Fears grow over community nurse training numbers

Concerns that too few public health and community nurses are being trained in England are growing, as new figures indicate a number of universities have seen reductions in the amount of funded course places they are able to offer this year.

The trend is revealed in figures given to Nursing Times in a snapshot survey of higher education institutions. The decrease in training places is in part a “knock-on” effect after the difficulties in recruiting nurses to fill courses in the past couple of years, Nursing Times has been told.

The challenge of filling public health nursing programmes has been so great that at least one university has been forced to cancel a programme.

Unions have warned that a range of factors are to blame, including cuts to public health nurse jobs, service changes and financial pressures, and uncertainties about the amount of funding employers receive to cover nurses while they are in full-time training.

Health Education England, which funds the training, has not yet confirmed how many specialist nursing course places it has commissioned for the 2017-18 academic year, due to its long-delayed publication of workforce plans.

Figures provided to Nursing Times by a sample of 12 universities show that eight have seen a drop in the number of HEE-funded health visitor training places this year. Three saw increases and one had the same number of places as last year. Overall, among these 12 universities, there has been a 20% reduction – down from 189 training places in 2016-17 to 150 this year.

Meanwhile, six out of 11 universities said they had fewer funded school nursing training places available this year. Three saw places increase and two remained stable. In total, among this group of 11, there has been a 16% drop – from 91 places last year, to 76 in 2016-17.

National figures previously released by HEE show an ongoing struggle to fill course places in the past two years, and a corresponding drop in the number of training places.

As previously reported by Nursing Times, in 2015-16, 13% of the total 1,042 health visiting places available were left empty, while a third of the 817 available places were not filled in 2016-17. Similarly, with school nursing, almost a third of the 338 training places on offer were unfilled in 2015-16. The year after, 22% of 284 were empty.

Nursing Times also asked universities how many places they had available this year on district nursing programmes. Of the 11 universities that responded, four said their course places had reduced, but three had remained the same and four had actually increased. This meant there was a 16% rise overall, from 135 training places last year, to 157 this year.

However, this type of training has also not managed to attract enough nurses in the past two years. National figures have shown 12% of course places were empty in 2015-16, and 16% last year.

Staffordshire University told Nursing Times it no longer runs its health visiting programme. The university stopped the course in 2016 due to little demand from local employers who had seen significant increases in this part of the workforce. It also has no funded training places for district nurses this year after having four in 2016.

“As a university, the number of nurses entering specialist practice district nursing has been small for a number of years for a number of reasons – lack of funded places, inability to provide backfill to release staff, lack of community practice teachers, pressure on staff, and limited interest in this role,” said Sarah Woolley, the head of the university’s nursing department.

Derby University has seen a decrease in health visiting – from 17 to 14 places – and school nursing places – from six to two – this year, but an increase in district nursing places, from 12 to 14 places.

“The places funded by HEE have to be met by employers who must release staff to complete the training,” said Dr Bill Whitehead, head of department for healthcare practice at the university.

“Consequently, the number of this particular type of student is limited by not only the funding for fees from HEE,
but the ability of employers to release valuable registered nursing staff to train for a year towards a higher qualification, he told Nursing Times.

“The fact that HEE has managed to send as many district nurses as health visitors this year indicates that there is a real need for staff with district nurse qualifications in the local area,” he added.

Unions have also told Nursing Times they are concerned about the continuing drop in training places in combination with job cuts at a time when more specialist nurses are needed.

“We are anxious about it and are worried about the knock-on effect on the wider workforce figures for health visiting, school nursing and district nursing,” said the Royal College of Nursing’s professional lead for public health nursing, Helen Donovan. She noted there were many complex reasons for fewer specialist nurses being trained.

It’s not just securing the funding for the training programmes, it’s also backfill pay for people to go onto those programmes,” she said, noting that some nurses end up earning less if employers were not given enough funding while they were on a full-time year-long course.

“The funding normally provides for the course as well as some element of backfill,” she said. “But the level of backfill and how that is perceived and whether it’s something people can afford to do can be quite challenging.

“Also, when people are working in the acute sector and then lose their out-of-hours payments when they are in training...there’s often a reduction in their actual take-home salary for people on these courses,” she said. Ms Donovan called for employers and HEE to devise a “proper workforce plan” about how many nurses were needed and the funding required.

Obi Amadi, lead professional office at Unite, which includes the Community Practitioners and Health Visitors Association, said the data provided to Nursing Times added to existing concerns about falling numbers of trainees.

Pressure on community services and burnout may put people off training, Ms Amadi warned. “People are hearing about the cuts in community services... it’s not necessarily a desirable profession to get into now,” she said.

Cuts to posts by employers – especially since cash-strapped local authorities took over the running of public health services in 2015 and reconfigured services – also meant trainees were not always guaranteed a job.

“The lack of clarity about whether you’re going to be guaranteed a job when it’s over may well be one of the significant reasons why fewer people are applying,” she told Nursing Times.

She stressed that the coalition government’s former Health Visitor Implementation Plan, designed to boost the size of the workforce between 2011 and 2015, was based on evidence that a larger workforce was needed to sustain services.

“We are not maintaining that by shrinking the number of commissions,” she said. Ms Amadi called for more employers to take a “risk” and train and recruit more staff – especially due to the increasing numbers of staff approaching retirement.

The Council of Deans of Health, which represents UK university nursing departments, warned of a wider “uncertain future” facing funding for specialist roles such as health visiting, district, practice, school and occupational health nursing.

“This does not reflect widespread recognition of the urgent need to provide care closer to home,” it said in a statement. “The government has placed a lot of focus recently on pre-registration education and the variety of routes into nursing, but this should not be to the detriment of specialist roles that make a significant contribution to society.”

The Institute of Health Visiting warned that funding for next year’s training places had still not been finalised – and that it was unclear how new apprenticeships could be used as a training route.

“We have been advised there will be funding from HEE for university fees for health visiting and school nursing students, however, the backfill money has not been agreed and this is being reviewed – a decision will not be known until April,” said Dr Karen Stansfield, the IHV’s head of education. “We believe an urgent rethink is required about how to fund health visiting programmes and/or a simplification of the apprenticeship process.

“In addition, how much health visiting students are paid during training needs to be reconsidered and a consistent approach agreed across England. The posts on qualifying also need to be in place or potential candidates will not apply,” she added.

A spokeswoman for HEE said it commissioned training places based on demand from NHS employers. “As previously mentioned Health Education England will be doing a piece of work to better understand the future needs of nursing in the community,” she said.

“Stakeholder input will be key and we are setting up a steering group including key partners such as the Queen’s Nursing Institute, RCN, Nursing and Midwifery Council and employers,” she said.

“In the New Year we will be having some regional conversations to better understand why the uptake of courses has reduced in some areas.”

“We are worried about the knock-on effect on the wider workforce figures” Helen Donovan

At least one university has cancelled a programme due to reduced demand