporting underrepresented students transitioning to university	£2,050[62]	N/A	Summer school for offer holders to increase student engagement for underrepresented groups in nursing, midwifery, physiotherapy and sport rehabilitation.	Identify existing resources to include in online summer school portal. Develop and deliver online and in person events.

[61]The University of Nottingham's project was halted early owing to coronavirus restrictions preventing delivery of a summer school. A range of alternatives were considered, but none were viable.

[62] The project was originally awarded £8,200 but received only £2,050 owing to coronavirus related cancellation.

Lead organisation | Project title	Funding (£)	Partners	Objectives	Actions
Sheffield Hallam University Exploring the role of preadmission work shadowing and multimedia resources in therapeutic radiography, diagnostic radiography and operating department practice[63]	£40,214[64]	N/A	Using video and simulations at recruitment events to help prospective students make the right study choices between diagnostic radiography, therapeutic radiography and operating department practice—an alternative to work shadowing as a way to find out about these roles.	Literature and website review. Focus groups with first year students and practitioners/placement managers. National survey of providers. Creating 'a day in the life of' videos for applicants (filming suspended because of coronavirus).
University of Wolverhampton Preparing to Succeed (P2S) programme	£49,843	• City of Wolverhampton College • Walsall College • Halesowen College • Sandwell College • Telford College • Adult Education Wolverhampton	Through a summer school programme, this project aimed to support mature and/or male students to overcome key challenges associated with accessing preregistration nursing, midwifery and allied health courses.	A summer school programme for mature students/male students aged 18+ focused on developing the learner and validating a sense of belonging in higher education.

Source: SQW review of project applications, interim and final reports

[63] Previously named 'Supporting applicant choices: exploring the role of preadmission work shadowing and multimedia resources in therapeutic radiography, diagnostic radiography and operating department practice' but changed owing to the implications of COVID-19 on delivery.

[64] The project was originally awarded £44,975, but underspent and received £40,214.

Annex C: SIHED outreach officer activity

C.1 Annex C presents an overview of activity undertaken by the SIHED outreach officers[65] between January 2019 and December 2020. A monitoring form was introduced to the officers in December 2018 to capture details of activities, plans and risks on a monthly basis. The form was subsequently revised in July 2019, and again in May 2020 to account for changes to the officers' activity as they responded to the effects of coronavirus.

C.2 Since January 2019 the officers attended/supported 470 events; of these, 202 were attended by more than one SIHED outreach officer. The events included attending individual schools to support their careers programmes, as well as having stands at major skills or careers events (such as, Big Bang Fair and National Careers Guidance Conference London) which are attended by relatively large numbers of young people, teachers and parents. Attendances at events have been sustained throughout the reporting period, with an average of 20 events attended/supported per month (see Table C-1).

Table C-1: Number of events attended

	January to June 2019	July to December 2019	January to June 2020	July to December 2020	Total
Total number of organisations where events (including virtual events) have been attended/supported	117	142	114	87	**460**
Total number of events (including virtual events) attended/supported	118	143	115	94	**470**
Number of events (including virtual events) where more than one SIHED officer attended	60	46	35	61	**202**

Source: SQW analysis of SIHED officer monitoring returns

C.3 Table C-2 shows the number of encounters with young people by officers during events. Between January 2019 and December 2020, officers met over 25,000 young people; the majority of whom were in Years 12 (29%) and Year 11 (18%). Over 1,400 encounters with young people were considered 'serious enquiries' about AHPs/qualifications, where they

[65] The programme initially recruited five outreach officers, of these, one left at the end of March 2019, and their replacement started July 2019. An AHP wide officer started in July 2019, taking the total number of officers to six. In October/November, two officers left, and these were replaced in February 2020. During the latter half of 2020, three officers left, and one was replaced in October 2020, leaving four officers as the programme finished in December 2020.

asked questions or otherwise demonstrated serious interest. After the lockdowns associated with coronavirus took effect, encounters became virtual. The number of serious enquiries reduced as one to one conversations were not facilitated during or after webinars. Outreach officers were not expected to report on these from April 2020.

Table C-2: Encounters with young people at events, by age and type of encounter

	January to June 2019	July to December 2019	January to June 2020	July to December 2020	Total
Total encounters	5,557	11,291	6,329	1,980	**25,157**
Year 7-9	1,313	1,654	855	0	3,822
Year 10	1,085	1,850	1,117	65	4,117
Year 11	468	2,150	1,515	397	4,530
Year 12	2,001	2,653	1,548	1,094	7,296
Year 13	690	518	492	125	1,825
Unspecified*	-	2,466	801	299	3,566
Serious enquiries	**595**	**374**	**452**	**17**	**1,437**

Source: SQW analysis of SIHED Officer monitoring returns (n=number of returns)
**Note: Not included in original monitoring form until July 2019.*

C.4 80 mature students were engaged between January 2019 and December 2020, with 18 serious enquiries recorded. The highest proportion were engaged either between July and December 2019 (38%) or January and June 2020 (36%).

C.5 There were also a substantial number of encounters with adults, namely educational professionals (55% of all encounters with adults), parents (20%) and others (24%). The period January to June 2019 included a large number of encounters with educational professionals, accounting for almost half of total encounters with such professionals (see Table C-3). This was driven by attendance at events such as the National Careers Guidance Conference in London.

Table C-3: Encounters with mature students and adults

	January to June 2019	July to December 2019	January to June 2020	July to December 2020	Total
Mature students					
Number of potential mature students engaged through the activity	1	30	29	20	80
Mature students with serious enquiries	0	11	6	1	18
Adults					
Number of encounters with educational professionals	705	495	271	75	1,546
Number of encounters with parents	113	285	161	5	564
Number of encounters with others	337	43	206	90	676

Source: SQW analysis of SIHED officer monitoring returns.

Annex D: Student applications and enrolments

D.1 SQW worked with the Office for Students and the SIHED programme manager to design a two sided information request form, distributed by SQW to course leaders for programmes in orthoptics, podiatry, therapeutic radiography, and prosthetics and orthotics. Data was collected in 2019 and 2020 in January, May and September, and again in January 2021.

D.2 This section compares:

- **Application data collected in January 2021** with January data from the three previous years (2020-2018)
- **Offers, acceptances and enrolment data collected in September 2020** with September data from 2019 and 2018.[66]

D.3 There are 19 course provider institutions in England offering 21 preregistration programmes in the four professional areas. Table D-1 shows the total number of returns or information received by SQW for each data collection.

Table D-1: Total number of data returns per collection

	January	May	September
2019	21	19	18
2020	20	20	18
2021	16	n/a	n/a

Source: SQW.

