

# Opportunities for future development in LD Nursing

## NHS England, May 2023

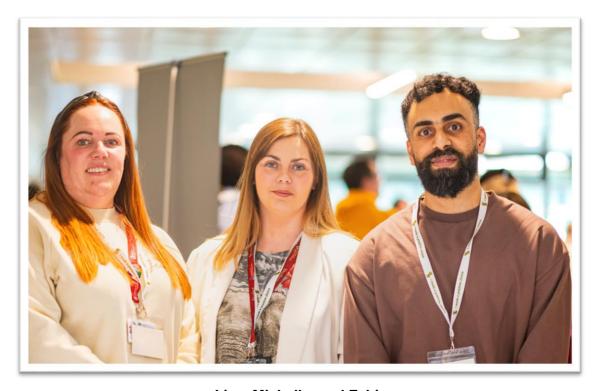
This piece of work was originally developed as a direct consequence of conversations between NHS nursing colleagues, due to concerns with the ongoing challenges in attracting people to commence their pre-registration nurse training learning disability.

As part of this conversation, we were able to establish that whilst these challenges applied across England, there were regional variations, with some areas nationally and regionally experiencing less challenges with this than others.

We agreed as a collective that to address this challenge and improve numbers applying for such courses there was a need to identify, collect and collate examples of good practice. As this would ensure not only that we could celebrate and highlight areas that were experiencing less challenges in this area, but we could also share this good practice nationally.

By sharing in this way, we would be able to provide regional colleagues with additional information and options to help increase numbers applying for these training places. After these conversations we undertook a scoping exercise which consisted of contacting every HEI across England who offered pre-registration learning disability nursing courses to gather good practice as mentioned above.

These key themes have been identified following discussions with representatives from 30 of the 32 HEIs that were involved in the development of the Compendium. These were identified by at least one HEI but in most cases were seen as key themes by multiple providers if not by all.



Lisa, Michelle, and Febin

Commissioned as part of the All-England Plan for Learning Disability Nursing, the Learning Disability Nursing Compendium represents an important marker for the learning disability nursing academic profession and the Higher Education Institutions in which they work.

We would like to take this opportunity to thank all those Universities who took part and having reviewed the document, it is heartening to see so much innovative work being developed and delivered by them in order to ensure that Learning Disability Nursing academic programmes remain valued and relevant.

We would also like to extend our grateful thanks to Paul Evans, who undertook this piece of work on our behalf, and spent considerable time and effort in gathering and collating the information in this compendium.

Whilst this compendium highlights several areas of innovative practice which have led to increases in student numbers, we are aware that there are still a range of challenges that we face in terms of attracting more students into a career in Learning Disability Nursing. One challenge is that of raising the profile of the profession as a whole, as we are aware that this is a field of nursing that is often poorly understood, and little known of outside of learning disability provision.

While an array of work is underway to enhance the role of learning disability nursing across health and care, we still have a way to go, but the commitment of the learning disability nursing profession remains unrelenting, and the response to this piece of work, is testament to their passion.

By continuing to maintain a powerful voice for the profession, learning disability nursing will continue to thrive and the compendium provides some helpful pointers for further strengthening the academic offer alongside ideas for change.

Ellie Gordon
ellie.gordon@hee.nhs.uk
LD and MH Senior Nurse



**David Harling** 





**Executive Summary** 

The key themes have been generated from discussions that were structured around the questions that were sent out on the PowerPoint presentation with the initial email to individual Higher Education Institutions (HEIs).

The points listed are elements used to promote applications from prospective students or were seen to be obstacles which inhibit applications. Some of the themes also relate to retention of students once they commence the programmes.

There was a consensus for the need for a national initiative to raise the profile of Learning Disability Nursing (LDN) amongst the public. Key recommendations can be developed from these themes, many of which are not innovative ideas but have a high degree of commonality.



