



Response to Department of Health consultation Reforming healthcare education funding: Creating a sustainable future workforce

Point of contact

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Introduction

The Society and College of Radiographers is the professional body and trade union for all members of the radiographic workforce in the UK. Membership of the organisation includes radiography students, radiography assistant practitioners and radiographers as well as members of a number of other professions associated with the provision of diagnostic clinical imaging and radiation therapy/oncology services. The Society and College of Radiographers is the only body representing the whole of the radiographic workforce.

Radiography services occupy an ever-more central role in the development of healthcare. The disciplines of diagnostic and therapeutic radiography are required to keep pace with a significant increase in demand driven by the government-led initiatives and international trends.

The Society and College of Radiographers exists to promote the science and practice of radiography in the interests of furtherance of the profession and in the public interest, to support and promote education and research in radiography and to represent the interests of members of the radiographic community.

Diagnostic radiographers employ a range of techniques to produce high quality images to diagnose an injury or disease. They are responsible for providing safe and accurate imaging examinations and often also the resultant report. The identification and monitoring of diseases, skeletal and soft tissue abnormalities and trauma are the major foci of diagnostic radiography.

Therapeutic radiographers play a vital role in the delivery of radiotherapy services. They are the only health professionals qualified to plan and deliver radiotherapy. They constitute over 50% of the radiotherapy workforce working with clinical oncologists, medical physicists and engineers. Therapeutic radiographers are responsible for the planning and delivery of accurate radiotherapy treatments using a wide range of technical equipment.

The Society and College of Radiographers welcomes the opportunity to respond to the proposed changes to healthcare education funding.

Key concerns

- Risk to small programmes in vital areas such as therapeutic radiography and diagnostic radiography.
- Postgraduate pre-registration programmes:
 - Ability of students to afford course fees greater than the Postgraduate Loan for master's qualifications.
 - Sustainability of postgraduate pre-registration programmes.
 - Level and repayment terms of second degree student loans.
- Practice placements
 - Support for students' placement accommodation and travel expenses.
 - Practice placement capacity.
 - Monitoring, promotion and maintenance of practice placement quality.
- Mature students, widening participation and improving access to pre-registration programmes.
- Equity with the current benchmark price.
- Ability of assistant practitioners to access funding for bridging courses and thus pre-registration programmes.
- European Union and overseas students.
- The short timeframe to implementation in August 2017.

Risk to small programmes in vital areas

The Society and College of Radiographers is extremely concerned that small programmes which cannot expand, such as therapeutic radiography, will be at risk of closure unless universities have incentive to continue to run and invest in this provision. Government, the Department of Health and Health Education England must make the case to education providers for the value of small cohort programmes. This must be done from teaching, learning and research perspectives. There must be a focused approach to ensure that sufficient workforce is planned for and that clinical placements are commissioned across each of the professions and across the geography of the UK to ensure that service demand is met.

The Society and College of Radiographers believes risks to therapeutic and diagnostic radiography programmes are real. There is no indication within the consultation document of how, or even if, the difference between the current benchmark price and the maximum tuition fee of £9000 will be reconciled. Both diagnostic and therapeutic radiography programmes are expensive to run due to the specialist teaching and simulation equipment required. Both professions are highly technical and errors can have devastating consequences for service users. Simulation equipment such as X-ray units, imaging interpretation suits, treatment planning systems and the virtual environment for radiotherapy training (VERT™) are all essential to ensure that students qualify with the expected levels of competence and confidence. Upkeep, repair, routine maintenance and upgrade of simulation facilities is essential. If universities do not receive sufficient funding to cover the actual cost of running these programmes then they may not be seen as financially sustainable and thus be closed.

Diagnostic radiography, and especially therapeutic radiography programmes, admit small numbers of students (average 46 and 24 students per cohort respectively) compared to some non-health programmes. Economies of scale do not have a significant impact for small programmes. Thus, it is significantly more expensive to educate a diagnostic or therapeutic radiography student than it is students who are part of much larger cohorts.

Cohorts are small in size, especially therapeutic radiography cohorts, due to the very limited number of placements available for clinical education. Lack of placements leaves the education institutions with little scope for expansion. The number of placements is currently a limiting factor for many programmes. Consequently, the funding changes may not have the desired effect of increasing the number of students in training.

Programmes most at risk are small and specialist ones in remote locations with poor transport infrastructure to the university, and especially to placements. For example, the south west of England and East Anglia. Students at universities in these areas have to travel significant distances to and from placement each day. Therapeutic radiography programmes will be especially affected in these areas.

Diagnostic radiography is on the Shortage Occupation list. Failure to recruit sufficient students or closure of these pre-registration programmes could have significant consequences to the provision of diagnostic radiography workforce.

Where programmes become financially unviable in the short term, the Society and College of Radiographers calls on provision to be made to protect these programmes from complete closure. Protection of programmes is essential if there is to be sufficient workforce to meet local demand.