Applications

D.4 Comparing January 2021 with January 2018, Table D-2 shows:

- Applications for places at the two orthoptics providers have increased by 39%, and applications for the prosthetics and orthotics course increased by 25%.
- Podiatry has attracted more applicants in 2021 (430 applicants to six courses in 2021 compared with 408 applicants to nine courses in 2020). In January 2020, the courses with returns missing in 2021 were responsible for 28% (114) of all applications that year.
- Over the whole period, applications for therapeutic radiography have increased by 31%. This proportion would be higher if a complete return was received in September 2020;

[66] It is important to note when interpreting the data that the returns for each year came from a different number of providers, with the number of providers included in each table as the 'n' number. As a result, care should be taken when interpreting or comparing the figures between years.

in January 2020 the course with the return missing in 2021 was responsible for 21% (193) of all applications.

Table D-2: Student application by profession, January 2018-21

	Podiatry (9 providers)	Therapeutic radiography (9 providers)	Prosthetics & orthotics (1 provider)	Orthoptics (2 providers)
Total number of full time applicants January 2021	430 (n=6)	957 (n=7)	80 (n=1)	427 (n=2)
Total number of full time applicants January 2020	408 (n=9)	930 (n=8*)	68 (n=1)	478 (n=2)
Total number of full time applicants January 2019	417 (n=9)	747 (n=9)	72 (n=1)	371 (n=2)
Total number of full time applicants January 2018	345 (n=9)	730 (n=9)	64 (n=1)	307 (n=2)
% change 2018 to 2021	25%	31%	25%	39%

Source: SQW analysis of student application data.[67] The 'n' numbers relate to the number of providers who provided data.

D.5 There were few applications for part time undergraduate study. Across the professions, one podiatry provider received three applications for part time undergraduate study for September enrolment by both January 2020 and 2021, while one therapeutic radiography provider received one application for part time undergraduate study by January 2021.

D.6 Table D-3 compares the number of foundation year applications by January 2021 with January 2020.[68] It shows that the number of courses is increasing; the number of applications is consequently also increasing with a large rise in foundation year applications for therapeutic radiography.

[67] Note, the therapeutic radiography course at the University of Portsmouth has closed since 2018.
[68] Data was not collected in June 2019 on foundation year applications, so comparisons are not possible for 2018-19.

Table D-3: Number of foundation year applications, January 2020-21

	Podiatry	Therapeutic radiography	Prosthetics & orthotics	Orthoptics
Foundation year applications January 2021	19 (n=1)	92 (n=3)	31 (n=1)	21 (n=2)
Foundation year applications January 2020	15 (n=1)	41 (n=2)	24 (n=1)	25 (n=1)
% change 2020 to 2021	27%	124%	29%	-16%

Source: SQW analysis of student application data

D.7 Table D-4 shows that the **number of full time postgraduate applications has increased for both podiatry and therapeutic radiography**. It is difficult to compare applications for podiatry because three providers reported applications in January 2021, compared to one provider in 2018. However, comparing the complete data for the one provider, there has been a four fold increase in applications between January 2018 and 2021. Likewise, it is difficult to compare applications for therapeutic radiography as the one provider that recorded postgraduate applications between 2018-2020 was unable to provide this information in 2021,[69] therefore the 2021 figure is from a different provider. Nonetheless, there has been a noticeable increase in applications in 2020 and 2021 compared to previous years.

Table D-4: Number of full time postgraduate applications, January 2018-21

	Podiatry	Therapeutic radiography
Full time postgraduate applications January 2021	*32 (n=3)	**32 (n=1)
Full time postgraduate applications January 2020	27 (n=2)	12 (n=1)
Full time postgraduate applications January 2019	4 (n=1)	3 (n=1)
Full time postgraduate applications January 2018	4 (n=1)	2 (n=1)

Source: SQW analysis of student application data. The 'n' numbers relate to the number of providers who provided data.
**Note, this includes one deferred application.*
***Note, one provider was unable to provide this information because of their application system being down.*

D.8 Across all professions, one provider recorded two to three applications that were 'in progress' for degree apprenticeships starting in September 2021, with the same provider having recorded two applications in January 2020.[70] In addition, one podiatry provider

[69] This was owing to a fault with their application system.
[70] It should be noted that one other provider was unable to provide information regarding the apprenticeship programme as the admissions window is not yet open.

reported application data for full time preregistration MSc students, reporting 16 applications for enrolment in September 2021.

Applications summary

D.9 The duration of the SIHED programme has seen some enduring trends, but also some key changes regarding student applications in the January return each year.

- Over the four year period, **full time undergraduate applications have increased across all four small and specialist subjects**
- The **majority of applicants are from England, female and aged 18 to 19 years**, and this has remained consistent across all years
- Those providers that offer such programmes have seen **increases in applications to their foundation year programmes, or postgraduate full time study programmes**. The number of providers offering these routes is small (seven for foundation year and four for postgraduate) but this might indicate potential routes to expand the market.

D.10 There are different application trends in each of the four subjects:

- **Podiatry** is likely to see a significant uplift in full time undergraduate applications in 2021. Three providers are now taking postgraduate applications. The proportion of female applicants has increased since 2018 and is now 71%, while podiatry consistently attracts older applicants compared with the other professions.
- **Therapeutic radiography** is the largest of the four subjects with nine current providers. Applicant numbers have increased year on year to 2020, with an increase expected across all providers in 2021. 2020 was a strong year for full time undergraduate applicants with a 24% uplift compared with the previous year. Foundation year provision has more than doubled in the last year, and postgraduate routes have also expanded with a new provider and an enhanced number of places. Applicants remain typically female (77% in 2018 and 2021), and typically young (69% aged 18 to 19 years in 2018 and 73% in 2021).
- There is one full time undergraduate course provider in England for **prosthetics and orthotics**. Their undergraduate applicants have increased over the period as have applications for foundation year students. This course is the most attractive to male applicants of all the four, with 38% of applicants reported as male.
- **Orthoptics** has two providers. The courses saw increases in applicant numbers since 2018 although this has fallen back in 2021 compared with 2020. The increase over the period is, however, 39%. The proportion of male applicants attracted to orthoptics has

increased from 20% to 31% with most applicants coming from England (92% in 2021)[71].

Offers and acceptances

D.11 Table D-5 provides a comparison of the number of offers and acceptances for full time undergraduate courses between 2018 and 2020[72]. In summary, the data shows:

- Between 2018 and 2020, there was an increase in offers made (25%) in therapeutic radiography, but a decrease in offers accepted (-5%).
- Orthoptics saw an increase in offers made (8%) and offers accepted (19%).
- Offers made for podiatry courses marginally decreased by 2% between 2018 and 2020. Despite this reduction, there has been an increase in offers accepted (8%).
- Prosthetics and orthotics experienced a decrease in offers made and accepted (-8% and -16% respectively) between 2018 and 2020.