Hannah and Leona

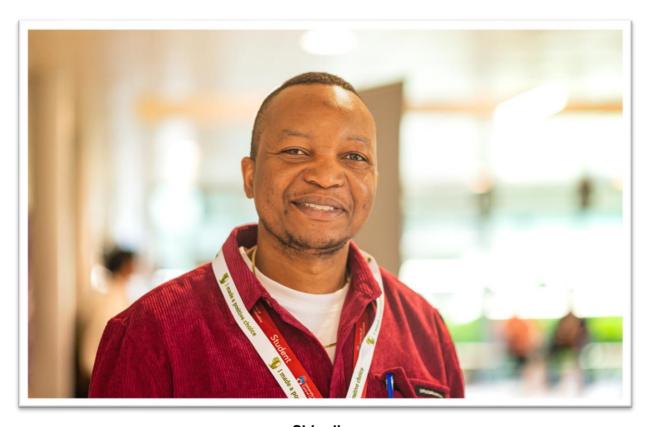
**Dedicated Marketing / Admissions Teams** 

To promote LDN within HEIs and raise its visibility to applicants, the need for a dedicated marketing / admissions tutor-based in the school / faculty was seen to be of benefit over that provided by centralised University services.

Several HEIs had moved to centralised marketing / admissions and had felt the impact of this. Active involvement of Learning Disability Teaching teams in marketing and recruitment was felt to be key in attracting applicants to programmes.

Centralised corporate marketing by HEIs does not help, as the use of generic nursing and healthcare imagery distracts from the varied and distinct roles and imagery of LDN.

Pre-2017 figures amongst most HEIs were stable, but following the introduction of tuition fees, many HEIs saw big drop-offs in the number of applications specifically focused on LDN.



**Shingling** 

#### Recommendation 1:

HEIs to develop marketing / admissions functions dedicated to nursing and midwifery programmes based in Schools of Health / Departments / Faculties

## **Multimedia Marketing**

Many HEIs' approach to marketing the LDN programmes made use of podcasts, videos, social media, and were seen as key to raising awareness of LDN.

However, some commented that these only worked when applicants were actively searching for information relating to LDN.

#### **Traditional Student Cohort**

Universally HEIs identified the traditional student cohort for LDN to include more mature students who have worked in services or individuals of any age who have family members who have a learning disability.

The reduction in applications after 2017 when tuition fees were introduced hit the figures for mature students far more than others. The introduction of the £5000 grant (plus £1000 for Learning Disability / Mental Health) has had mixed results - with some HEIs indicating it had raised application numbers whilst others stated it had no noticeable effect.

## **Novel Approaches to Open Days**

The use of novel approaches to Open Days to attract interest in LDN was seen as an important way to start up conversations and stimulate interest. Many HEIs have generic Open Days which focus on the programme. This can lead to LDN being less visibly articulated than those HEIs who have information presented specifically for each field of practice with emphasis on LDN where this is seen to be effective in raising interest.

The use of novel approaches includes setting up sensory areas that attract applicants to explore their use and thereby engaging conversations and discussion around LDN where a traditional stand or market place approach may not. HEIs providing specific talks about each field during Open Days cited the creative use of sequencing these to focus interest on Learning Disability. Understanding this can help so that the prominence of one field such as Adult may not dominate the discussion.

### Strategic-Level Marketing

Many HEIs suggested that marketing for LDN programmes needs to be at a strategic level, working with other HEIs and NHS England, and that this would have a positive outcome to the level of applications overall.

#### Recommendation 2:

HEIs to enhance the visibility of LDN Programmes with specific profiling and imagery on all marketing materials

**Local collaboration** between HEIs was seen to be helpful in securing numbers across the board. There were many contributors who felt there was a need for more collaboration between HEIs, and that this needs to be explored to promote LDN and increase applications to programmes. The process of collaboration needs to be seen as a win - win for programme providers with the intention to increase numbers of applications across the nation.

