

# Financing and investment



## Overview of actions

LSIF funding combined capital for advanced facilities with revenue for engagement and staff development. This dual approach created authentic learning spaces and collaborative forums, positioning colleges as sector partners. Post-funding, financial sustainability relied on reciprocal arrangements, CPD and embedding shared practices into everyday delivery.

## Bidding to begin

Before any transformation could start, the West London colleges had to secure LSIF funding through a competitive bidding process.

- **Competitive bidding process** – Colleges submitted detailed proposals aligned with LSIP priorities, focusing on health and social care as a critical workforce need.
- **Lead college co-ordination** – HRUC acted as lead for health and social care across four West London colleges, shaping shared objectives and managing bid development.
- **Provider-informed design** – Early engagement with West London Business and Skills for Care ensured the voice of the provider was embedded in bid planning and facility specifications.
- **Balanced investment model** – Funding proposals combined capital investment for advanced facilities with revenue streams for staff development and collaborative activity.
- **Positioning as sector partners** – Successful bids emphasised shared responsibility for workforce development, moving beyond transactional training provision. Four colleges collaborated under LSIF, with HRUC leading on health and social care to maintain consistency and sector alignment.



# Using original funding to secure engagement

LSIF funding was deployed strategically to combine infrastructure with engagement. While capital investment created advanced facilities, revenue funding enabled forums, staff training and provider collaboration – turning physical spaces into active learning environments and forging partnerships that embedded workforce priorities into curriculum and practice.

- **Provider-led specifications** – Consultations shaped equipment selection, from ceiling-mounted hoists to realistic ward layouts, reinforcing credibility and confidence in training quality.
- **Consistent learner experience** – Harrow and Uxbridge received full-scale installations, while Richmond integrated care facilities alongside STEM investment, guaranteeing parity across campuses.
- **Structured collaboration forums** – Revenue funding supported early roundtables and forums, convening colleges, Skills for Care, local alliances and providers to co-design solutions.
- **Reciprocal value model** – Providers using facilities contributed expertise through guest lectures and placements, reinforcing mutual benefit.

**“Our engagement is low-cost – mainly time – and offers significant benefits. You’ll access free or subsidised training and ready-to-work students.”**

**Pushpo Deb**, Registered Manager, Hand on Heart Care



# Post-LSIF financial sustainability

When LSIF funding ended, the challenge shifted from implementation to sustainability. HRUC focused on embedding collaborative practices and maximising the value of facilities, ensuring they continued to serve both curriculum and sector needs without reliance on dedicated budgets.

- **Commitment beyond funding** – HRUC pledged to maintain forums and collaborative activity through relationships and embedded practice rather than LSIF grant funding.
- **Dual-purpose facilities** – Spaces now deliver curriculum and sector-wide CPD, including manual handling refreshers, maximising return on investment.
- **Cost-efficient engagement** – Reciprocal arrangements allow providers to share expertise while colleges provide space, sustaining collaboration without financial strain.
- **Continuous staff development** – Ongoing CPD and provider-led training prevent under-utilisation and keep pedagogy aligned with industry standards.
- **Bridging to long term pathways** – Short, funded programmes like boot camps help learners progress into longer term routes such as apprenticeships, creating continuity even when funding is only available for a limited time.
- **Transparent communication** – Clear messaging on funding time lines builds trust and manages expectations among partners.
- **Co-commission training on campus** – Providers can self-organise and fund mandatory programmes (e.g., Oliver McGowan training) hosted at college sites, with staff joining as learners to strengthen shared practice.





## Key decisions

- Combined capital and revenue funding to create advanced facilities and engagement activities, ensuring infrastructure delivered real workforce impact.
- Standardised equipment and immersive technologies across campuses for consistent learner experience and provider confidence.
- Positioned facilities as shared sector assets for CPD and collaborative curriculum design, not just college use.
- Adopted a reciprocal engagement model where providers exchanged expertise and placements for access to specialist spaces.

## Key learning

Sustained impact depends on more than funding – it requires authentic collaboration, confidence in delivery and a clear value proposition for providers.

- **Relationship-driven success** – Sustained engagement requires multiple touch points and trust-building, not one-off events; ongoing dialogue helps providers feel invested and ensures partnerships remain active beyond initial funding.
- **Facilities as leverage** – Providers respond to tangible value such as advanced environments, which reduce onboarding costs and provide realistic training spaces, and are far more compelling than abstract qualifications alone.
- **Embedding for sustainability** – Long-term success depends on practices, not short-term funding cycles; integrating provider partnerships into everyday delivery prevents engagement dropping when grants end.