Table D-5: Number of offers made and accepted for full time undergraduate courses, September 2018-2020

	Podiatry	Therapeutic radiography	Prosthetics & orthotics	Orthoptics
Change between September 2020 and September 2018				
% change offers made	-2%	+25%	-8%	+8%
% change offers accepted	+8%	-5%	-16%	+19%
September 2020				
Number of offers made for applicants to start in September 2020	324 (n=7)	581 (n=7)	58 (n=1)	*235 (n=2)
Application to offers ratio	56%	44%	64%	42%
Number of offers accepted by applicants to start in September 2020	210 (n=7)	245 (n=7)	32 (n=1)	112 (n=2)
Offers to acceptances ratio	65%	42%	55%	48%
September 2019				
Number of offers made for applicants to start in September 2019	298 (n=7)	541 (n=8)	63 (n=1)	244 (n=2)
Application to offers ratio	55%	47%	70%	48%

[71] Note: A comparison of applicant ages cannot be made for orthoptics as this data was not collected in January 2018.
[72] Note, the number of data returns varies by year, so caution should be exercised when interpreting and comparing the percentage change figures.

	Podiatry	Therapeutic radiography	Prosthetics & orthotics	Orthoptics
Number of offers accepted by applicants to start in September 2019	173 (n=7)	279 (n=8)	36 (n=1)	98 (n=2)
Offers to acceptances ratio	58%	52%	57%	40%
September 2018				
Number of offers made for applicants to start in September 2018	329 (n=7)	466 (n=8)	63 (n=1)	218 (n=2)
Application to offers ratio	61%	45%	69%	58%
Number of offers accepted by applicants to start in September 2018	194 (n=7)	259 (n=8)	38 (n=1)	94 (n=2)
Offers to acceptances ratio	59%	56%	60%	43%

Source: SQW analysis of student application data. The 'n' numbers relate to the number of providers who provided data.
**Note: one respondent reported that their figures for offers made were 'approximate.'*

Enrolments

D.12 Table D-6 shows the total number of students enrolled for full time undergraduate courses in September 2020 compared to the previous two years. In summary the data shows:

- There has been an increase in students enrolled in podiatry (8%), prosthetics and orthotics (15%) and orthoptics (23%).
- Enrolments on therapeutic radiography courses decreased by 3% from 2018 to 2020.
- When comparing the ratio of acceptance to enrolment between 2018 and 2020, it would appear to have been relatively consistent, with podiatry remaining at 97%, while therapeutic radiography and orthoptics increased marginally to 97% and 85% respectively. In contrast, prosthetics and orthotics experienced a substantial improvement in its acceptance to enrolment ratio over the period.

Table D-6: Number of students enrolled, September 2018-20

	Podiatry	Therapeutic radiography	Prosthetics & orthotics	Orthoptics
Enrolment				
Total number of students to be enrolled in September 2020	203 (n=7)	238 (n=8)	*38 (n=1)	95 (n=2)
Acceptance to enrolment ratio 2020	97% (n=7)	97% (n=8)	119% (n=1)	85% (n=2)
Total number of students enrolled in September 2019	184 (n=7)	264 (n=8)	29 (n=1)	92 (n=2)
Acceptance to enrolment ratio 2019	**106% (n=7)	95% (n=8)	81% (n=1)	94% (n=2)
Total number of students enrolled in September 2018	188 (n=7)	246 (n=8)	33 (n=1)	77 (n=2)
Acceptance to enrolment ratio 2018	97% (n=7)	95% (n=8)	87% (n=1)	82% (n=2)
% change 2018-2020	8%	-3%	15%	23%

Source: SQW analysis of student application data. The 'n' numbers relate to the number of providers who provided data.
** Note: This figure includes six IFY students from 2019-20 reported by the provider, thus the acceptance to enrolment ratio exceeds 100%.*
***Note: This figure is likely as a result of clearing places leading to a higher number of enrolments compared to number of offers accepted.*

D.13 Across all professions, three podiatry providers recorded numbers of degree apprentices enrolled for September 2020, with a total of 12 apprentices enrolled across the three providers. In addition, one provider reported the number of full time preregistration MSc students enrolled for September 2020, with a total of ten students enrolled.[73]

Characteristics of students enrolled

D.14 The data presented in Table D-7 provides information about the gender and age of students enrolled in 2020 compared to 2018.[74] In summary:

- All courses have more female students enrol than male (for both 2018 and 2020).
- Therapeutic radiography had the highest proportion of male student enrolments in 2020 (33%). The proportion of male student enrolments increased for orthoptics

[73] Data was not collected in September 2018 or 2019 on preregistration MSc enrolment, so comparisons with 2018 or 2019 are not possible.
[74] Note, there are some discrepancies with the data, with some data appearing to refer to applications rather than enrolments; therefore, the analysis below should be taken with caution.

courses between 2018 and 2020 by ten percentage points. The proportion of known male enrolments in prosthetics and orthotics, and podiatry courses decreased in this period.

- Podiatry received the highest proportion of enrolments aged 20+ (71%) in 2020, while orthoptics received the highest proportion of enrolments aged 18 to 19 years (73%).
- Comparing 2018 and 2020, the proportion of student enrolments aged 18 to 19 years and age 20+ years has remained relatively static across podiatry and therapeutic radiography. In comparison, orthoptics has experienced an increase in the proportion of student enrolments aged 20+ and a decrease in proportion aged 18 to 19 years, while prosthetics and orthotics has experienced the opposite trend.

Table D-7: Age and gender of students enrolled by profession, September 2018-20

	Podiatry	Therapeutic radiography	Prosthetics & orthotics	Orthoptics
Gender				
Proportion of known male enrolments (September 2020)	20% (n=40)	33% (n=104)	24% (n=9)	30% (n=82)
Proportion of known male enrolments (September 2018)	32% (n=38)	32% (n=79)	48% (n=16)	20% (n=37)
Proportion of known female enrolments (September 2020)	80% (n=164)	67% (n=214)	76% (n=29)	70% (n=187)
Proportion of known female enrolments (September 2018)	68% (n=79)	68% (n=166)	52% (n=17)	79% (n=137)
Age				
Proportion of enrolments aged 18 to 19 years (September 2020)	29% (n=58*)	63% (n=201)	58% (n=22)	73% (n=196)
Proportion of enrolments aged 18 to 19 years (September 2018)	28% (n=45)	64% (n=158)	36% (n=12)	84% (n=147)
Proportion of enrolments aged 20+ years (September 2020)	71% (n=145)	37% (n=117)	42% (n=16)	27% (n=72)
Proportion of enrolments aged 20+ years (September 2018)	72% (n=117)	36% (n=87)	64% (n=21)	16% (n=27)

Source: SQW analysis of student application data.[75]
'n' figures relate to the number of applicants about whom we have either age or gender information by profession.
**Note, this figure includes one reported applicant of under 18 years.*

D.15 Table D-8 shows the percentage of students enrolled from each region of domicile in 2020 compared to 2019.[76] In summary, the data shows:

- Across all professions the majority of students enrolled in 2020 were from England, with 90% of podiatry, therapeutic radiography and orthoptics enrolments from England.
- The proportion of enrolments from the rest of the UK (Wales, Scotland and Northern Ireland) was relatively small, with prosthetics and orthotics receiving the highest proportion of enrolments from these regions at 9%.
- Finally, courses received a higher proportion of enrolments from international students compared to EU students.