Some HEIs reported work directly with their regional NHS Health Education England (NHSE) and collaboration between HEIs or in the use of video technology to develop resources for marketing and recruitment. The development of pan regional collaborations in some areas related to practice placements has been valued by providers of both programmes and services.

There was frequent reference to HEIs collaborating in relation to LDN recruitment. Discussion on the monetisation of HE was felt to contribute to the competition for students which creates an imbalance between HEIs in localities in England. Instead, collaboration specifically in Learning Disability student recruitment was felt may result in a win-win for all HEIs and result in an increase in the numbers of students recruited nationally. This collaboration could be within NHSE regional boundaries where an overview of workforce needs could be identified.

The development work with NHSE of **virtual placements** is an innovative approach that can support short falls in placement provision of experiences and examples are evident of collaboration between HEIs on this aspect.



Paula
Learning disability nurse consultant

Recommendation 3:

There is a clear need to develop regional collaboration between HEIs to promote LDN programmes

There is evidence of national collaboration with HEIs in LDN at a level of academic staff and nationally with groups such as LIDNAN (Learning / Intellectual Disability Nursing Academic Network) which is a UK and Ireland group consisting of academics working in HEIs. There is also the yearly student conference Positive Choices which has run for successive years bringing together all LDN students.



Jessica Lister
Consultant Nurse Learning Disabilities

#### Recommendation 4:

To further develop and strengthen National networks and collaboration in relation to LDN

**Good Relationships** 

Many HEIs identified that good relationships with local trusts and other providers of services of Learning Disability Services clearly helps maintain application numbers. The inclusion and support of private sector organisations is needed to help with the identification of workforce needs nationally and locally and clarify the rationale for increasing the number of students required. Good Relationships with Service Providers is crucial to the development of apprenticeship routes for LDN for staff already working for the local trusts. However, the workload for the apprenticeship route is far more intense for HEIs due to the involvement of OFSTED and the requirements they have for record keeping for individual student monitoring.

## **Reactivating Placements**

The impact of the Covid pandemic was identified by many HEIs as having a major impact on the availability of community-based placements especially Community Learning Disability Teams where staff worked for most of the time from home. This in some instances impacted on the retention of students. In some areas reactivating community-based placements has been a slow process. Reintroducing students to these placements quickly was seen as a key element in maintaining numbers and reducing attrition.

## **Strong Tripartite Arrangements**

Relationships between HEIs and practice placements for student supervision is seen to have a positive link to retention. These often involve Learning Disability Academics, Practice Supervisors and Students together to review progress. This also has a positive impact on the relationships between the HEIs and Service Providers if the academic has a long-term link to the placement.



Amy Willis
Community Learning Disability Nursing in Barnsley

Recommendation 5:

To develop effective relationships between HEIs and Service Providers

**Keeping UCAS Open** 

It was felt by many that if HEIs maintained UCAS applications past the normal cut off points for other fields that this was a useful approach to meeting programme numbers however there was clear evidence of applicants applying for LDN as a way into the programme to later transfer to other fields especially Adult and Child Nursing.

Some HEIs mentioned that they do not allow in programme transfers to other fields so student numbers in Learning Disability are maintained.

These HEIs clearly outlined this to applicants on the interview days and on post offer days. Some HEIs enable students to swap fields of practice once on the programme, this often impacts on the LDN cohorts disproportionately with students asking to transfer to other fields.

This is often a consequence of HEIs remaining open for UCAS applications for LDN where applicants see this as a back door to other fields. To prevent this there are a few HEIs who do not allow in-course transfers to other fields of practice.



Emily Paterson
Learning disabilities nurse in Suffolk

### Recommendation 6:

Enhance recruitment to LDN Programmes through extended opening of UCAS for applications and identify measures to reduce transfers to other fields of practice

HEIs identified significant differences between generic interview approaches where all applicants are interviewed together irrespective of field of practice and specific interview teams for each field.

The latter tends to be more effective in identifying the specific nature of LDN with applicants and their rationale for applying. The former may pick up candidates who have applied for other fields of practice but have clear prior experience in areas of learning disability.



