Response to the Welsh Government Consultation on Student Support Arrangements

August 2018



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The Royal College of Midwives' response to Student Support Arrangements

The Royal College of Midwives (RCM) is the trade union and professional organisation that represents the vast majority of practising midwives in the UK. It is the only such organisation run by midwives for midwives. The RCM is the voice of midwifery, providing excellence in representation, professional leadership, education and influence for and on behalf of midwives. We actively support and campaign for improvements to maternity services and provide professional leadership for one of the most established clinical disciplines.

The RCM welcomes the opportunity to respond to this consultation and our views are set out below.

1. Should the Welsh Government continue to provide support to those studying health care related programmes?

Yes. The RCM believe and have lobbied for the Welsh Government to continue to provide support to students studying Health care related programmes. This is for two reasons.

Firstly, it is important that the NHS workforce reflects the people it cares for and that anyone who wants to dedicate their career to caring for others can have that ambition realised. Financial support from the Welsh Government enables the best and brightest – whatever their circumstances – to join the NHS.

We have seen a decline in the number of students wanting to study midwifery recently. Years of pay restraint and pressures on the service have sadly made careers in the NHS less popular than before. The RCM welcomed the announcement by Health Secretary, Vaughan Gething on a new pay offer for midwives, maternity support workers and all other NHS staff in Wales, which is currently out for consultation to our members. Introducing student loans and abolishing the bursary – as they have done in England - would mean midwifery graduates could enter the workforce with a debt of £50,000, further discouraging potential midwives that Welsh women and their families desperately need. We have an aging workforce in Midwifery and loss of support to study could see a potential shortage of midwives in Wales. We simply cannot afford to take this risk.

Secondly, there are limited options for midwifery training to be flexible because of the need for clinical placements alongside traditional study. Midwifery students spend 2300 hours in the education in a university setting¹, then spend another 2300 hours in practice placements in the NHS. Most midwifery students are unable to take on part-time work because of this commitment and having access to good quality childcare and care support is essential for them to be able to undertake a midwifery course. Approximately 41% of nursing, midwifery and allied health professional students are aged over 25, compared to 18% of the wider student population². Midwifery students simply aren't like students studying in other non-healthcare disciplines and the Welsh government must recognise this and support them.

2. Do you agree any Bursary arrangements established for the future should continue to be based on supporting individuals who choose to study in Wales regardless of their domicile?

Yes. It is important to recognise that financial support is not working in isolation to make students 'loyal'. There is a strong link between quality training placements, and preceptorship programmes, and the rate in which newly qualified midwives remain in the places they were trained. RCM would like to see a robust workforce plan in place to ensure there are enough quality placements for the capacity of the system without risking the training standards being delivered. Quality midwifery training programmes, along with financial support to students, can build a resilient local workforce. The RCM would also agree that upon completion of a training programme there will be opportunities for employment as a result. And that these employment opportunities would entice students to remain to live and work in Wales post qualification.

3. Do you agree the format of healthcare courses should be recognised and addressed through any future arrangements?

Yes. As stated above, midwifery students have a set number of hours they must complete during their training and as such, cannot access paid part-time work the way other students can. Midwifery students also tend to be older than the usual university entrant cohort and some come to midwifery after having children themselves. We welcome the statement in the consultation, "The format of healthcare courses has the potential to increase costs associated with childcare, travel and other general living expenses. The current arrangements incorporate an element of additional funding to recognise the impact of placements, and this will also need to be addressed in any future arrangements." We agree with this statement.

² DH (2016), Equality Analysis (Response to consultation) *Reforming healthcare education funding: creating a sustainable future workforce,* https://www.gov.uk/government/consultations/changing-how-healthcare-education-is-funded

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¹ As stipulated by Directive 2013/55/EU on the recognition of professional qualifications which forms the legal basis for healthcare education in the UK

4. Do you have any views about ways in which this can be addressed?

We support the current arrangements announced by the Welsh Government which recognises the support needed by student midwives to study. We would be keen to see these arrangements continuing into the future.

5. Do you agree placement capacity should continue to be managed through a commissioning process, which in the future would be led by Health Education and Improvement Wales?