Table D-8: Region of domicile of students enrolled by profession, September 2019-20

	Podiatry		Therapeutic radiography		Prosthetics & orthotics		Orthoptics	
	2019 (n=6)	2020 (n=4)	2019 (n=8)	2020 (n=8)	2019 (n=1)	2020 (n=1)	2019 (n=2)	2020 (n=1)
South East	15%	13%	6%	10%	7%	18%	3%	3%
South West	1%	2%	8%	9%	7%	9%	0%	0%
Greater London	11%	16%	28%	30%	0%	0%	5%	3%
North West	23%	38%	10%	12%	31%	39%	33%	10%
North East	14%	0%	1%	0%	17%	0%	0%	0%
Yorkshire and the Humber	18%	2%	14%	4%	0%	0%	23%	56%
West Midlands	2%	7%	7%	9%	21%	6%	10%	8%
East Midlands	1%	9%	4%	5%	0%	0%	7%	5%
East Anglia	1%	4%	12%	12%	0%	0%	2%	5%
Wales	0%	0%	2%	3%	7%	9%	2%	0%
Scotland	0%	0%	0%	0%	3%	0%	1%	3%
Northern Ireland	1%	1%	3%	3%	0%	0%	3%	0%
European Union	3%	2%	2%	1%	0%	0%	4%	0%

[75] Note: Seven sets of provider data on applicant age did not sum to the number of enrolments reported.
[76] Note, there are some discrepancies with the data, with some data appearing to refer to applications rather than enrolments; therefore, the analysis below should be taken with caution.

	Podiatry		Therapeutic radiography		Prosthetics & orthotics		Orthoptics	
International	10%	7%	2%	3%	7%	18%	6%	8%

Source: SQW analysis of student application data. Note: because of inconsistencies with the data, percentages have been calculated by summing and dividing by the region totals rather than total enrolments.

Annex E: Undergraduate student survey—key findings

Introduction

E.1 An online self completion survey was designed to explore course choices and influences of all new first year undergraduate students in the four core SIHED courses (orthoptics, podiatry, prosthetics and orthotics, and therapeutic radiography). The survey was designed by SQW with input from the Office for Students' SIHED team and two programme leads. It was used for the first time in the autumn term of 2019 when it was distributed to students via course leaders. It was open to students for completion between 17 October and 16 December 2019 and generated 253 usable responses.

E.2 The survey in 2020 was distributed to students via course leaders and was open for completion between 7 October and 7 December. The survey was provided to all course leaders for distribution, with two reminders sent from SQW to encourage completion.

E.3 Nine courses where response rates were sufficiently high to assure confidentiality[77] were provided with their own survey data. The survey generated a total of 331 complete responses and 102 partial responses. After removal of duplicates and data cleaning, the analysis presented here is largely from **329 responses** (comprising 328 complete responses and one partial response that completed all but the final question), with ten partial responses also included, so as to maximise response numbers for analysis.[78]

E.4 Responses were **received from all but one course.** Fewer than ten responses were provided by students studying at seven providers.

E.5 Enrolment data from the September 2020 data feeds provided by 18 of the 21 providers indicates there were approximately **574 students enrolled in September 2020** across the four courses.[79]

E.6 This paper presents results from the 2020 survey and throughout this analysis, where possible, comparisons are made with the 2019 student course choice survey (n=253).

Survey respondents

E.7 In total, the highest proportion of responses were received from students studying therapeutic radiography (45%), closely followed by podiatry (43%). The remaining 12%

[77] This was for returns from 20 students per course.
[7878] We do not have an accurate figure for the numbers of students given the opportunity to complete the survey and therefore cannot provide an accurate response rate.
[79] Data feed data is used here to provide an indicative comparison as the HESA/HESES summary data on student starts for 2020-21 has not yet been published. This does not include data for three courses as this was not provided in the September 2020 data feeds.

consisted of 8% from orthoptics and 4% from prosthetics and orthotics. This is to be broadly expected, given the respective numbers of students on each course.

E.8 Respondents' personal characteristics can be summarised as follows:

- The majority of respondents (**82%) were female**, while 18% were male
- Almost **half of respondents (46%) were up to 20 years of age** when they started their course, with the second highest group of respondents (30%) aged between 30 and 49 years
- Nearly three quarters of respondents (69%) reported that they were living at their usual or family home during term time while they studied
- The highest proportion of respondents **(43%) said that it takes less than one hour to travel back to their family home** from where they are based during term time.

When students first learn about their chosen profession

E.9 Almost half (**46%) said they first heard about the profession when they were older than 18 years**, while 33% were between the ages of 16 and 18. In terms of subject specific responses, the highest proportion of respondents from **therapeutic radiography and orthoptics had heard about the profession when they were between 16 and 18 years old** (49% and 62% respectively), while for podiatry and prosthetics and orthotics the highest proportion were older than 18 years (58% and 40% respectively).

Sources of information

E.10 Students learned about their profession from a range of sources. The **most frequently reported source of information was internet search engines** to find information about related topics (35%), lower than the 2019 figure of 42%.

E.11 Several said that they learned about it because either they or someone they know received care (30%), from friends and acquaintances who work in the profession (16%), or from family (6%). Lower numbers of respondents reported that they saw something about this on social media (7%) or on TV, in a book or in a newspaper/magazine (4%). Others learned about it through careers interventions from a careers advisor or careers teacher (10%), at a careers or skills fair (8%), or talks in school or college (6%). **Fewer heard about it via a conversation with the *ISeeTheDifference* team (2%) or via a webinar by *ISeeTheDifference* (1%).**

The *ISeeTheDifference* Campaign

E.12 In total, 44 respondents said that they were **aware of the *ISeeTheDifference* Campaign (13%),** an increase on the 23 who reported they were aware of the campaign in 2019. The majority of these were studying either podiatry (22) or therapeutic radiography (19), as might be expected given larger student populations in those courses overall.

E.13 Respondents had encountered the campaign in a range of different ways, including the *ISeeTheDifference* website (20), Instagram (7), the professional bodies' websites (6), Facebook (4) and Twitter (4).

E.14 In 2019, few were able to rate the value of the campaign or its resources or could recall when they encountered the campaign. In the 2020 survey, of the 20 respondents who had encountered the campaign via the *ISeeTheDifference* website, seven visited the website before 30 June 2020 and nine visited since July 2020. Overall, **13 of the 20 rated the resources on the website as helpful or very helpful**. Of the remaining seven, four provided a neutral response (neither helpful nor unhelpful), two did not respond and one said it was unhelpful.