Sarah Jackson

Consultant Nurse, Associate Director of Nursing and Autism Clinical Pathway Lead at Lancashire & South Cumbria NHS Foundation Trust

#### Recommendation 7:

HEIs should have dedicated field specific interviews with LDN programmes interviews having experts by experience on interview panels.

Learning Disability Academic teaching teams that have a clear and visible presence across all programmes and are involved in teaching in shared modules feel that the presence of Learning Disability in the programme is more visible to other fields of nursing and promotes a positive image to

all students. There is a common belief that there is a need to clearly maintain the identity of LDN students as it is easy for other fields to dominate due to the balance of numbers within each cohort.

#### NMC 2018 Standards

The 2018 NMC standards have provided the opportunity for many HEIs to develop some innovative approaches to teaching and learning on shared modules. These modules enable students to develop a better understanding of the interrelated nature of the roles of the four fields of practice. Some HEIs reported that the 2018 NMC standards have presented obstacles in developing non-traditional placement opportunities for Learning Disability students. Several have managed this by using the distant / long arm supervision model with practice assessors to enable students to work in settings where there are no Learning Disability Nurses but the value of the practice experience to develop enhanced competencies in relation to practice outcomes identified by the HEI.

#### **Positive Values and Student Numbers**

The position of LDN programmes in HEI schools or faculties was a key point raised by many. Where this was positive the programme team felt valued as the programme was seen to be an important part of the overall provision. Where the programme was not felt to be valued the opposite was true. Often student numbers were cited as a factor that may put the LDN programme at risk.

Some HEIs viewed student numbers as separate fields of practice; others saw the numbers of students in relation to the nursing programme. Where the latter was the case, LDN programmes with small numbers were not seen to be at risk. This was a positive element seen as part a result from the interpretation of the 2018 NMC standards where there is a strong emphasis on shared clearing and cross field teaching. This enables small cohorts of students to be seen within the total intake and not separate.



**Ged Jennings** 

Acute Learning Disability Liaison Nurse at the Liverpool University Hospital

#### Recommendation 8:

All Learning Disability Teaching Teams need to have input across shared modules as well as field specific teaching

## **Learning Disability Teaching Teams**

Tend to be small, varying from one to nine members of staff depending on the number and complexity of programme provision. The average team size is four WTE Learning Disability lecturers.

#### **Personalised Relationships**

The enthusiasm of the teaching team is also key in attracting applicants and supporting students. The small cohort sizes enable more personalised relationships to develop. Networking between year groups and Learning Disability student workshops are used by many HEIs to maintain the identity and profile of LDN for students.



Tracey Hartley Smith
Clinical Lead for C&YP Learning disability services in the Wirral

#### Recommendation 9:

LDN Teaching Teams should be a minimum of 4 WTE staff to facilitate Recommendation 8 and balancing out student experience in all fields of nursing

## **Education Not Training**

There was a strong view by many HEIs for the need of programmes to be seen as a process of education and not training with the aim to educate students to become future leaders of services.



**Annemarie** 

## Recommendation 10:

The focus of Programme outcomes should clearly articulate their intention being the education of future leaders of practice

## **Clear Career Pathways**

The need for a clear career pathway was also seen as key to articulating the role of Learning Disability Nurses for applicants and students on the commencement of the programme. Several HEIs identified the need to have clear career pathways identified as marketing tools to attract applicants and to show

the many variable opportunities open to Learning Disability nurses. Career advisors were identified as often giving either outdated or incorrect information to school students. Examples include advice that students had to do Adult nursing first before doing LDN as it enabled greater opportunities for them as the opportunities were limited in LDN.

