

Health and Social Services Department

Chief Nurse's Office

Peter Crill House, Gloucester Street

St Helier, Jersey, JE1 3QS

Tel: +44 (0)1534 444196



Deputy J M Macon

Scrutiny Office

Greffe Morier

St Helier

JE1 1DD

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Dear Deputy Macon

Thank you for the opportunity to comment on the Student Finance Proposals. As Chief Nurse of Jersey with responsibility for delivery of training programmes at an undergraduate and post graduate level this is a welcome opportunity to comment and share some of our experience supporting Jersey students.

In compiling this response I have spoken with students currently undertaking their degrees, both on and off island, received written feedback from the Head of the Nursing and Midwifery Education Department in Jersey, and sought comment from the Professional Lead for Social Work in Jersey. Other more general discussions around student financing and the current situation for HSSD students that have recently taken place with the nursing and midwifery union representatives in Jersey, Royal College of Nursing (RCN), Royal College of Midwifery (RCM) and the Jersey Nursing Association (JNA) have also been drawn on to inform this response.

The following documents have been reviewed to inform this response:

- R51 – Higher Education Funding Presented to the States 10th May 2016 by the Minister for Education
- Tertiary Education: Student Finance – Education and Home Affairs Scrutiny Panel presented to the States 15th March 2017

For clarity the response is broken down into the following sections:

- 1) The Proposed Model and response to your two questions
- 2) International labour market context for the current and future health and social care workforce

1) The Proposed Model

A) Do you think the proposed model of student financing meets the needs of young people and their families in Jersey and if so why?

On the face of it the proposed model of student financing will mean that more students and families will be eligible for funding, as the household income threshold is much higher, which is positive.

I am also aware anecdotally that this is welcomed as it gives more students, up to the age of 22 the opportunity to apply for assistance with their fees and costs.

This we hope will have an impact on the number of local students, under the age of 25, opting to study for careers in a range of health and social care professions, accessing the programmes through HSSD's contract with a UK Higher Education Institution (HEI).

For example degrees in: mental health nursing, child health nursing, midwifery and operating department practitioner (theatre practitioners). Due to small numbers all of these are delivered in the UK in partnership arrangement with the contracted university as a two centred model.

Increased access to these programmes through providing a scheme that meets the fees and contributes to maintenance costs for Jersey students also directly addresses a skills and workforce gap for Jersey. General nurses, mental health nurses, child health nurses, midwives and ODP students, are all employed in the local healthcare sector once they have graduated.

B) What changes, if any, would you like to see to the proposed model that would greater assist young people in achieving their ambitions?

a) Looked after children

Whilst looked after children are referenced in the Scrutiny Report (paras 78, 79, 80) it isn't explicit about how they will be financially supported.

In accepting that looked after children are disadvantaged, with no family support, the States of Jersey as the Corporate Parent, should fully support these children to thrive and achieve their ambition.

We would therefore like to see an explicit reference to looked after children receiving the highest level of funding on the scheme.

b) Length of time the funding is available – expand beyond 3 years

With the exceptions of doctor, dentist and vet courses the funding appears to cover 3 year programmes only, we would like to see this extended to ensure Jersey is able to meet the workforce needs in the health and social care sector in the coming years.

Some of the healthcare degree programmes now span 4 years and students come out with a dual qualification at the end of the programme.

c) Living costs for students in UK – when course requires a 2 centre delivery (Jersey/UK)

Two areas which need addressing relate UK accommodation costs and travel for programmes that require a two centre delivery.

These are students who are studying to become mental health nurses, midwives, operating department practitioners or children's nurses and are required as part of their programme to regularly travel between Jersey and the UK.

This should be considered differently to the student who leaves Jersey to undertake study for a period of 3 years and may or may not come back to the island in the future to work. Similarly it need to be considered differently to students who study on island for the full duration of the programme.

We would like to see this changed in order that these students receive the maximum level of maintenance recognising that they will be employed in Jersey on graduation and will fill a skills gap

Feedback from our students who are on the two centre programmes, cite the issue of needing to secure and fund living accommodation for a whole calendar year, when they are only living in it for approximately a third of the time. This is because they return to Jersey to undertake their practice placements and return to the UK for a period of university based teaching.