E-resources

E.15 The most commonly cited internet resources used by students to find out more about courses were university websites (72% in 2020, 70% in 2019). The NHS Health Careers website (www.healthcareers.nhs.uk) was also popular, used by 58% of respondents in 2020 (an increase from 43% in 2019), as was the UCAS website (57% in 2020, 60% in 2019).

E.16 Other sources used by students included course prospectuses (53%) and #ISeeThe Difference (3%), with Unistats used by 14% of respondents, similar to 15% in 2019. The NHS Health Careers tool was used by 12% of respondents in 2020.

Place visits

E.17 Before applying for courses, 46% of current first year students had undertaken work shadowing or work experience with a healthcare professional in a clinical setting (fewer than the 62% reported in 2019). Just under half **(46%) of all respondents said that they had an interview with, or visit to, a course provider** before applying. Almost a quarter (**24%) of respondents reported that they had received career advice from a healthcare professional** before applying for courses.

Interest in other medical or healthcare courses

E.18 Just over half of respondents (55%) said they had considered applying to study other medical or healthcare related courses, similar to the 56% reporting this in 2019. Nursing and medicine were the most popular alternatives, considered by 43% and 42% of those who

considered an alternative respectively. These were followed by dentistry (29%), midwifery (26%) and medical associates (16%).

Course choice and application process

E.19 From the 2020 survey results we identified a range of factors that influenced students's final choice of course, with the most common being **interest in the subject area and profession (82%)**. Other factors included job opportunities following graduation (64%), opportunities to work with people in a caring profession (61%), course location (53%), career prospects in the longer term (44%) and university reputation or attractiveness (44%).

E.20 Half of respondents **(50%) reported that they had applied to the course they are on through the UCAS main cycle**. This was followed by application through UCAS clearing (20%), UCAS Extra (11%) and 18% directly to the university.

E.21 **Just under half (47%) of respondents indicated that when they registered on their course they were very confident that the course was the right choice for them**, with a similar proportion (46%) indicating that they were reasonably confident. Only 6% indicated that they were either not very or not at all confident that their course was the right choice.

Effect of coronavirus on choice of subject or university

E.22 Of the 329 respondents, 177 provided further information on the effect of coronavirus on their choice of subject and university in an open text response. Overall, over half **(53%) reported that coronavirus had not had any effect on their choice of subject and university**, with the remainder identifying a range of factors that had either influenced their choice of subject and/or university, or wider effects on their experience of the course.

E.23 More widely, several respondents reflected on how coronavirus had influenced their experience of the course, including the overall shift to online or blended learning. Linked to this, 17 respondents reported various negatives associated with virtual learning such as poor quality online platforms, difficulty studying certain topics including anatomy and clinical skills, and the overall lack of social interaction opportunities with other course members. Similarly, 31 respondents **(18%) noted the limited amount of in-person practical teaching and face-to-face learning that had taken place.**

Annex F: Case studies

F.1 Three case studies were developed for the final evaluation report to explore prevailing recruitment practices, challenges and enablers; SIHED funded activities and evidence of outcomes and impacts; and student experience. The three case study sites were:

- University of Liverpool, orthoptics
- University of Huddersfield, podiatry
- University of Salford, podiatry, and prosthetics and orthotics

F.2 Case studies involved interviews with higher education professionals and first year undergraduates. The evidence gathered from all the interviews was synthesised in an anonymised case study report, including verbatim quotations. Each report was then reviewed by the relevant lead at the University for factual accuracy.

University of Liverpool

Introduction

Key data	
University	University of Liverpool
Course	BSc (Hons) Orthoptics
Number of students enrolled September 2020	54
Entry requirement (UCAS)	A-level BBB to include one of the following: Biology, Chemistry, Physics, Psychology or Mathematics.

F.3 The case study focuses on the BSc (Hons) Orthoptics course at the University of Liverpool ('UoL'). The department's involvement with SIHED included working with the SIHED outreach officers (particularly the officer based at the university) and the BIOS secondee. More broadly, the University received Challenge Fund Round 1 and 2 monies, with the first round focusing on therapeutic radiography and the second one focused on a range of allied health disciplines including orthoptics.

F.4 The case study explores recruitment practices, challenges and enablers; SIHED funded activities and evidence of outcomes and impacts; and the student experience. It draws on feedback from two university professionals and three first year undergraduate orthoptics students.

Recruitment challenges

F.5 The department's 'business as usual' recruitment practices involve activities ranging from orthoptics and health specific to university wide activities. Course specific practices focus on outreach such as attendance at large careers events, talks at local schools/colleges, and supporting local clinicians to deliver hospital careers events. The team is relatively small, so to provide additional capacity they have a geographically dispersed pool of (predominantly) volunteer graduate and undergraduate ambassadors, who when required can attend events on the department's behalf (particularly for events in other regions). In addition, the department has trialled several 'innovative' approaches to recruitment, such as the use of Virtual Reality headsets and delivering 'vision and ophthalmology days' aimed at promoting the course to applicants considering medical and/or ophthalmology professions. Aligned with university activities the course holds interview days and is involved in university wide events, such as open days, discovery days and summer schools (for health courses).

F.6 Feedback from professionals suggested that the most effective recruitment method is the outreach activities—in particular, attendance at local events, schools and colleges—because

the department has developed a good rapport with local educational settings and is confident that students will be of high calibre.

F.7 In the years prior to SIHED commencing, the department implemented several different recruitment practices. For example, the team worked with BIOS to create promotional videos; however, it was reported that the impact on awareness was minimal. The department also worked with the University's central marketing team to promote the course. This included providing the central team with additional information/resources to better equip them to 'sell' the course to prospective students, and working together to contact approximately 500 schools to offer information packs and talks at assemblies/careers events.

SIHED programme approach

Activities

F.8 The department's primary involvement in SIHED has been through the outreach activities. The course has benefited from a part time outreach officer based at the university, alongside support from other officers. Having a dedicated orthoptics outreach post located at the university was considered very beneficial as it significantly increased capacity. Feedback suggested a collaborative relationship between the academic team and the outreach officer through developing tailored outreach resources together, sharing learning and jointly attending events. In addition, the department has been in regular communication with the BIOS secondee based in Manchester, attending several events together.

F.9 The outreach officer and departmental recruitment team have also utilised the *ISeeTheDifference* campaign branding and marketing materials and attended SIHED stakeholder events. It was reported that the *ISeeTheDifference* branding was initially unclear, and its subsequent improvements were welcomed. Despite this, there remain concerns that the branding is unfamiliar to prospective students. It was suggested that part of the problem lies in student decision making, which focuses on both institution and course, therefore any materials without a university logo/name was thought to be less effective. Student feedback reiterated this finding, as none of the students spoken with recalled the *ISeeTheDifference* campaign. While some students indicated it would have been a useful resource when applying for university, concern was raised over striking the right balance between informing individuals about available grants and bursaries for orthoptics and ensuring that people choose the profession for the *'right reasons.'*

F.10 More broadly, the orthoptics department has been involved in the university's Challenge Fund Round 2 project, which is being led by the Radiotherapy department. Building on the university's Round 1 project, the use of simulated clinical placements is being explored across a range of healthcare courses including orthoptics.

