

Response to the Department for Education Consultation on the Draft Degree Apprenticeship – Registered Nurse

September 2016

Background

This document sets out our response to the *Department for Education's consultation on the draft apprenticeship standard for the Degree Apprenticeship - Registered Nurse*. As the online survey format did not facilitate the full scope of our response, our general reflections and comments on the proposals are summarised below.

Position on Degree Apprenticeships in Nursing

In principle, we are supportive of Degree Apprenticeships as part of increasing the provision of greater choice and variety of routes into registered nursing. However, there are serious risks with the pace at which these reforms are being designed and implemented. At present, there is a lack of clarity around how the proposed Degree Apprenticeship might work alongside the raft of other changes being made to the education and training of the nursing workforce, including other apprenticeship routes in health and social care.

We firmly believe that any changes must include priority being given to growing the overall supply of registered nurses, and that nursing must remain an all graduate profession at Bachelor's Degree level. On this basis, it is vital that a Degree Apprenticeship route leads to registered nursing and after completion of a mandatory Bachelor's Degree qualification. It is essential to have registered nurses who are educated to a Bachelor's Degree level, in order to ensure high quality, safe patient care, and there is much evidence to support this¹.

There must be equity of outcome between all routes into registered nursing, so that every newly registered nurse has the requisite skills, no matter how they trained, so that they can deliver safe and effective patient care. Safeguards such as regular monitoring and evaluation of the apprenticeship model and its outcomes should be in place to ensure this.

As proposals are currently laid out, it is difficult for us to see the added value of the Degree Apprenticeship in Nursing, as presented in the draft standard. Equity of outcome does not mean simply inserting all the elements of the three year degree route into an apprenticeship model; this model must be designed and tailored to provide a different offer for learners.

Registered nurses are increasingly responding to greater complexity and acuity in the health needs of the population they serve. Registered nurses require higher level

¹ For example Aiken et al (2003) **Education Levels of Hospital nurses and Surgical Patient Mortality** JAMA 2003;290(12)

skills and knowledge, including critical thinking, leadership, political awareness, entrepreneurialism and research skills. Without continued support for these higher level clinical skills, registered nurses will be unable to meaningfully lead greater transformational change in a health and care system that continues to undergo significant reform, manage inter-professional teams across diverse care settings, or to ensure that patients/service users receive high quality, safe, evidence-based, person-centred care. The Nursing & Midwifery Council (NMC) are currently developing new pre-registration nursing standards which reflect the higher levels skills needed for the future, and any developing apprenticeship model also needs to align with these shifts.

There will be a need for the proposed apprenticeship model to develop within individuals the ability to source, understand and apply evidence for practice to enable improvements in care and this will need to be specifically assessed as part of the programme, in both theory and practice. At the end of the programme, among other things, Degree Apprentices should be able to communicate complex issues on the basis of sound evidence, demonstrate problem solving skills and construct coherent written and verbal arguments to promote their ideas.

It is critically important that the development of the apprenticeship model acknowledges and works within the existing real-world context; namely, that implementation of any Degree Apprenticeship is taking place alongside the removal of existing funding for pre-registration nurse training with the loss of the bursary. We are determined to ensure that this does not mean the loss of a high quality pre-registration graduate level education for all registered nurses. It is our view that the supply of nurses into the workforce is much more reliably managed through the provision of places on three year Bachelor Degrees.

Reflections on the draft current standard

This section provides our answers to the specific relevant survey questions and our reflections on the draft standard (some questions have been grouped for the purpose of this response).

Do you think the knowledge, skills and behaviours set out in the Standard fully cover what is needed to undertake the job role competently at the end of the apprenticeship? If 'No', what additional knowledge, skills or behaviours should be included?

Do you agree that the knowledge, skills and behaviours set out in the standard match its proposed National Qualifications Level?

We welcome the centrality of the NMC standards in the draft Degree Apprenticeship standard, which we agree reflect the skills, knowledge and behaviours needed to carry out the role of registered nurse as well as matching the proposed national qualifications level. Degree Apprenticeships in nursing are a unique proposition, and must adhere to established standards, set within a mandatory regulatory framework.