Many of our students subsidise their living costs through part time employment, however we are aware that not all universities support this due to the level of study for the programme.

Students of Nursing and Midwifery programmes are expected to complete practice placements which involves working a 37.5 hour week and work a full shift pattern. (This forms part of their programme and they are not paid for this).

d) The age cap on the funding – adult and mature students

It was noted that this issue was acknowledged in the Scrutiny Report point 86:

“the Panel is very aware that most of its focus has been on the majority of students who are of school leaving age. However adult and mature students must also be included in any prospective solution that is examined.”

56% of our current students undertaking nursing and midwifery degrees through University of Chester are over the age of 25 and therefore would not be eligible for assistance under this scheme.

Furthermore in areas such as mental health nursing we actively encourage mature students to apply as they bring life experience to the role. Students often have paid work at the point they apply for programmes, local commitments, partners/spouses/children. Going onto the programme puts significant financial pressure on the student.

The current proposals won't address this skills gap and given that these students will be employed in healthcare in Jersey on graduation, there needs to be a funding mechanism that is open to these students to support them through university.

It could be that for those areas of the labour market where it is recognised that there is a shortfall in skills that funding for students is made available, irrespective of age.

e) Students who already have a degree

The States Strategic Plan states as one of its goals:

“to provide a first class education service, supporting the development of skills, creativity and lifelong learning”

17% of our current students undertaking nursing and midwifery degrees through the University of Chester already have a degree and therefore would not be eligible for funding under this new scheme.

Given that the evidence suggests that millennials in particular will change careers a number of times in their working lifetime this needs to be factored into any modelling for financial support for university to ensure Jersey retains a flow of graduates to support the skills gap and to complement the population policy.

2) National and international context labour market forces

As you invited us to submit any information in connection with your terms of reference I thought it would be helpful to provide the Panel with some of current information regarding the healthcare workforce pressures and the predicted pressures which will impact across all sectors in the years to come.

Workforce supply into health/social care only comes from three main sources:

- New graduates
- Returning practitioners
- Recruitment from elsewhere – many of which come from the NHS or local authorities to Jersey.

Jersey's health and social care workforce are in the main recruited via the UK. This is because our workforce are registered with UK professional regulators the Nursing and Midwifery Council (NMC), General Medical Council (GMC) and Health Care Professions Council (HCPC).

Currently there are 45,000 vacancies in clinical roles across the NHS, 36,000 of which are nurses and midwives.¹

The World Health Organisation (WHO) is predicting a 2 million shortfall in the health professional workforce across the EU by 2020.²

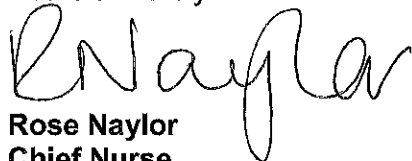
In the social care sector there are 90,000 job vacancies in social care in the UK³.

25% of the current professional workforce in HSSD are eligible to retire in the next ten years, by 2027. At the same time there are increased demographic pressures with a 68% increase forecast in those aged 65 and over in the local population. This will change the population of over 65s from making up 16% of the local population to 24% by 2035.⁴

The challenge for Jersey now and in the future is for the professional health and social care workforce to hold specific qualifications at degree level and above in order to practice, we need to recognise that Jersey is in competition for these skills internationally in a dwindling labour pool.

Kind regards

Yours sincerely



Rose Naylor
Chief Nurse

direct dial: +44 (0)1534 444196
email: r.naylor@health.gov.je
www.gov.je

¹ *Facing the Facts, Shaping the Future* A draft health and care workforce strategy for England 2027 - Public Health England page 7

² *Time to care Securing a future for the hospital workforce in Europe* November 2017 Deloitte Centre for Health Solutions page 2

³ *Social Care in 2018: Time to think about the future workforce* 3rd Jan 2018 amp.theguardian.com

⁴ *HSSD Strategic Workforce Plan (output 6) Skills for Health* June 2017 pages 8-9