Outcomes

F.11 Consultees reported that **SIHED has *been a really good success*** leading to increased course applications and enrolments; annual enrolments have increased from 38 (prior to SIHED) to over 50. As a result, the course has not needed to enter clearing over the past two years (note, the course still entered clearing to over enrol as it has increased the number of available places because of workforce demands). The work of the outreach officers was cited as a key factor in supporting this outcome.

F.12 The increase in applications/enrolments has enabled the department to put forward a case to the university to **increase student places and staff numbers.**[80] In addition, feedback suggested **increased partnership working between the AHPs and wider healthcare courses** at the university, facilitated through the Challenge Fund monies. The Challenge Fund provided the impetus to collaborate, share experiences and discuss solutions to common problems across a range of disciplines.

Student experience

F.13 This section draws on feedback from three first year orthoptics undergraduates who participated in an online focus group. The plan was to conduct two focus groups with four to six students in each; however, recruitment was challenging.

Application process

F.14 Students said they first heard about the profession through a friend/acquaintance or by researching different medical professions. Reasons cited by all students for choosing the course included profession related factors—such as working in a hospital setting, patient interaction, and opportunities for specialisation and lifelong learning—and university related factors—such as Liverpool's proximity to home, the 'vibe' of the city and university, and having friends already studying at the university.

I enjoyed my sciences and I knew I wanted to go down the healthcare route… I like patient interaction [and] I wanted to do something hospital based.

I really like caring for people and helping them in a way which I think is positive.
First year orthoptics students

F.15 Students used a range of resources/sources of support and advice to find out about the profession and course, including university websites, the Prospects website and BIOS. Students also spoke to family members/acquaintances who work in the profession or received treatment. None were able to complete work experience, in part because of

[80] At the time of writing one 0.5 FTE post was being advertised.

coronavirus. There was consensus that the university orthoptics webpage was the most helpful source of information.

I think the issue for me was I had my work experience lined up for summer… but it was only because of COVID that I couldn't go to my work experience.

You hear a lot of things and it [orthoptics] seems interesting, but I think you want to actually get to see everything in person, so that's really the only issue that I came across.
First year orthoptics students

F.16 All students also applied for optometry; however, after finding out more about the profession, orthoptics was the preferred choice because it was considered more interesting (for example, because of its focus on both vision and binocular vision and greater use of tests/investigations).

Student learning experience

F.17 Overall, the students were enjoying their first term of the course. The content was reported to be interesting, with aspects of the course such as clinical theory, anatomy and physics highlighted as particularly fascinating topics to date. However, the workload and terminology—*It's like learning a new language*—were highlighted as challenging aspects of the course. Going forwards, the students are most looking forward to practical sessions and placements, as well as more specific elements of the course such as how diseases affect normal vision.

Summary

F.18 The positive effects observed with **student interest and enrolment were thought to be in whole or part attributable to SIHED**. One interviewee fully attributed the outcomes to SIHED because of the programme's national awareness campaign, while another reported that applications/enrolments would have increased at a substantially slower rate without SIHED. No other internal or external factors were identified as important in delivering outcomes.

F.19 As discussed above, the work of the outreach officers was identified as a particularly effective element of SIHED and one that the department considers critical for future interventions. Going forwards, **concerns were raised over the sustainability of outcomes**. Consultees were hopeful that the legacy of the SIHED, and in particular the outreach activities, will last several years. However, over the longer term, the expectation is that further outreach and marketing activities, and thus funding, will be required to maintain awareness.

University of Huddersfield

Introduction

Key data	
University	University of Huddersfield
Course	BSc (Hons) Podiatry
Number of student places available pa.	50
Entry requirement (UCAS)	A-level BBB including a Science, Sports Studies or Physical Education.

F.20 The case study focuses on the BSc (Hons) Podiatry course at the University of Huddersfield (UoH). The department's involvement with SIHED has included attendance at the stakeholder events, engagement with the *ISeeTheDifference* campaign, and involvement in a Challenge Fund Round 2 project.

F.21 The case study explores prevailing recruitment practices, challenges and enablers; SIHED funded activities and evidence of outcomes and impacts; and the student experience. It draws on feedback from four university professionals and eight first year undergraduate podiatry students (including one apprenticeship student).

Recruitment challenges

F.22 For many years, UoH's recruitment practices have focused on promoting podiatry to younger people with the aim of increasing applications from 18 to 21 year olds, and to a lesser extent widening participation, which is a constant consideration for the course. The department's 'business as usual' recruitment practices are managed by their marketing team. Typically, one individual from the teaching staff accompanies a member of the marketing team when attending talks, careers events and taster days in schools and colleges. If required, a group of seven postgraduate students and a 'student pool' are available to provide additional support with outreach. In general, activity is not targeted at specific groups or individuals; however, before coronavirus the department visited schools/colleges in areas of social deprivation to promote podiatry and higher education more broadly.

It feels like 'we are fighting a losing battle…if the health services don't know where we are…how can students find us?'
Higher education provider professional

SIHED programme approach

Activities

F.23 Huddersfield's nursing and midwifery department received Challenge Fund Round 2 money to deliver student run, interprofessional community clinics, including podiatry, physiotherapy, nursing and midwifery. As part of this project, podiatry delivered 'pop-up clinics' in the community prior to the coronavirus outbreak. Two clinics were delivered in a market, and although podiatry was not as busy as some professions, the team spoke with a wide age range of individuals and distributed leaflets. Post coronavirus restrictions, the department is keen to deliver similar community clinics, but instead make them treatment based clinics so that individuals can simultaneously receive a short private assessment and information about the profession.

F.24 In addition, members of the department have attended the SIHED stakeholder events, and alongside university and College of Podiatry marketing materials they have used the *ISeeTheDifference* campaign materials (including the leaflets and pull up banners). Overall, there was positive feedback on programme activities from the higher education provider professionals. The stakeholder events were described as 'excellent,' because of the networking opportunities and enthusiasm of attendees. However, academic staff reported a lack of follow up engagement from the programme team and stakeholders in between events, thus maintaining momentum was difficult. This suggests scope for future interventions to include increased learning share and dissemination (beyond scheduled stakeholder events).

F.25 None of the students consulted had heard of the *ISeeTheDifference* campaign. However, students stated that the campaign would have been useful when applying for university, particularly for providing accessible information about podiatry and the AHPs more broadly. However, it was suggested that the campaign would be best targeted at high school and college students, as students noted that the AHPs (including podiatry) were not promoted by educational professionals. Raising awareness from an early age would ensure young people are aware of the AHP career options when they start career planning.

