In each issue of the *Journal of Community Nursing* we investigate a hot topic currently affecting our readers. Here, **Jason Beckford-Ball** looks at the impact of proposed cuts to nursing student funding and asks the question...

**Will cutting student bursaries choke the supply of new nurses?**

When I was a student nurse I remember getting paid. OK, it was so long ago that the cash came in a small brown envelope and one solitary pound note could buy a pint in the hospital social club and a packet of crisps, but I was still getting paid.

For modern student nurses the situation is much more complicated. Their courses are funded using a labyrinthine system — all have their university fees paid, while the means-tested bursary means that can be eligible for up to £4,491 per year (or £3,439 if they live at home), with the shortfall often made-up by working in nursing homes for instance, or other jobs (‘Student nurses being forced to take on second jobs in McDonalds to make ends meet’ — [www.mirror.co.uk](http://www.mirror.co.uk)).

Meanwhile, students on other degree courses are able to fund their studies through student loans.

Overall, the nursing bursary costs approximately £800 million per year, so it is clear why the government recently announced that it wants to replace it with student loans. Jeremy Hunt, the health secretary, told the recent English chief nursing officer’s (CNO) conference in Birmingham that cutting the bursary could mean a 10% increase in nurse training places and a 15% increase in nurse degree places (‘Nurses shortage risk if hard decisions ducked, says Hunt ahead of protest’ — [www.dailymail.co.uk](http://www.dailymail.co.uk)), whereas keeping the bursary in place might actually cost nurse places.

The announcement was greeted with predictable outrage, with representatives from the RCN claiming that it would deter people from entering nursing in the first place and shadow health minister Justin Madders stating: ‘It cannot be right for ministers to try and balance the books off the backs of hard-pressed nurses,’ (‘Axing student bursaries will deter many from careers in nursing’ — [www.unison.org.uk](http://www.unison.org.uk)).

As usual the argument is presented as a stark choice between cutting public services (bad), or providing more cash for the NHS (good), but the debate about student nurse funding is actually a little more nuanced. As chair of the Council of Deans of Health, I joined nursing because I wanted to nurse, warts and all. I fully expected to have to pay for my own degree using student loans as well as working extra hours on the bank to meet the shortfall. I was fortunate enough to do my undergraduate nurse training in the military so did have a good salary. However, I would have been very happy to pay my way (especially as the tuition fees are taken care of). Nursing is one of the few undergraduate training programmes where you have job security almost built in to your student years (assuming you are willing to work hard). I would have thought this, if nothing else, would attract students from less financially secure backgrounds like myself who want to nurse. Even if nurses do have to repay student loans, repayments will be fairly distributed just like for other undergraduate students. Why should nurses be different to colleagues in other health professions?

**Michael Ellis**
Tissue viability clinical nurse specialist, Plymouth Hospitals NHS Trust
Dame Jessica Corner, says the existing system of bursaries actually punishes some student nurses as it means they are relatively underfunded compared with undergraduates who can apply for student loans — she suggested a scheme where the NHS would pay back loans for nurses who had committed to work in the organisation for a set period of time (‘Nurses could be forced to pay tuition fees under new Treasury proposals’ — www.telegraph.co.uk).

Conversely, Unison claims that, ‘nine in ten student nurses would not have entered nursing at all without the bursary’, calculating that a student graduating in 2020 could leave with debts of more than £50,000, but will only start nursing on a salary of less than £23,000 (‘UNISON survey shows scrapping of student nurse bursaries will lead to major shortages’ — www.unison.org.uk).

All of this begs the question as to why nursing students are treated differently to other students who have to fund their own education? Why should nurses expect to be treated differently from archeology students, for instance or teachers, neither of which are professions known for rampant pay rates?

On the other hand, is it fair to expect nurses to take out loans when their salary expectations are so much lower than some on other degree courses, such as law, medicine or engineering for example? Similarly, aren’t we always told that nursing is not a career choice, but a vocation?

As someone who was paid throughout my nurse training (albeit pretty poorly), I did think that was a professional element to my training from the ‘off’, which I’m not sure today’s students experience. Then again, I didn’t benefit from the academic respect that a degree confers once I’d completed the course.

As ever, it comes down to money — should nursing students have to work extra hours to top-up their bursaries, albeit ending their courses debt-free; or should they be treated like any other student, able to borrow substantial amounts of money to get through their studies, but lumbered with large debts?  

This is an interesting debate where there are clearly differing opinions.

What we must remember is that at this point this applies only to midwifery and nursing students in England commencing in September 2017. In Scotland there is currently a review of student bursaries which is due to report in late spring 2016 with it being implemented in September 2017 also. It is not envisaged that a loan system will be adopted but changes to the bursary award may be made.

Despite this uncertainty, it is clear that nursing and midwifery students are different from other students, in that they are a necessary part of delivering healthcare and are normally students 52 weeks a year with 50% of their course being in practice. However, that does not mean that the status quo is an option. We have to trust that the decisions made are balanced and appreciate the significant contribution that nurses and midwives make to the health service to ensure that we continue to attract high quality students to meet the needs of the NHS.

Heather Bain
Senior lecturer postgraduate and CPD, education, Robert Gordon University