30 June 2016

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



A written submission from Together for Short Lives

4. Are there circumstances, as set out above or otherwise, in which the standard student support system which would be available for nursing, midwifery and allied health students would be inadequate or limit participation? Why is this? We are specifically interested in cases where an individual's circumstances mean that they would not fully benefit from the increase in living cost support or to the same extent as other students.

Together for Short Lives is concerned that the removal of student bursaries for nurses, midwives and allied health professionals could have an adverse effect on the number of students choosing to study these courses. Although under the current proposals students would still have access to funding through student loans, we share the concern of the Royal College of Nursing that potential students may be put off by the prospect of accruing more long-term debt.

This is evidenced by the June 2016 Royal College of Nursing survey of 17,000 nursing staff (<u>http://bit.ly/28RxAkl</u>), which found that two-thirds of them would not have studied nursing if they had to take out a full student loan for fees and maintenance.

The average age of a nursing student in the UK is 29 and many of these students are studying for their second degree. Although the proposals exempt these students from current restrictions – which state that students studying a second degree are not eligible for student loans – we are concerned that these students will be reluctant to take on the burden of a second student loan.

We therefore support the Royal College of Nursing position that further evidence is required to demonstrate that nursing, midwifery or other allied health students who are studying for a second degree would be prepared to take on a second student loan in order to study.

14. Do you have any further comments on this consultation which you think the government should consider?

Removal of cap on student nurse training places

The consultation impact assessment document states that 'it has been estimated that some 10,000 more places in total might be made available by the end of this parliament' (p2). As evidenced below, the children's palliative care sector faces a nursing shortage and has additional recruitment challenges when compared to the NHS. The goal of increasing nursing training places by 10,000 is therefore a welcome step.

However, at present the impact assessment provides no evidence to support this figure and it is not evident that the proposals would result in an increase in student nurses, midwives and other allied health professionals.

Together for Short Lives' survey of voluntary sector children's palliative care organisations (<u>http://bit.ly/1Ltfjqr</u>) shows that they employ approximately 1,500 nurses in the UK. The average vacancy rate for these organisations is 10%, which is higher than the NHS nurse vacancy rate (7%). This has resulted in two thirds of services reducing their offer of care to families – closing beds, reducing respite care, or having an effect on continuity of care. This survey also shows that over a quarter of nurses for voluntary sector children's palliative care organisations are over the age of 50 and many of these will be eligible to retire at 55.

The voluntary and community children's palliative care sector has a further recruitment challenge caused by the difference in terms and conditions between NHS and voluntary sector providers – the most commonly suggested reason for nursing vacancies was terms and conditions, including salary, shift systems and annual leave.

Together for Short Lives would like the government to make sure that there are sufficient numbers of people with the skills, knowledge and competencies needed to care for children with complex, life-shortening conditions in the UK. We are therefore concerned that these proposals to do not provide sufficient evidence as to how the number of student nursing placements will increase by 10,000.

Workforce statistics

As described above, children's palliative care relies on having the right number of nurses in place with the skills to take care of children with life-shortening conditions. We remain concerned that, currently, non-NHS nurses such as those who work in children's hospices are not included in official workforce statistics. These nurses are crucial to the ongoing care of children with life-shortening conditions. The lack of an accurate snapshot of the current UK nursing workforce, makes it difficult for nursing education planners to make sure that there are the right numbers of nurses with the right skills to work in areas such as children's palliative care.

Student placements

Our research shows that the voluntary children's palliative care sector provided placements for over 600 nursing students during 2014-15. Most of the students were in the second or third year of their training – but one third of organisations said they supported first year students too.

The proposed increase in nurse training places offers an opportunity to further develop the links between universities that provide nurse training and voluntary organisations that deliver children's palliative care. However, currently 40% of voluntary sector children's palliative care providers receive no funding for providing these placements, while others receive approximately £80 per week. These organisations provide valuable experience to trainee nurses and the government should make sure that they are reimbursed so that they can maximise the number and quality of placements on offer.

For more information, please contact:

James Cooper Public Affairs and Policy Manager 0117 989 7820 07415 227 731 james.cooper@togetherforshortlives.org.uk

Patrick McKenna Public Affairs and Policy Officer 0117 989 7820 07964 470 879 patrick.mckenna@togetherforshortlives.org.uk