Outcomes

F.26 To date, the course has not realised any benefits attributable to SIHED. The community outreach funded under the Challenge Fund was the key intervention that they believed would generate benefits; however, coronavirus has halted this work.

Student experience

F.27 This section draws on feedback from eight first year undergraduate podiatry students who participated in online focus groups. Two focus groups were planned with 12 students invited in total (six to each), of which eight participated.

Application process

F.28 Most students said they first heard about podiatry through a family member who works in the profession or has received treatment. Several students heard about podiatry while exploring physiotherapy, including one student who was offered a university interview for podiatry after applying for physiotherapy.

F.29 Reasons cited by students for choosing the course focused on the specialised nature of the profession, job security and opportunities for progression, and the positive experiences of family members who are podiatrists. Several students were seeking a career change following redundancy, while one was seeking to progress from their current role as a podiatry assistant. The proximity of Huddersfield to the students' region of domicile was also an important factor, alongside the reputation of the podiatry department.

I wanted to study and wanted a secure career that I could progress in. I was in a good job before but there wasn't much progression.

Mum's sister goes on about how much she loves the job. Wanted to do forensic pathology before but she managed to persuade me to do podiatry.
First year podiatry students

F.30 Students used a range of resources/sources of support and advice to find out more about the profession and course, including the NHS, UoH's, and College of Podiatry websites. Students also watched videos on YouTube and spoke to family members who work in the profession or have received treatment. Most students completed work experience or work shadowing (in various forms) before applying to the course, but this was often facilitated through a family member(s) in the profession. Students reported difficulties gaining experience, because of constrained capacity among podiatrists and the requirement to complete 'complicated' forms for the NHS. In addition, most students completed an interview during the application process, which for some students was a helpful opportunity to learn more about the profession and the course.

"Before I enrolled for the course, I did a foot healthcare course to see if it was a career that I wanted to progress in. It is very hard to gain work experience…I Googled local Podiatrists and found maybe about thirty to try to get some experience but only one person out of all those people were prepared to let me see what it is about".
First year podiatry students

F.31 Only two students applied for other courses—both physiotherapy; however, after researching podiatry both students decided that the profession was better suited to their interests (for example, owing to its focus on the lower limbs rather than the whole body).

Student learning experience

F.32 Students were enjoying their first term of the course, particularly the practical podiatry clinics. They felt supported by the department and commented that the course had adapted well to the challenging circumstances owing to coronavirus. However, some students initially found the workload and/or content challenging. Going forwards, students are most looking forward to placements, including the possibility of completing an oversees placement in their third year. In addition, when coronavirus restrictions allow, students are keen to attend more face to face lectures and practical sessions on campus.

Summary

F.33 To date, **the course has not observed any positive effects attributable to SIHED**. However, the higher education provider professionals spoke positively about the SIHED programme, and if Challenge Fund activities can resume, benefits may be realised in future.

F.34 Looking forward, university professionals suggested several areas to focus intervention:

- Local recruitment and non traditional recruitment routes
- Using 'real life' examples of the profession such as human stories in video clips
- Improving awareness of the apprenticeship route—which may be a particularly appealing route for career changers
- Increased presence of podiatry in the media.

F.35 The College of Podiatry's Podiatry and School Science (PASS) project was also identified as a clever approach to awareness raising in schools, but feedback suggested that PASS also needs to engage older children and careers teachers.

F.36 Suggestions by students were similar, with a twofold approach considered most effective in raising awareness and interest in podiatry. First, they called for increased accessibility of information, particularly via increased social media engagement. Students argued that the profession lacks a strong social media presence (despite its potential influence), therefore universities and wider stakeholders should more actively promote podiatry through social media channels. The 'Toe Bro' videos on YouTube were highlighted as a successful example of using an online platform to raise awareness of the profession.

F.37 In addition, students emphasised the importance of broadening careers provision at schools and colleges to ensure information is provided for all healthcare professions. Ensuring information is relevant to the interests of the audience is also key—for example, highlighting the role of AHPs in sports. Second, and concurrently, there is a need to change public perceptions about working with feet. Students stated that the current stigma about feet is harmful for the profession, and thus suggested greater emphasis on the positive aspects of podiatry, including the importance of foot health and podiatry's broader remit on the lower limbs.

University of Salford

Introduction

Key data	
University	University of Salford
Course	BSc (Hons) Prosthetics and Orthotics Bsc (Hons) Podiatry
Number of students enrolled September 2020	Prosthetics and Orthotics: 40 Podiatry: 55
Entry requirement (UCAS)	Prosthetics and orthotics: A-level 120 points including maths, physics or engineering at grade B or above Podiatry: A-level 120 points from a minimum of three A-levels (biology preferred)

F.38 The case study focuses on the BSc (Hons) Prosthetics and Orthotics P&O and BSc (Hons) Podiatry courses at the University of Salford (UoS). The university is the only provider of P&O undergraduate training for prosthetists and orthotists in England. The school received SIHED Challenge Fund Round 1 money, supported the *ISeeTheDifference* campaign and attended stakeholder events. It has also hosted a secondment officer who focused on improving the placement experience.

F.39 The case study explores prevailing recruitment practices, challenges and enablers; SIHED funded activities and evidence of outcomes and impacts; and the student experience. It draws on feedback from three higher education professionals and 13 first year undergraduate students (three podiatry students and ten P&O students).

Recruitment challenges

F.40 Across both courses 'business as usual' recruitment practices involve university aligned activities such as open days and applicant interview days, as well as course specific activities.

F.41 Over the last 20 years, the podiatry department has been committed to promoting the profession through a variety of activities including:

- Outreach work with schools and colleges—examples include attendance at the Science Teacher conference and Healthcare Days
- Alumni are encouraged to distribute leaflets in recognition that they could inspire others to join the profession
- Applicant visit days are held in the clinic so that individuals can experience how students, patients and staff interact

- New students are asked to thank and update those who influenced them to study podiatry in the hope that it will encourage those influencers to continue promoting the profession
- Responsiveness to *ad hoc* requests to support recruitment—for example, the team recently completed a live online event at a high school.

F.42 University professionals are keen to support the growth of their professions through increased interest and subsequent student numbers; however, a key barrier they face is increasing difficulties securing placements. The challenge is particularly acute for podiatry, which has experienced decreased placement capacity because of reduced NHS resources/staffing and simultaneously a narrowing of placement experience linked to a reduction in the breadth of podiatric care provided by the NHS. While the apprenticeship route provides an alternative recruitment pathway into the profession, the same placement provision challenges exist.