However, as the NMC standards have been lifted into the apprenticeship standard with little alteration, it is not yet clear how the Degree Apprenticeship route would help achieve the required outcomes differently from the university route, and thus the uniqueness of an apprenticeship offer. Degree Apprenticeships in Nursing should not simply be a part-time version of the existing three year degree route. We recommend an outcome-based approach is designed, which still aligns to NMC standards.

As the proposals are currently set out, the Degree Apprenticeship standard is not sufficiently future focussed. Major reform of nursing education is underway and the NMC are actively revising standards to meet future workforce priorities. These standards, which we understand will be outcomes-based, are scheduled for implementation in September 2018. In theory, a new apprentice could start on the old standards, and without a time frame for qualification, then qualify at the same time as students taught against the new standards. We would like specific reassurance that when the new NMC standards are implemented, the Degree Apprenticeship standard will be fully aligned with those standards. It would be more constructive if implementation of the Degree Apprenticeship waited until these new standards are applied. This should be taken into consideration while reviewing and responding to stakeholder content the Department for Education receives through this engagement process. It is crucial that programmes already underway are aligned, relevant and appropriately prepare nurses to be responsive to meet future population health needs.

Do you agree that the duration of the apprenticeship set out in the Standard is substantive and stretching enough to ensure full competence in the relevant occupation?

The four year duration of the Degree Apprenticeship set out in the standard may be substantive, but we have concerns about how the required 2,300 hours of practice learning would be managed, ensuring each student maintained supernumerary status, as well as achieving the required 2,300 hours of theory. A Quality Assurance framework would need to be in place to ensure decision-making relating to extensions to the four years is rational and offers national consistency.

This Standard includes proposed qualifications, which would be mandatory for every apprentice. Do you support the addition of these mandatory qualifications?

Do you agree that the proposed mandatory qualifications meets one or more of the below criteria set out in the Guidance for Trailblazers

To reflect on the proposed qualifications, as stated in our position above, we are clear that the Degree Apprenticeship in Nursing should indeed result in a Bachelor's Degree that meets the NMC standards for regulation.

The role of the NMC as regulator means that the end point assessment that would take place through a Degree Apprenticeship is less of a priority than NMC registration, and a Degree Apprentice could potentially enter the register without yet having achieved a successful end point assessment. We suggest that these processes be aligned to avoid confusion around the point at which the Degree Apprentice could enter the nursing register.

Do you consider the proposed standard to be sufficiently wide-ranging to allow an apprentice to develop transferable skills that will enable them to perform this role across the wider sector?

These proposed standards are only the first part of a curriculum process; it is essential that appropriate teaching, learning and assessment strategies are designed and used in the resulting Degree Apprenticeship programme.

Do you have any other comments?

On the issue of how applicants might be selected, we recognise the need for individual providers to set their own entry standards, but selection of appropriate candidates will be critical and the entry criteria needs to be clear and transparent. While we understand that providers need to be highly selective, the entry standards need to reflect the likelihood that most applicants will come from non-traditional education backgrounds.

The selection process will have to observe the NMC requirements and standards, and skills in numeracy and literacy. These cannot just be achieved by the end of the programme, but instead will need to be demonstrated earlier in the course, in order to ensure that Degree Apprentices are able to deliver safe care. A good example of this would be medicine management.

Implementation of Degree Apprenticeships in Nursing

While the draft standard is theoretically wide-ranging enough to allow a Degree Apprentice to develop transferable skills that would enable them to perform this role across the wider sector, we do not believe that Degree Apprenticeships as currently set out will in reality deliver the all-round experience needed for the nurse of the future, and this is an issue of how apprenticeships are implemented. We would therefore recommend that the Department for Education allow sufficient consultation time, enabling us, and other stakeholders, to effectively engage with our membership on the draft degree apprenticeship Assessment Plan, as well as any future iterations of draft standards in nursing apprenticeships.

Providing an effective learning environment

Degree Apprenticeship routes leading to registered nursing must adhere to the existing NMC requirements for 50/50 time in academic and clinical practice, as well as honouring the supernumerary status of learners during their time in clinical settings. All pre-registration nursing programmes have to be approved by the NMC against set criteria, including number of hours, where they should be completed and that all students must be supernumerary whilst in practice.