The Society and College of Radiographers calls for much better publicity and marketing for small professions to be done centrally. NHS careers' main focus is on nursing and the focus must change to include other hard to recruit professions such as therapeutic radiography. The Society and College of Radiographers would welcome the provision of extra funding or other incentives to students who choose to join small, at risk professions such as therapeutic radiography.

Radiotherapy and Imaging Services Manager

"These changes may be applicable for many courses where the applicant [numbers] exceed the places available however therapeutic radiography often does not fall into this category. It is hard to recruit the right calibre of students, difficult to increase numbers due to restrictions on placements and a generally small, little known profession. These changes could have a disastrous effect on the provision of a well trained workforce at a time when the workforce needs to increase."

Postgraduate pre-registration programmes

The Society and College of Radiographers believes changes will directly impact on both undergraduate BSc (Hons) pre-registration programmes and especially postgraduate pre-registration PgD and MSc programmes.

Ability of students to afford course fees greater than the Postgraduate Loan.

Postgraduate loans of £10,000 are designed around 1 year master's programmes. They aren't sufficient for 2 year programmes, which comprise both academic study and essential clinical practice. Postgraduate pre-registration programmes admit small numbers of students. This makes them at particular risk from the changes to funding.

The Society and College of Radiographers believes that where students are eligible to apply for funding through the Postgraduate Loans scheme, they will be financially disadvantaged compared to BSc (Hons) pre-registration students. The Postgraduate Loans Scheme repayment terms and interest rates are not the same as those for undergraduates. Additionally, postgraduate students

will have to pay back their undergraduate and postgraduate loans concurrently. The Society and College of Radiographers strongly believes that both undergraduate and postgraduate students should be able to apply for loans with the same repayment terms and that loans should be repaid consecutively.

Sustainability of postgraduate programmes.

The College of Radiographers approves pre-registration postgraduate diploma programmes and under the new funding arrangements students admitted to these programmes will not be eligible to apply for a loan to cover course fees or living expenses. This puts these programmes at risk of closing.

There are 4 pre-registration postgraduate programmes commissioned by Health Education England geographies where students will not be eligible for funding under the Postgraduate Loans scheme:

- Postgraduate Diploma Diagnostic Imaging, University of the West of England
- Postgraduate Diploma Radiotherapy and Oncology, University of the West of England
- Postgraduate Diploma Radiotherapy and Oncology, Sheffield Hallam University
- Postgraduate Diploma Radiotherapy, University of Liverpool

Radiographers qualifying from a postgraduate programme offer significant advantages to the diagnostic and therapeutic radiography workforce:

- Postgraduate qualified radiographers enter the workforce more quickly than undergraduate radiographer – 2 years to registration compared to 3 years for undergraduates. This is especially important for areas with workforce shortages such as ultrasound and nuclear medicine.
- Postgraduate students have well developed study and research skills which may anecdotally enable them to progress through the career structure more rapidly into advancing areas of practice and research. They may also progress to doctorate qualifications more quickly than other graduates. There is anecdotal evidence that this may be the case.
- Postgraduate qualified radiographers bring life experience and diversity to the registrant workforce which is welcomed and highly valued by diagnostic and therapeutic radiography managers.
- Postgraduate qualified radiographers are more confident and able to challenge clinical practices.
- Student attrition from postgraduate programmes is significantly less than from undergraduate programmes.

Professional Head of Radiotherapy Services & Oncology Clinical Services Lead

“The MSc route has had a significant impact on workforce supply in providing a new route to registration. These applicants tend to have life experiences that support their professional role and often have first degrees that complement the profession. We have had the additional benefit that applicants tend to remain local to their training region and this has had a significant impact on locality workforce supply.”

College of Radiographers' Annual Monitoring Survey 2014-2015

Diagnostic radiography (England only)

Postgraduate attrition = 6.25 %

Undergraduate attrition = 12.44 %

Therapeutic radiography (England only)

Postgraduate attrition = 12.24 %

Undergraduate attrition = 22.30 %

If postgraduate programmes recruit fewer students they will be at risk of closing, thus depriving the diagnostic and therapeutic radiography of a diverse workforce with essential skills, experience and research capabilities.

The Society and College of Radiographers is extremely concerned about the ongoing viability of postgraduate pre-registration programmes. Postgraduate diploma and master's programmes have been commissioned by the Health Education England geographies. A significant amount of education and financial resource has gone into making them successful. The proposed funding changes make these programmes at significant risk of failing to recruit students and thus unviable to run, despite the resources already invested.

Second degree student debt

The Society and College of Radiographers welcomes the exemption for second degree students. However, it is worrying that postgraduate student routes to registration are not able to access the same loan repayment terms as undergraduate students. The Society and College of Radiographers does not believe the arrangements described in the consultation document will encourage eligible students to study for a postgraduate pre-registration degree and instead, they may choose to undertake a second BSc (Hons). The consequence is that mature and able students will not enter the diagnostic and therapeutic radiography workforce as soon as they might have if they had enrolled on a postgraduate programme.

