Maintaining student enrolment after the removal of bursaries

The issue of inadequate numbers of student nurses to meet the future needs of the workforce is not new (Whitehead, 2017). Many feared that the removal of bursaries for undergraduate nurse education fees in England, which came into effect in August 2017, would compound it by deterring students from applying for nursing courses. This has not been the case at the University of Derby, which shows healthy enrolment figures in its two undergraduate nursing courses – adult nursing and mental health nursing – for the last three academic years.

Too few training places
Nursing continues to be a hugely popular course, for reasons similar to those of previous generations (Crick et al, 2014), and the number of applicants far exceeds the number of training places. The number of students coming to university to train as nurses was previously restricted by the number of training places commissioned by Health Education England (HEE). These are funded by the government but the budget HEE received limited the number of places available in nursing and other health professions – as a result, there were not enough training places to meet the needs of the NHS and other healthcare providers. Despite huge numbers of people wanting to enter nursing, there has been a disappointing growth in the actual student nursing places since 2010 (Watt, 2017).

Removal of the bursary
The removal of the NHS bursary was contentious (Adams, 2017). The stated aim of the change was to enable universities, supported by placement providers, to offer up to 10,000 additional training places on pre-registration healthcare programmes (Department of Health [DH], 2016), and the funding model for these degrees is now similar to that for any other degree. However, many felt that having to take out a student loan would deter students from going into nursing – particularly those who are...
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older, from lower socioeconomic groups, or from black and minority ethnic (BME) backgrounds.

The news that applications were significantly down as the 2017 student recruitment cycle progressed was jumped on by the media and others, who described the figures as “threatening nursing’s future” (Royal College of Nursing, 2017). Add to the mix a reduction in the number of nurses from the EU wanting to work in the UK following the Brexit referendum, along with a demographic drop in the number of 18-year-olds over the next few years, and you could forgive commentators for describing the outlook for expanding the nursing workforce as bleak.

The result of removing the bursaries was indeed significant – there was an 18% fall in applications for nursing degrees nationally from 234,760 in 2016 to 188,110 in 2017 (Universities and Colleges Admissions Service, 2017a). This is the largest drop on record. However, nursing was still the most popular subject in the 2017 cycle (UCAS, 2017a), as it has been since nurse education became degree-only in 2013. Despite the decline in applications, the number of students accepted on nursing courses nationally fell by only 270 (-0.9%), so proportionally more students were accepted from a smaller pool of applicants.

Widening participation

Increasing the number of places for student nurses is contingent on developing placement capacity. As 50% of nurse education is in placement, it is essential that appropriate, high-quality placements are available. For many years, the University of Derby has been working closely with its service partners from the NHS and the private, voluntary and independent sectors, developing strategies to increase placement capacity (Sherratt et al, 2013).

Like many universities that offer nursing degrees, our university is committed to widening participation. We believe that nurses should reflect the communities they care for in terms of factors such as age, ethnicity and socioeconomic status. As such, we conduct outreach activities in schools and colleges, and offer ‘health insight days’ to allow people to get a feel for what nursing is about. Another reason for doing this is because we were concerned that, with the removal of bursaries, we would receive fewer applications from people of lower socioeconomic status, BME students and more-mature people, and more applications from 18-year-olds, for whom applying for a student loan when going to university is the norm.

Demographic picture

To obtain an accurate demographic picture of the students enrolled on our two nursing degrees – adult nursing and mental health nursing – and inform future recruitment activity, we closely monitored applications and enrolments. This article details our data for the last three academic years, highlighting any significant changes. The figures are for new students enrolled on the first stage of each course.

The university routinely collects data about students accepted on its courses, so the information in this article was collected with the students’ consent for the purpose for which it has been used. All individual identifiers were removed before analysis.

The outcomes of the analysis are surprising in more than one respect.

Table 1. Number of new first-year undergraduate students enrolled onto nursing courses at the University of Derby

<table>
<thead>
<tr>
<th></th>
<th>2015/16</th>
<th>2016/17</th>
<th>2017/18</th>
</tr>
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<tbody>
<tr>
<td>Adult nursing</td>
<td>213</td>
<td>231</td>
<td>287</td>
</tr>
<tr>
<td>Mental health nursing</td>
<td>41</td>
<td>54</td>
<td>102</td>
</tr>
</tbody>
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Fig 1. Socioeconomic profile of students

1a. Adult nursing

1b. Mental health nursing
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Fig 2. Age of students

2a. Adult nursing

2b. Mental health nursing

Enrolment figures

The first surprise is an increase in enrolment year on year, both in adult and mental health nursing (Table 1). Despite the removal of bursaries and the introduction of student loans, student numbers increased by almost 25% for adult nursing and nearly doubled for mental health nursing between 2016/17 and 2017/18.

