

## **“Nurse Education is Big Business for British Universities.”**

### **One UK nurse educator - Kevin Corbett - critically reflects on the move to fee-paying student nurses.**

The lobby group comprised of the existing British university departments which offer nursing degree programmes – the ominously sounding ‘Council of Deans’ (CoD) – has previously claimed that the actual costs of nursing education are being heavily (and reluctantly) subsidised by the universities (CoD, 2014). Given the emotions and facts circulating about the public removal of the student nurse bursary (e.g. Snell 2016), it is important to remember the actual significance of the income which is generated for the British university sector by the existence of the nursing degree programmes within higher education. This income, which has flowed into the British universities since they assimilated the old NHS nurse training schools run by the Regional Health Authorities, has helped to build vast teaching and research capacity as well as brand spanking new campus real estate. Indeed, some of the newest build within our universities even have plaques sited on their walls attesting to their NHS links [see photo below].

The perception of a bloated university sector is very hard to dispel and such perceptions are widely shared within this current Conservative Government. For example, last year Nick Hillman, the director of the Higher Education Policy Institute and a former government adviser, writing in the London Guardian, cited senior civil servants as saying that universities are seen by Government as being “awash with cash” and “worse than bankers” (Hillman, 2015). Hillman quoted Bill Rammell, vice-chancellor of the University of Bedfordshire (and a former Labour universities minister), as agreeing that the universities have actually become much wealthier than the rest of the public sector following this Conservative Government’s nationwide imposition of austerity policies. There is also the adage that NHS staff view the universities as having taken over ‘their’ nursing schools, as implied by Anne Keen (then MP for Brentford & Isleworth) in a 1999 parliamentary debate on nurse education (Keen 1999). With the imminent demise of the bursary (forget the window dressing ‘consultation’), the universities will become responsible, not just for the delivery of nurse education (under ‘light touch’ NMC regulation) but also, more

importantly, for its total funding. This completes the full denationalisation of nurse education – like an industrial utility – through its outsourcing to the universities.

Within this whole debate it is vital to understand one key fact now masked by the hoo-ha over the bursary cuts. Although last autumn's Treasury diktat on degree funding switching from NHS to university levied fees is spectacularly unpopular with nursing students, it is actually quite popular with the universities, as shown in a CoD briefing paper published after the diktat which said that student nurses would be wealthier under the new fee paying regime (CoD 2015a). From September 2017, preparing a registered nurse (RN) in a British university may cost a prospective student at a conservative estimate upwards of c. £40k (CoD 2015a)(and much higher if maintenance costs are factored in). This situation has arisen in part due to the CoD's lobby of this Conservative Government which views the CoD as the representative of the "voice" (CoD 2015b) of the nurse education 'industry' (or should one say, 'utility'?) It shows not just that today's politics is often driven by lobbyism, but also that this Government truly sees nurse education as a utility, and, just like the railways or gas, one which can be outsourced at a cost within the market. There is even a metric called the 'benchmark price' by which Government calculates the price of training a nurse in British universities. Both the Government (Department of Health (DoH)) and the CoD, through deploying such evidence have successfully developed tropes like, for example, two out of three applicants for every nursing degree course are turned away (DoH 2016), and that high attrition rates plague all nursing degree programmes (Christie+Co, 2015). These sorts of quantitative tropes are highly seductive, make good 'spin' headlines and so are increasingly pervasive and hard to counter using arguments about 'quality', 'vocation' or the 'right applicant', because in so doing one may be dismissed as archaic, retrograde or 'old fashioned' (or harking back to a *Call The Midwife* era?), or as being 'unorthodox' by opposing an official 'evidence based' mainstream that publicly portrays itself as expanding the RN workforce.

What should be publicly debated are not just the bursary cuts but the ramifications of so doing which actually mean the complete lifting of the NHS cap on student nurse numbers inside universities. In essence this is a debate over educating new RNs by creating an open market possibly based on some dubious values (Corbett 1998).

These Treasury proposals are expected to open up the floodgates so that more and more students are fiscally 'enabled', through the student loan system, to enter the universities as fee-payers (CoD 2015a). In this way the funding of nursing degrees which up to now have been the public responsibility of the Government's Department of Health (DoH 2016) becomes that of the universities. All final year students - called the 'supply side' in market terms - mostly want jobs on graduation so stemming the shortage of 'home grown' RNs. The pernicious argument that 'investing in your career' by paying university fees will become a very difficult one to counter after the bursary cuts as then no alternative will exist to students being forced to pay increasingly higher university fees in order to become a RN.

In fiscal terms, however, this paradigm shift can only mean '*socko biz*' for British universities, even though there is literally nowhere to seat these additional students on the campuses, and certainly, little extra capacity above the present estate. Added to this is that few are mentioning the real difficulties which the universities are now having in terms of recruiting and retaining registered nurse educators, who are not just academically prepared lecturers but also must be registered with the NMC as both RNs and educators. Further difficulties will arise within the NHS where very little (if any) extra placement capacity exists for these prospective students to learn safe practice.

The universities seems to be paying very little heed to these seemingly fatal oversights, possibly fuelled by our present government's policy obsession with any future 'spun' election headlines (cf. '*Conservative government trains thousands more nurses etc.*') and its pathological expectation of ever increasing income generation, an avaricious and uncomfortable purpose of the modern university as shown by Collini (2012). Some sources are even predicting increased market entry by more 'private' universities (e.g. BPP) and more fierce competition amongst the existing providers, for what could be, after the demise of the bursary, a 'race to the bottom' (to quote Hillman's phrase), as universities scramble to recruit new nursing students from an ever dwindling supply of 'home grown' talent.

**Kevin Corbett is a senior lecturer in adult nursing at Middlesex University London. The views and opinions in this article are those of the author.**

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Lord Darzi opens Buckinghamshire New University's new Uxbridge Campus for student nurses in 2009 supported by NHS London. Source: Nursing Times.

<http://www.nursingtimes.net/lord-darzi-opens-new-nurse-education-facility-5009478.fullarticle>