#### **National Awareness Raising**

There was a unanimous view that there was a need for a national awareness raising exercise across the media on LDN to impact on the public's understanding of the field of practice. To have a positive impact on application to programmes. HEIs felt that they were often doing their utmost to market LDN programmes but were up against a general lack of understanding or even acknowledgement of the existence of LDN amongst the public. A recurrent key theme from all HEIs: People are not aware about LDN as an option to consider when applying to university. This needs to change so HEIs can be more effective in recruiting students to programmes. This also includes challenging myths relating to LDN to tackle the unconscious bias that it is not real nursing.

#### **Ambassadors and Alumni**

The use of ambassadors or the involvement of alumni and practitioners from local services is also key to raising awareness and recruiting greater numbers of students. There is a need to build on the new roles that Learning Disability Nurses are taking on in non-traditional settings, this relates to the need for clear career pathways.



Tanya and Adele

#### Recommendation 11:

There is a strong need to develop a clear vision of career pathways for Learning Disability Nurses outlining various options

## Societal Attitudes and Stigma

Several HEIs mentioned the link between People with a Learning Disability and LDN relating to societal attitudes and stigma towards disability. Despite major attempts to reduce inequalities and stigma and labelling of People with a Learning Disability these values were sometimes seen to be transferred to LDN resulting in it being seen as "not proper nursing" and not as challenging as other fields of nursing

such as Adult and the dominance of the medical model and the focus on clinical skills. One HEI compared this to the concept of "Passing" linked to the Normalisation Principles of the 1980s and 1990s where attributes that were valued were important to be seen to "pass" into being accepted by the dominant norm.

This could be seen in the NMC 2018 Standards Annex B where some of the skills may not relate to the everyday practice of Learning Disability Nurses and contained an element of unconscious bias. This was evident in the comments made to and by students that LDN was not proper nursing, and that view was still evident in many practice settings and staff in HEIs. This was a key element that needed to be challenged by raising the profile of LDN nationally.

### "Not Real Nursing"

Many HEIs identified applicants who had prior experience of People with a Learning Disability or service work often applied for other fields of practice citing that candidates did not know about LDN, did not see it as having a future or felt it was not "real nursing." In some HEIs where candidates to the BSc programmes were identified as having experience of People with a Learning Disability or work in services but were not applying for LDN were sometimes redirected at interview and given the opportunity to consider LDN. In this situation some candidates did take up the offer of LDN, but others wished to continue with Higher Education their original application to another field of practice.

The idea of not being "a real Nurse" often comes from discussions with peers, other faculty members, practitioners in non-specialist areas. The impact of Learning Disability practitioners who function as practice supervisors and are positive and innovative is key to student retention.

## **Multiple Job Offers**

By the end of programmes every HEI indicated that students had multiple job offers before graduation, having three to four was seen as the norm, however as mentioned before candidates and indeed students either think or are told that there are no jobs in LDN. The positive aspect of students having multiple job offers masks the reality of the difference between workforce needs and output of students from HEIs in terms of numbers of registrants exiting on graduation.

## **Workforce Planning**

According to many HEIs, workforce planning needs to identify not just NHS needs but also Social Care and Private Sector provision. This is often seen to happen in London based HEIs but is applicable to all.

#### Recommendation 12:

There is a clear need to develop a programme of awareness raising relating to LDN, challenging myths and misunderstandings

#### **Positive Involvement**

The positive involvement of People with a Learning Disability or Experts by Experience was identified by multiple HEIs starting from course development, recruitment / interviewing, to teaching and mentoring students was key in outlining the importance of person centredness and inclusion in all aspects of services including non- specialist service provision in acute hospitals.

This was an area in which HEIs felt LDN excelled but needed to celebrate and share more visibly within programmes and marketing materials for applicants.



## Recommendation 13:

Involvement of people with a Learning Disability or Experts by Experience in all aspects of LDN programme development to enhance the appropriateness and currency of the content delivered

#### **First Placement**

Retention of Learning Disability students is key once on the programme. Many HEIs cited the importance of the first placement in Year 1 as being key as it sets up a vision for students that can confirm the choice of field of practice for them. The first placement needed to be in a LDN setting.