Student nurses and apprentices need to have access to varied experience across a range of settings, to accommodate the significant shift in the way that nurses work as holistic practitioners with the flexibility to adapt across clinical settings in a changing health and care landscape. It is important for the Department to set out how employers will ensure that the practice experience required for a role will be accessed across clinical settings and services which sit outside of their jurisdiction. The ability and willingness for employers to commission other placements from other providers for their apprentices, should be explored and funding mechanisms agreed, together with assessment of capacity and capability to support all learners in these practice settings.

In their response to the Consultation on *Changing How Healthcare Education is Funded*, the Government acknowledged that health care students are unique in terms of a requirement for practice based education. Degree Apprenticeship students must be supported to travel to a range of placements, and employers must contribute to the infrastructure to support practice based education, including audit of learning environments and staff development for mentorship. This finance and resource must be additional to the existing Tariff available to provide placement support for nursing students.

We also understand that one consequence of the reforms to the Department of Health reforms to healthcare higher education funding, is likely to be a restructure in the way that clinical placements are commissioned and structured in the future, and Degree Apprenticeship will need to complement this new framework.

We believe that Degree Apprenticeship schemes will fail without the requisite organisational support structures, and registered nursing staff with mentorship and supervision skills. We know that the current level of support for learners in the practice environment is often inadequate. If more learners are to be supported in practice, then more resources need to be made available for this and this aspect of the programme delivery must be closely monitored. Without high quality practice teaching and supervision, these programmes will not deliver safe and effective practitioners at the point of registration.

It also has to be acknowledged that current mentors working within practice-based learning will be unfamiliar with this method of training and will require extra support, training and development to carry out their role effectively. This will also require support and quality assurance for the development of effective learning environments, to generate effective outcomes.

Quality Assurance

The Department for Education and the Skills Funding Agency will need to provide assurances about the quality of training provision, including identifying who might be responsible for overseeing reliability and validity of end point assessments, if in future, Quality Assurance of pre-registration education is not provided by Health Education England.

As more providers enter the market, it is essential to have consistency of provision across all pre-registration nursing programmes. Robust quality assurance processes must be in place to ensure that training delivered by new and existing providers are delivered to high standards.

Progression and Interplay between training routes

In a university degree-based training programme, there are exit points, which are nationally recognised and have academic currency. The same needs to apply to the students on these programmes.

It is important that opportunity is provided for apprentices to progress in a meaningful way across the various routes on offer, for example, the Degree Apprenticeship and the Foundation Degree Apprenticeship Nursing Associate route should be aligned. Progression should be incremental and staged allowing different points for entry and exit. A level 6 apprenticeship provides an opportunity for people to gain the skills and move through the levels. A staged incremental approach should enable employers to better manage recruitment and lower attrition rates. Recognition of Prior Learning should be applied for those who have taken the Foundation Degree and wish to progress onto the Degree Apprenticeship.

The development of Degree Apprenticeship standards which are centred around outcomes could provide the foundation for the development of a staged route into nurse registration, enabling employers and individuals to achieve specific learning outcomes to incrementally support individuals to develop from a role as a health care

support worker, to a nursing associate role and into the role of a registered nurse, if they wish to do so.

Appropriate banding

The Degree Apprenticeship should present meaningful opportunities for the existing support workforce as well as new entrants into the workforce. This means introducing consistency in banding/ grading appropriate to the level of responsibility, so that roles are national roles aligned with national rates of pay and clear career continuity in whichever sector they are present in (NHS, Public Sector, Independent sector or Voluntary sector).

Whether working within or outside the NHS, pay banding or grading should be determined through job evaluation to ensure pay for work of equal value. There should be clear career pathways and posts available at the end of the Degree Apprenticeship for the successful apprentices to move into.

For apprentices outside the NHS, we believe that pay should reflect the Living Wage as determined by the Living Wage Foundation. Careful consideration to the issue of supernumerary status whilst undertaking period of study needs to be taken into account.

Policy, International and Parliamentary Department

Royal College of Nursing

September 2016

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