

30 June 2016

An open letter from the Queen's Nursing Institute

Department of Health Consultation
Reforming healthcare education funding: creating a sustainable future workforce

The QNI is extremely concerned about current changes to the NHS bursary system. We believe that unsustainable changes to the NHS workforce may result in patient care and patient safety being put at risk. We have responded in detail to the Department of Health consultation and this letter summarises our position.

Three major changes to nurse funding have the potential to destabilise the NHS in England: the introduction of funding by Health Education England (HEE) for the development of Nursing Associates, the removal of the HEE bursary for *pre-registration* funding and the withdrawal of HEE funding for *post-registration* specialist and advanced education and training. In addition we have particular concerns on the following points:

- The introduction of NMC Revalidation at the same time as funding is being withdrawn for post-registration specialist and advanced practice, providing fewer opportunities for nurses to access appropriate development for their role;
- The withdrawal of the UK from the EU; which may impact on the number of European nurses able to join the NHS in future years;
- The challenge to increase the number of high quality student placements along with the essential increase in qualified mentors to meet the anticipated increase in the numbers of student nurses;
- The lack of detail around the way in which the universities and placements will continue to be supported financially under the new funding regime;
- The need to have all the details in place to allow universities to prepare their recruitment materials for use in September 2016, for the cohorts of student nurses and Allied Health Professionals to apply to start their programmes in September 2017.

Pre-registration nursing programmes

The QNI believes that mature students will be deterred from applying in the same numbers as they do now and it is likely to become increasingly difficult to attract mature students into nursing. Areas which commonly recruit the mature students as a first destination will be disproportionately affected, including community and general practice.

Nursing students are more likely to be older (the average age is currently 28.5 years), female and require maternity support in comparison to the general student population. Therefore, we urge the government to provide the same level of support under the new arrangements as the current 12 month support available under the NHS Bursary Scheme. In addition, nursing students are required to study for more weeks each year than students studying for degrees which do not include a placement component or professional qualification, reducing their availability for paid employment to supplement other financial support.

In making these reforms to bring nurses, midwives and allied health professionals in line with their medical student colleagues, the Government's approach to the healthcare professions could be seen potentially discriminatory. For example:

1. When taking out a loan for their tuition fees, at £9,000 per year student nurses are paying **for the majority of the real cost** of their programme and there is no DH bursary for the last year of the programme.
2. When their medical colleagues take out a loan for their tuition fees, £9,000 per year covers **a small proportion of the real cost** of their programme and the DH provides a universal non-means tested bursary for the final year of the programme to cover all tuition fees for medical students.

After qualifying, it is recognised that medical students are likely to go on to have much greater earning power than their nursing colleagues and will pay back their student loans much sooner.

As well as being a barrier to student nurses studying in London, rising accommodation costs have led to an increase in registered nurse vacancies, threatening placement capacity and workforce supply. A survey by the Royal College of Nursing found that 40% of London nurses expect to leave the capital by 2021 because housing costs are so high (RCN, 2016).

Even with the bursary scheme in place and no tuition fees, universities already have difficulties recruiting students to adult nursing and mental health nursing programmes. It is not possible to imagine how universities will attract more students when even the most highly rated universities struggle to meet HEE contracted numbers, as well as find high quality placements and suitably qualified mentors.

A further point is that just because the figures show there are three applicants for every place does not mean that all those applying for a place meet the entry requirements. HEE states that **values-based recruitment** should be used to recruit students. It is vital that nursing students have the values and behaviours to provide high quality, safe and compassionate care, particularly following the recommendations of the Francis Report (Francis, 2013). As universities strive to meet higher targets following the proposed funding reforms, there is a risk that nursing courses will enter clearing and universities will lower their entry requirements.

Post-registration specialist and advanced nursing programmes

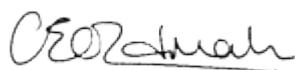
The QNI is very concerned that *post-registration* nursing programmes leading to an academic and professional award will be impacted by the reforms to *pre-registration* nurse education. We understand that funding from Health Education England will be withdrawn for programmes such as District Nursing, Health Visiting, School Nursing, Advanced Practice, Nurse Practitioner and Independent Prescribing from September 2017. This will have a detrimental impact on patient safety and is contrary to the Government's strategy of supporting more care being delivered closer to home as described in the Five Year Forward View (NHS England, 2014).

Should HEE funding be withdrawn for these post-registration programmes in 2017 there is a significant risk that there would be an immediate reduction in nurses undertaking post-registration specialist and advanced programmes. Furthermore, with a reduction in student numbers, university programmes may become unviable, leading to the closure of specialist and advanced nursing programmes and consequent redundancies. Such a situation would take years to reverse.

The Secretary of State for Health has an obligation to ensure the security of supply of the professionally qualified clinical workforce. The QNI questions how the Secretary of State will fulfil this obligation in the context of these reforms, particularly in relation to the nursing workforce in community and primary care settings.

The QNI calls for the Government to explore an alternative funding model for nursing, midwifery and allied health courses that would secure control of the future workforce. The Government also needs to address the risk to the stability of the NHS if its prediction of the number expected of students following the reforms is wrong. The lasting impact on the NHS will be immense if insufficient students enter training for several years running and the student pipeline is put at risk. This applies equally to both pre-registration education and post-registration specialist and advanced practice programmes.

The QNI therefore asks that the Department of Health provides clarity on the future funding model for post-registration nursing programmes that lead to registrable and recordable qualifications as a matter of urgency and conducts a wide consultation and risk assessment before any changes are made.



Dr Crystal Oldman
Chief Executive
The Queen's Nursing Institute