## Recommendation 14:

HEIs should ensure LDN students have their first placement in a field specific setting

## **National Placement Database**

A large proportion of HEIs felt that there was a need for a national database (England) of clinical placements that could be accessed for Learning Disability student placements in specialist services which would also contains staff profiles. This would need to be a live database updated as changes occur and for those involved to be signed up to the information being shared in line with data protection. This would be a tool that would have a positive contribution to the experience of all LDN students in relation to breadth and depth of experience.

## **High Quality Placements**

Many HEIs cite that the desire to increase Learning Disability student numbers is limited by the existence of high-quality placements. The 2018 NMC standards are seen by some to limit the creative use of practice experiences for students. However, some HEIs have developed the use of Hub/Spoke models where the Hub is the Learning Disability practitioner who provides long arm supervision in non-traditional settings.

#### **Flexible Placement Provision**

Again, HEIs several have identified the need for flexible placement provision and the need to link with services for placements where there is not a local HEI delivering a LDN programme. Some HEIs have a dedicated member of staff whose role includes looking for new placements as well as maintaining the current circuit.



### Recommendation 15:

There is a need to coordinate the development of student placements both at a regional and national level and to share information that will enhance the quality of student experience

#### **Joint Courses**

Of the 32 HEIs that run LDN programmes, three provide a joint social work / Nursing option. These identified recruitment as being buoyant possibly because they are seen to offer three qualifications for the price of one. These programmes reported that they have no problems recruiting to the numbers required further suggesting that the numbers recruited to the programmes was rising year on year.

The fact that there are only three providers of this programme may be one factor that leads to their successful recruitment. However, the flexibility between social work and nursing may also be a factor. Whether increasing the number of HEIs running a joint programme would have an impact on the numbers applying is open to debate but this remains a real option for LDN.



**Diana**Learning disability nurse

#### Recommendation 16:

To promote joint Social Work and LDN programmes as viable and attractive options to traditional Nursing programme design

#### **Programme Design**

There are variations in programme design that enable HEIs to recruit students to Learning Disability Programmes. The use of a foundation year added to the standard BSc 3-year programmes enables applicants who do not achieve the required entrance tariff for direct entry to the 3-year programme. HEIs require A Level results BBC or equivalent. The use of the generic foundation year prepares students who achieve the equivalent of DDD at A Level to meet the levels required for entry to Year 1 of the BSc programme. The foundation years tend to be academic preparation and have no practice element. Students who successfully complete the foundation year are guaranteed a place on the BSc programme.

#### **Innovative Programme Design**

Innovative approaches to programme design include blended learning which by default was fast tracked by many HEIs because of the Covid pandemic with the proliferation of online learning. However, some HEIs have taken this further with blended learning being further developed in a similar way to the approach used by the Open University. Students from diverse geographical areas have most of their academic learning online. Although clinical skills development requires students to come on campus, practice experience is gained in the students' home settings with practice supervision being conducted by locally based Learning Disability Nurses that have support from the host HEI.

### **New Programmes**

HEIs with new Learning Disability programmes highlighted the need to raise awareness of the programme far greater than those more established courses where there is a local network and identity with the HEI and service providers. There is evidence of HEIs developing new programmes in areas where there had previously been a programme that had been stopped by another HEI due to insufficient numbers of applicants. Sometimes the new HEI had good initial numbers of students recruited to the programmes compared to the former provider. This highlights that the marketing of the new programmes had raised awareness and interest and was in part the novelty of it.

## **Foundation Degrees**

Some HEIs use Foundation Degrees or Nurse Associate programmes to enable students to start Year 2 of the BSc programmes and can also be a non-standard route which is used by local service providers. The use of foundation years for applicants who do not meet the tariff for the BSc intake (normally BBC) is a useful adjunct as this brings them up to the level required and guarantees them a place on the course. However, this does attract tuition fees of £9250 compared to an Access Course which may only have fees of £3000.