F.43 Owing to the small and specialist nature of P&O (there are approximately 1,000 professionals in the UK), public awareness of the profession is relatively low. This is challenging at a time when increased demand for prosthetists and orthotists is increasing, as a result of the rising prevalence of diabetes and musculoskeletal conditions among others. An additional recruitment challenge for P&O is that it is common for interested individuals to lack the 'traditional' qualifications (BBB or equivalent at A level, including either maths, physics or engineering), because the course is popular with mature students seeking a career change (for example, ex-military). Therefore, to ensure that both courses are accessible to all potential applicants, UoS offers several different entry routes including:

- Salford Alternative Entry Scheme (SAES) which includes two entry routes and applicants are directed to the one appropriate for their course:
  - Accreditation for prior experiential learning (APEL), which provides a holistic assessment of an individual's skills, qualifications and work experience
  - Mature students admissions pathway (MSAP-UK) test, which assesses generic reasoning and thinking skills.
- Foundation Year and International Foundation Year.

SIHED programme approach

Activities

F.44 The university's involvement in SIHED has been wide ranging. Activities have included:

- Hosting a secondment officer whose work has included:
  - A review of the P&O course, which has led to changes to placement provision; placements were previously delivered in two 16 week blocks (the student cohort

was spilt in half across prosthetics and orthotics), but are now delivered in three blocks, so students complete either a prosthetics or orthotics placement, or research.

  - Enhanced coordination of requirements by universities of placement providers across podiatry and P&O by creating a single set of paperwork and an online resource to digitise the core document(s) and enable information to be shared more easily.

- Challenge Fund Round 1 project, managed by the secondment officer, that focused on promoting podiatry placement provision in private practice; the course has since established private practice placements.

- Involvement in the outreach activities, including supporting several *ISeeTheDifference* webinars. The admissions teams had planned to provide a campus tour for an outreach officer, to better equip them to promote the course/profession; however, this did not progress because of coronavirus.

F.45 The final evaluation report for UoS's Challenge Fund project highlighted that early engagement with stakeholders was key to the success of the project, alongside sharing emerging learning and networking with stakeholders such as HEE to maintain engagement. However, the delay to the start of project delivery was identified as a challenge because it led to capacity challenges among partners because of competing priorities.

I think that anything that's raising awareness, that may benefit recruitment into vocations that there is societal need for, is a positive.
Higher education provider professional

F.46 Most students were not aware of the *ISeeTheDifference* campaign, except for two (both studying podiatry) who had heard of the campaign but were not aware of the details. However, there was a consensus among students that they would have found it helpful to have known about the campaign when applying for university. For example, one commented that the 'Become a [profession]' webpages would have been a particularly useful tool.

F.47 Further, the podiatry department's survey of first year students also found that no students had heard of the *ISeeTheDifference* campaign. Students were asked what sources of information encouraged them to choose the course; common reasons cited included: government funding for AHP and nursing programmes, the coronavirus pandemic (the importance of health professions highlighted throughout the pandemic) and engagement with practising podiatrists.

Outcomes

F.48 The P&O higher education professional commenced their post after SIHED started, so was unsure whether the course has benefited from the programme. This said, given **that course enrolments have increased since 2018**, they concluded that **it is possible that SIHED**

contributed to this increase. In contrast, **the podiatry course has not yet realised any benefits attributable to SIHED.**

Student experience

F.49 This section draws on feedback from 13 first year undergraduate students; three podiatry students participated in individual interviews and ten P&O students participated in two virtual focus groups.

Application process

F.50 The podiatry students first heard about the profession either through a friend, previously working in healthcare, or they had received treatment when they were younger. Reasons for choosing to study podiatry included good alignment with their skills and interests, and job security with opportunities to progress. In contrast, most P&O students first learned about the profession on the internet. That said, several heard about the profession through a friend or a relative who had received treatment.

F.51 Students choose their course primarily because it suits their interests—for example, anatomy, human biology and artificial replacements. In addition, one student was already working in engineering, but wanted to work in healthcare instead, so P&O was considered a good combination of skills and interests. The proximity of Salford to the students' region of domicile was also a critical factor in podiatry and P&O students choosing their course.

P&O is *really hands on, really practical… can see results quite instantly.*

I was unsure what to do, but then my Grandad received treatment from an orthotist for rheumatoid arthritis, which gave me the nudge to go in that direction.
P&O students

F.52 Students used a variety of resources to find out more about the profession and the available courses including speaking to a practitioner, YouTube videos and podcasts, UCAS, NHS Careers website, UoS website and university open days. Of these, the UoS website, open days and speaking to a practitioner were reported to be most helpful. None of the students completed work experience/work shadowing largely because of coronavirus, except for one who completed a half day foot care training with Age UK.

F.53 Two of the podiatry students and three of the P&O students had considered and/or applied for alternative healthcare courses, either radiography, occupational therapy or dietetics. The reasons for dismissing these alternatives were varied—for example, not meeting the entry requirements, finding Salford more welcoming compared to other institutions and deciding podiatry/P&O was better aligned to their interests.

Student learning experience

F.54 Students were enjoying their first term of the course. In particular, podiatry students were enjoying the practical clinics while P&O students were enjoying making casts, the anatomy sessions and interacting with patients. Some were finding the online learning suits them, while others would prefer more face to face learning. Students were finding it difficult to get to know people on their course because any face to face sessions were conducted in the same small 'bubbles' because of coronavirus restrictions.

F.55 Going forwards, and thinking beyond the effects of the pandemic, students were most looking forward to more practical learning, including clinics and placements, being able to independently diagnose conditions and learning more about the upper limb. However, some students were anxious about certain aspects of the course including workload, exams and low confidence.

Summary

F.56 To date, it is **difficult to conclude whether either course has observed any positive effects attributable to SIHED**. While feedback suggested that SIHED might have benefited the P&O course, any fluctuation in student numbers is difficult to attribute to the programme because of the university being the only provider of P&O undergraduate training in England. That said, if sustained, the work on placement provision has the potential to benefit both courses over the longer term.

F.57 Looking forward, higher education consultees highlighted the importance of continuing to engage with young people to encourage the next generation of AHPs. In particular, P&O students suggested promoting the profession at careers fairs in schools and college, and in relevant departments, such as engineering. Increased promotion of P&O to ex-military personnel could also provide a strong source of mature students with relevant skills.

The military is an untapped resource of older more experienced people… there are magazines that the military distribute around all stations and sections to do with resettlement and figuring out what to do when you leave. An advertisement in one of those, instead of just nurses, would help. I only ever saw advertisements for nurses, as great and needed as the job is, everyone knows about nursing.
First year P&O student

F.58 Podiatry students also thought that future interventions need to focus on awareness raising activities at schools and colleges (for example, adopting a similar approach to Aimhigher). Emphasising that the profession focuses on the lower limbs, not just feet, was also considered important when promoting the profession.

If people don't know about it [podiatry], they can't choose it.
First year podiatry student

SQW

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