

Royal College of Nursing briefing on nursing education in England and its implications for the future supply of nursing staff

Key summary

- The Government reforms to undergraduate nursing education in England are failing to increase the number of nursing students.
- Overall, applications to nursing courses have fallen by 33% since the same time in March 2016. Applications from mature students fallen by 42%.
- This is at a time when the nursing workforce is in crisis. The NHS in England has approximately 40,000 nursing vacancies and a National Audit Office (NAO) report on the social care workforce showed that the vacancy rate for nurses more than doubled between 2012-13 and 2016-17. More nurses and midwives are leaving the profession before retirement and one in three nurses are due to retire within the next ten years. The impact of the EU referendum appears to be driving nurses away from the EU and the Care Quality Commission and NAO has raised safety concerns relating to nursing shortages.
- Plans by the Government to remove the NHS Bursary for postgraduate preregistration students^{xii} in England are short sighted and run contrary to the Government's aspiration to grow the supply of the future nursing workforce. This route is currently the fastest way (2 years) from education to the workforce.
- The removal of the NHS Bursary for postgraduate pre-registration nursing students should be halted until the Government review of post-18 education has reported to avoid potential multiple changes to a delicate ecosystem with a direct impact on nursing workforce supply.
- Nursing students need bespoke financial support if the UK Government is to meet its commitment to grow the nursing workforce and meet future population demand for health and care services. We have proposed a number of policy options for the UK Government to take:
 - 1. **Grants for placements:** provides universal direct support to all healthcare students.
 - 2. **Investment in health care education through employers:** provides the means to significantly pump-prime workforce growth through a local market-led approach, rather than central commissions.
 - Means-tested grants: ensure that the existing diversity of the student population with regards to socio economic background and the widening participation agenda is preserved.
 - 4. **Targeted support for parents and carers:** extend existing hardship funding, supporting what Government has already committed to do, to support students with caring responsibilities and those suffering severe hardship.



Further information

Entry routes into the nursing workforce

The fastest and most effective route into registered nursing is through higher education.xiii There are two established routes onto the nursing register, also known as pre-registration training:

- The three-year undergraduate university nursing degree.
- The two-year postgraduate degree/diploma route for students who already have a degree in another subject and wish to train as a nurse. This represents a small and under-utilised route into the nursing workforce.

There are existing options for expanded use, such as a two-year postgraduate route, which costs £33,500 per student. This is less than the average annual premium paid by trusts over a single year for a full-time equivalent agency nurse filling a post vacant due to shortages.xiv

New routes in nursing

The Government claims^{xv} it is prioritising new routes into nursing such as the nursing associate and apprenticeship route. However, the apprenticeship route is not currently providing the 1000 new nursing apprentices per year as intended by Government, and does not currently present a meaningful solution to the nursing workforce crisis. Most recent data suggests that there are just 30 nursing apprentices in total.^{xvi} Also, it will take a nurse apprentice four years to become and registered nurse compared to the undergraduate route and will not address the current shortfall of registered nurses.

The nursing associate is a support role and should not be used as a substitute for registered nurses. The research is clear: diluting and substituting the registered nursing workforce with nursing support workers has potentially life-threatening consequences for patients.^{xvii} Although the plan is for progression routes to allow nursing associates to progress to become registered nurses^{xviii}, in total it would take at least four years to train a registered nurse this way.

The impact of introducing tuition fees to undergraduate nursing students

By moving nursing students onto loans, Government assumed that opening up higher education to the 'market' would increase the number of students within higher education. However, in the first year after the reform, universities have not seen the expected expansion in the number of nursing students. This means there will not be an increase in newly qualified nurses in 2020. While we acknowledge students accepted onto nursing courses was better than expected, with a 3% decline on 2016, xix the stated policy aim of the reforms was to increase student numbers and grow the future workforce we desperately need and this has not happened. However, for students applying to start courses this autumn, we are seeing another fall of 14% compared to the same time last year, a total fall of 33% since 2016.^{XX}

Changes to the nursing student profile

We know that the profile of higher education undergraduate students appears to be changing, with applicants now younger than in previous years. Applications from mature students have been disproportionately affected by the funding reform, with applicants aged over 25 having fallen by -42% by March 2018 when compared to March 2016.** This has resulted in a smaller number of mature applicants placed onto nursing programmes. The profession and health care



services benefit from workforce entrants with significant life experience and they are more likely to remain in the profession and are likely to choose the shortage areas of mental health or learning disability nursing. This drop may therefore increase pressures on the already existing staff shortages in these fields, where there were cuts of 38% (-2,024) across all learning disabilities settings and -11% (-4,547) across all mental health settings since 2010. xxiii

While we recognise some efforts have been made in making additional allowances available to these students we fear that these measures are unlikely to be enough to attract this particular student group as there is a significant risk that the prospect of further student debt will be such a considerable deterrent that this group will simply not apply.

The benefit of the postgraduate route into nursing

Just 5%^{xxiii} of first-year students in 2015/16 studied at a postgraduate level. Yet, this route offers a significant untapped opportunity to grow the workforce through training existing graduates within 18 months to two years. The Department of Health and Social Care (DHSC) strategically investing in this would bring real and immediate benefits to growing the nursing workforce to meet future demand.

Education providers estimate that many postgraduate courses could expand by around 50% if more funding were available. They also estimate that funding tuition costs for these programmes at the 2018 fee rate for undergraduate studies (£9,250 per year) and providing a modest student bursary of £7,500 per student per year towards living costs, would significantly support programme expansion. The total cost of this through a two-year postgraduate route would be £33,500 per student. This is less than the average annual premium paid by trusts over a single year for a full-time equivalent agency nurse.*

The potential impact of removing the NHS Bursary for postgraduates nursing students

We understand that universities need clarity on the future of postgraduate pre-registration funding. However, we know that the sector is open to the use of flexible approaches by the Government and policymakers alongside the reforms to support student participation and boost workforce numbers.

Incentives for the higher education route into nursing

Financial support for living costs to incentivise a wider range of applications could take the form of: **universal grants for students** in recognition of their placements; **means-tested grants** to maintain diversity; and/or **targeted support for parents and carers**. For a local targeted approach, a central fund could be created within the DHSC. Employers could access this pot to



receive dedicated funding to incentivise and grow the required workforce in their area, for example through tuition fee write off or stipends in recognition of service.

As well as graduates of other subjects, strategic initiatives that target people who already work in the health care system, recognising prior learning and enabling progression to degrees and registration are critically important. Not only might such initiatives – deployed at scale – play a key role in meeting the demand for a clinical workforce, they also widen participation in these professional courses. This is a core mission of higher education, a stated aim of the Government and can also bring significant benefits to the diversity and quality of the workforce.

About the Royal College of Nursing

The RCN is the voice of nursing across the UK and the largest professional union of nursing staff in the world.

For further information, please contact John Considine, Public Affairs Adviser, on John.Considine@rcn.org.uk or 020 7647 3731.

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