It is vitally important that someone has a birds-eye-view of healthcare education commissioning and take a strategic approach, rather than risk a piecemeal approach from separate local processes. There will always be a need for some local flexibility and that the needs of the service and the individual can be met. As stated before, quality training and preceptorship programmes are vital to making sure the value in a commissioned place is realised – that the student place commissioned results in a midwife working for the NHS in Wales.

6 Should the NHS Bursary continue in the future what methodology should be used to determine which education and training programmes should be supported through a revised health student support arrangements?

	Maintaining the current list of programmes
	Refresh the list of eligible programmes each year on the basis of identified priorities within the health system
\boxtimes	Agree a core list as standard with the potential for additional priority programmes to be added as necessary
	Restrict to those programmes which lead to registration and therefore without the qualification individuals are not able to practice in their chosen profession.
	Other

We support option 3, "Agree a core list as standard with the potential for additional priority programmes to be added as necessary." We think this is best to give consistency and certainty to students and to the workplace planning for the professions currently on the list, with future flexibility when professions change or emerge (physician associates being a recent example).

7 Are there other approaches which you consider could be applied, if so, please specify?

RCM would like the government to recognise and acknowledge the methodology of the workforce planning tool used in all Welsh maternity Units, BirthRate Plus. The tool enables the understanding of trends and demands within the service and the ability of individual units to meet these demands. We believe this is valuable intelligence which the government could utilise.

8 Do you agree that any package of enhanced support for individuals should continue to require individuals to commit to a proportionate period of post-qualification employment in Wales?

The RCM agrees to a proportionate period of post qualification in Wales as is currently the case for receipt of the bursary in Wales. We believe that it is reasonable for Welsh Government (and Welsh taxpayers) to expect some return on investing in student midwives. We also believe that this could be seen as an incentive to ensure that newly qualified midwives get jobs in wales. But this should not be at the detriment of the student if there were no relevant jobs available – we would urge Welsh Government to ensure no student was ever disadvantaged by this caveat as this would be a gross violation of the policy intention.

9 Do you agree that the post qualification criteria should be extended to include other employment settings?

Practising as a midwife is of paramount importance – the setting is less important but must be appropriate for the delivery of safe, high quality midwifery care. We do not think it reasonable for a midwife to work as what she/he is not qualified to be – and vice versa. Midwifery is a unique profession which can be practiced in different settings but it is not interchangeable with other healthcare professions. So this could include local government, social enterprises or independent midwives – however, in the case of the latter, only if they are contracted to provide NHS care rather than for private practice.

10 If so, please specify these settings? (It would also help if you could provide reasons for each new setting suggested)

We would support midwives working in any setting where NHS commissioning care is.

11 Do you think individuals who have received support for an initial programme should be able to receive support through a Bursary arrangement to undertake additional education and training programmes?

The RCM would welcome support for additional education and training based on workforce and service needs. We are currently developing a Career Framework in Midwifery which maps out the various career pathways. It is important to note that access to leadership; research and management roles in midwifery often have an element of extra formal training and so making sure our leaders of tomorrow can access this, is vitally important. We must be mindful of showing younger midwives at the start of their careers that they can go far and will be supported in doing so.

12 If yes, Do you think second and subsequent programmes should only be supported where the health system in Wales is experiencing difficulties with workforce capacity in specific areas?

We should not be discouraging students from further study which enriches their practice and gives the NHS better skills to draw from. We obviously would advocate people using their midwifery qualification for a long-term career, but that should be achieved by safe, happy workplaces, access to training, decent pay and all the other things that make a good career. Restricting access to second or subsequent programmes isn't the answer to keeping people in the service.

In regards to student midwives who have done another degree previously, the RCM would not like to see support for them being ruled out. We could be losing high quality potential student midwives on this basis. As stated previously, student midwives are on average, older than the average student and many come to midwifery after having children of their own. With this in mind, we would not wish to see short midwifery programmes for qualified nurses to be ruled out. Undertaking a shortened programme is a quick and cost effective way of increasing the midwifery workforce with people who have a strong desire to change the direction of their career.

13 Should an exception be made to allow first degree holders wishing to s	
	second degree on a healthcare programme in England access to student
	support, whilst non healthcare students are not eligible for additional support?