Outreach and engagement activities have remained the same, and we have maintained the same level of qualifications required on entry by UCAS. What has changed, however, is that we have been able to increase the number of training places we can offer by increasing the number of placements. This is because, after the removal of bursaries was announced, local employers were keen for us to increase the size of our student cohorts.

Socioeconomic group

In adult nursing (Fig 1a), there was an increase from 44% to 52% in students from the semi-routine occupations socioeconomic group (group 6) between 2015/16 and 2017/18, and a decrease from 20% to 14% in the lower managerial and professional socioeconomic group (group 2) between 2016/17 and 2017/18; all other groups have remained relatively stable. In mental health nursing (Fig 1b), there was a 31 percentage point increase in the semi-routine occupations group and a 13% decrease in the lower managerial and professional group between 2015/16 and 2017/18. All other groups have remained stable.

The spread across socioeconomic groups has remained good in both courses, with a small increase in the percentage of students from lower socioeconomic groups. From 2016/17 to 2017/18, the percentage of students from groups 5-8 has increased from 49% to 62% in adult nursing and from 55% to 63% in mental health nursing. In 2017/18, more students in both courses come from group 6 (semi-routine occupations) than from any other group (52% in adult nursing and 55% in mental health nursing).

Many had anticipated that fewer students would come from lower socioeconomic groups after the removal of bursaries (British Medical Association [BMA], 2016). However, we have found the most notable change has been an increase in students from semi-routine occupations (group 6), which includes healthcare assistants (HCAs). If anything, there has been a slight increase in the number of working-class students, which continues a trend reported in the 2000s (Whitehead, 2010).

Despite the removal of bursaries, the university has managed to attract more representative cohorts of students in terms of socioeconomic status locally and nationally.

This fits well with our ethos of widening participation. It may also reflect our collaboration with local employers to provide training opportunities for their HCAs, notably through the pre-nursing work experience programme and assistant practitioner apprenticeships – although it...
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Box 1. Examples of good recruitment practices

- Close relationships with local health and social care employers in the NHS, private, local government and voluntary sectors
- Engagement with frontline clinical professional networks such as the UK Clinical Nurse Educator Network
- Targeted outreach with local schools and community organisations
- Being part of a university with a long-standing reputation for open and inclusive policies towards widening participation in education
- Proactive marketing stressing the affordability, accessibility and personal achievement of pursuing a career in nursing

must be noted that the figures discussed here are only for new first-year, direct-entry students who have applied via UCAS.

Age

Adult nursing has seen a slight increase in the proportion of 18-20-year-old students, from 11% in 2015/16 to 15% in 2017/18 (Fig 2a). In each academic year there was a large proportion of students aged 25 and above - 55%, 66% and 52%, respectively (Fig 2a). Mental health nursing has also seen a slight increase in the proportion of 18-20-year-olds (from 9% in 2015/16 to 16% in 2017/18), as well as a 17% increase in the proportion of students aged 25 and above (from 53% in 2015/16 to 70% in 2017/18) (Fig 2b).

Mature students (that is, those aged 25 and above) therefore continuously represented the majority of new students on both courses. In that respect, our university is not in line with national trends: nationally, UCAS (2017b) has reported a decrease in the proportion of students aged 25 and above; a consistent majority of students aged 25 and above (from 53% in 2015/16 to 70% in 2017/18) (Fig 2b).

Disability

There were no significant changes to our students’ disability profile. Approximately 15% of our students report a disability, which is in line with national data.

Geographical location

A majority of our students (65%) are consistently from the local areas of Derbyshire, Nottinghamshire and Sheffield. We do attract, and welcome, students from other parts of the country but the largest proportion of applicants are local. The proportion of 65% that is likely to remain part of the local health workforce after qualifying has remained consistent. This is probably due, in part, to word of mouth and recommendations from former students.

Conclusion

Over the last three years, we have seen positive trends in student enrolment in adult and mental health nursing. These include:

- An overall increase in student numbers;
- A slight increase in the percentage of students from lower socioeconomic groups;
- A consistent majority of students aged 25 and above;
- A marked increase in the proportion of BME students.

This has been made possible by our long-standing collaboration with local employers and the efforts of our academics and marketing and outreach departments to engage with local communities. Box 1 lists examples of good practices that have helped us recruit more broadly in terms of socioeconomic group, age and ethnicity.

The removal of bursaries does not seem to have had negative effects on enrolment – in fact, it has prompted the university and local employers to increase placements and training places to meet local workforce needs.

The future needs of the nursing workforce are unlikely to be met if we continue to recruit and train nurses as we always have. Universities and care providers are working together to develop new career pathways, from care assistant level to foundation degrees and apprenticeships, from assistant practitioners and nursing associates to registered nurses and advanced practice. As well as thinking creatively about developing the future workforce, we need to support and retain the current one. Flexible working, pay and continuing professional development are just some of the areas we will need to look at if we want nursing to remain an attractive career option. NT