#### **Apprenticeships**

There is a growing use of the apprenticeship model by HEIs who have well developed relationships with local service providers. This is often more successful when there is large specialist Learning Disability service provision which can generate a flow through of employees who can follow the apprenticeship route.

### **Preparation for Academic Study**

Short fast track courses are sometimes run by HEIs for applicants to enable them to come up to speed in their academic skills and their understanding of university processes. This tends to be for those applicants who have been out of academia for a period and fits into the needs of the more mature student cohorts.

## The Open University

The OU has been well established in running Nursing programmes, however LDN was only included in 2020. The OU follows the 2018 NMC standards in the structure of ITE programmes with modules being generic and shared by all students. Practice experience is within the students' home / work areas and is supported by local tutors and practice supervisors across all countries in the UK.

All students are employed by local trusts in a way like the apprenticeship model. Comprehensive tripartite support leads to a very low level of attrition as service providers are sponsoring most students through the OU therefore services have a vested interest in it.



Ben

#### Recommendation 17:

HEIs to develop a range of routes to registration by innovative programme design to enable greater opportunities for wider participation from applicants

## **Websites**

HEI websites play a key role as a port of call for applicants prior to interview or at decision making points for UCAS. Imagery, information, and identity of LDN is key. The use of stock images of nursing can be unhelpful. Links to videos and podcasts with staff and students are useful adjuncts to generic course information. Accessibility of HEI websites for applicants is vital in creating a picture of what is being provided. Some websites had inaccessible areas in relation to staff teaching on the programmes and general staff profiles.

Often this makes it difficult to contact key personnel to explore questions relating to programmes which are not included in FAQs or at open days prior to application. Some HEIs had no details about faculty teaching staff on the outward facing website pages; others had clear links outlining staff profiles including experience and interest relating to LDN and teaching. These gave students a clear picture of people and their interests. The HEIs with detailed and clear information specifically about the Learning

Disability programme, staff, and students, have a much higher level of marketing impact on the applications from potential students.

Website imagery of students needs to show a representation of difference. This is an important aspect for People with a Learning Disability and LDN and where there is a representation of BAME groups. This needs to be across the board and not just in areas with high numbers of people with diverse ethnicity.



Recommendation 18:

HEIs to review website design and focus including imagery and language to enhance the visibility of Learning Disability programmes

## **Geographical Distance**

The distance between HEI campuses and practice settings was seen to be a key factor in the recruitment and retention of students in LDN programmes. Where inner city-based campuses with city wide services enable students to have easy access to placements with little travel being incurred. More rural campuses where services were dispersed resulted in students traveling great distances to placements sometimes incurring overnight stays.

The supporting provision for students in these situations was often limited or underfunded which sometimes functioned as a disincentive for students either in applying or remaining on the programme or transferring to another field of practice.

#### Geography

There is a thought from some HEIs that those who are campus based are more attractive to applicants when everything is on one site although this depends on the HEI and the area it is located in. Geography and the attractiveness of the town or city can be a strong influencing point for some. Also having a diversity of LDN programme provision can be helpful in attracting applicants who are at different stages in their life and social circumstances.



## Recommendation 19:

That there is some thought given to the effect of geography on the marketing of programmes and that this is considered in relation to recruitment and retention of students and factors put in place to mitigate issues that may cause student hardship

## **Successful Recruitment**

For a few HEIs recruitment has never been a problem with the factors influencing this including:

- The size and number of services in the local NHS trusts and private sector organisations.
- The local catchment area served by the HEIs has a large pool of interested applicants and is viewed highly in the local community.
- Student satisfaction surveys rate the HEIs highly and this is detailed on the faculty websites.
- Also in these areas local practitioners provide positive role models and profiles to local services where many applicants work prior to applying to the programmes.

 Some HEIs have locally based cohorts of mature applicants with families who have fixed ties to the area so are more likely to apply to the programmes provided by their local University.

All these measures are seen to have a positive impact on student retention and are clearly linked to the concepts of attract and retain elements of the All England plan for LDN.