Yes \boxtimes No \square

The RCM believe that if they go to England to work post qualification that they may be required to pay their grant back. It is not unreasonable to set a criteria that they work in Wales upon post qualifying for a minimum of two years.

14 Should the support provided for second and subsequent support packages for health related programmes be conditional upon individuals committing to work in Wales post qualification?

The RCM would not oppose a post qualification period of employment in Wales but would seek reassurance that they would not be disadvantaged in any way. Robust workforce plans

would ensure newly qualified jobs would be available. This would also ensure that the commissioning of student midwife numbers remains closely linked in with workforce planning.

15	Do you consider there are issues which relate to equality and diversity which
	should be taken into account in developing future policy in this area?

Yes \boxtimes No \square

16 If you answered yes, please highlight the issues you feel should be taken into account.

Midwifery is still overwhelmingly a female workforce and any cuts to support to student midwives risks discriminating against women. This could also be considered discrimination against age if mature students are denied the opportunity to train in midwifery with support. There is value in having cohorts that include mature students with life experiences including family and previous careers.

17 Should support programmes be aligned with those for other health related programmes in the future? (medical and dental)

We would agree with this on the condition that no midwifery students would be adversely affected by this.

18 Which of the proposed options do you think is the most appropriate for the long-term sustainability of the NHS workforce in Wales?

The RCM believes that option 3 is the most appropriate option below for long term sustainability; however, we would wish to seek greater clarity around what this would look like and mean for students.

	Option 1: Healthcare students receive the standard student support package, through Student Finance Wales, in the same way as other students. This would not be subject to an agreement regarding post-qualification employment
	Option 2: Healthcare students receive the standard maintenance support package through Student Finance Wales. An NHS Bursary would cover the funding of full tuition fees up to a maximum and an additional funding element for additional costs for clinical placements. This would not be subject to an agreement regarding post-qualification employment.
\boxtimes	Option 3: Healthcare students receive the standard maintenance support

package through Student Finance Wales. An NHS Bursary would cover the funding of full tuition fees up to a maximum and an additional funding element for additional costs for clinical placements — subject to agreeing a post-qualification employment period.
Option 4: Healthcare students receive the standard maintenance support package and partial funding of tuition fees (e.g. 50%) through Student Finance Wales. An NHS Bursary would cover the remainder of the tuition fee and an additional funding element for additional costs for clinical placements – subject to agreeing a post-qualification employment period.
Option 5: Healthcare students receive the standard fee support package through Student Finance Wales. An NHS Bursary would cover living costs and an additional funding element for additional costs for clinical placements – subject to agreeing a post-qualification employment period.
Option 6: Healthcare students continue to receive the current NHS Bursary arrangements – subject to agreeing a post-qualification employment period.

19 Are there unidentified options that would be more appropriate?

Option 1: To support healthcare students during their studies? If so, please specify
Option 2: To encourage students to pursue healthcare courses in Wales? If so, please specify
Option 3: For the long-term sustainability of the NHS workforce in Wales? If so, please specify

20 What are your thoughts on the support for healthcare students? Should there be a focus on support for tuition fees or living costs?

\boxtimes	Tuition fees
\boxtimes	Living Costs

As explained above, because of the nature of midwifery training, support for living costs and tuition fees are equally important in making midwifery courses open and accessible to all.

Additional questions asked on 02 August 2018

Dear respondent,

Many thanks for your response to our Student Support Arrangements Health Related Education and Training Programmes in Wales consultation. We would be grateful if you could please consider the following questions and if you wish to respond to them please.

- 1. We would like to know your views on the effects that the arrangements would have on the Welsh language, specifically on:
- i) opportunities for people to use Welsh; and
- ii) treating the Welsh language no less favourably than English.
- 2. Please also explain how you believe the arrangements could be formulated or changed so as to have:

i) positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language; and

ii) no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.

I would be grateful if you could respond by 16/08/18

Our response to these additional questions would be that we believe that support and promotion of the Welsh language in Wales is important and the application of this should be in line with Welsh Government policy.

There should be positive encouragement for any student in Wales to use Welsh throughout their studies and in any caring roles in all healthcare settings, particularly, if this should benefit the people in their care.

Any proposal or arrangement must be equally applied for all students regardless of language choice to ensure that no student is disadvantaged.

The Royal College of Midwives August 2018