It is the Society and College of Radiographers' conviction that if undergraduate and postgraduate pre-registration students were paid a wage that was sufficient to cover their living costs and course fees, rather than receiving a loan, their contribution to the practice placements would be better recognised and they would feel part of the placement team. This could potentially lead to reduced attrition from pre-registration programmes.

There are other alternatives to student loans:

SCoR member

"Employers could pay the course fees, travel and accommodation support costs for students in hard to recruit professions. However, it is hard to see how this could ever be achievable given the financial situation in the NHS at present. Similarly, employers could be required to pay some, or all of new graduates' student loans as a means of recruiting and retaining staff."

Practice placements

Practice placement expenses.

The Society and College of Radiographers has serious concerns that the standard support costs will not cover the full cost of uniforms, Disclosure and Barring Service checks, immunisations, travel to and from mandatory placements or accommodation while on placement. Many students have to pay double rent for 50% of their programme due to attendance at clinical placements. Practice placements are frequently not close to the university and if second accommodation is not covered by the standard student support system many students will have no option but to travel in excess of 50 miles to reach their placement, and then make the return journey in the evening. Public transport is frequently problematic with limited early morning and evening bus services. This can lead to each-way travel times of several hours. Where students do have cars, they often are not eligible to apply for hospital parking permits or may have to share a permit with other students. Due to shift patterns this can be very problematic to co-ordinate.

Not all students on a diagnostic radiography or therapeutic radiography programme will be required to pay significant travel and placement accommodation costs. If a threshold system is introduced whereby students can only claim back expenses once a certain level of expenditure is reached, the management and allocation of placements will become very difficult. Some students will be more financially disadvantaged than others and this will mean that some placement sites will become unpopular with students. Currently, some students choose to defer their place on pre-registration programmes if they are not allocated their preferred practice placement. The Society and College of Radiographers believes that this practice will become more widespread when students will be financially disadvantaged by being allocated placements far from the education institution.

Diagnostic radiography and therapeutic radiography pre-registration programmes have higher contact hours than traditional university programmes. In conjunction with working shifts while on placement, this makes finding part-time work hard, and impossible for students who live some distance from their placement.

The Society and College of Radiographers already receives reports from education providers and students that retrospective reimbursement of expenses is financially crippling for some students. If there is an administrative error or misunderstanding, a delay in their reimbursement can mean students struggle to pay for basic essentials such as food, rent and transport to placements. Severe hardship is particularly prevalent among mature students and those who do not have families with the ability to support them financially.

Through the Society and College of Radiographers' annual monitoring survey, education providers indicate that students leave pre-registration programmes due to financial hardship, especially if they are placed in a remote location. Travelling and accommodation costs at placement sites must be fully included within the changes.

1st year therapeutic radiography student

"I do [...] think that covering travel and accommodation costs are crucial, especially for radiotherapy. Also, I think it would be good if students were paid (at least) an apprentice wage whilst on placement as really, that's what we are! It would also mean that students don't struggle trying to work around placement to support themselves. I personally had to give up my lifeguard job as due to placement I could no longer attend the mandatory training."

Radiography student

"I definitely wouldn't be able to do the course without NHS funding. Like most students, I need to work alongside studying for the degree to fund rent and other day to day things. This becomes really stretched when you are on placement (especially away from [university]) and unable to work. If I had to fund tuition fees as well, money I earn from work wouldn't stretch to cover everything."

The College of Radiographers regularly receives applications to the charitable benevolent fund from students in severe financial difficulties. Making students pay more towards travelling to placement or for accommodation at, or near, their placement will inevitably increase financial pressure which may in turn lead to further attrition from therapeutic radiography and diagnostic radiography programmes.

The Society and College of Radiographers strongly urges the government to cover the full cost of travel to and from placements (above that which is normally incurred travelling to university) and necessary second accommodation.

Practice placement capacity

Changes to current funding methods will not deter all applicants, but could reduce the pool of individuals applying. Diagnostic radiography, and especially therapeutic radiography, do not have the luxury of additional placement capacity for extra students. Very few placement sites report having extra space for additional students. There may be some limited placement capacity in the independent sector, but the range of experience students are exposed to in independent sector placements is limited.

Programme providers and service managers report that the lack of placement capacity is one of the biggest barriers to the success of the funding changes and consequently the biggest risk to meeting the government's desired outcome of 10,000 more health care student places.

Diagnostic radiography lecturer

"Increasing the available workforce in the healthcare sector seems unarguably to be a desirable aim. Whilst universities may have a degree of flexibility to increase staffing and infrastructure to accommodate this, this overlooks a fundamental limitation in student training i.e., the clinical placement element. Hospital departments, in a time of severe staff shortages, are already struggling to provide the time and attention needed for students to gain their clinical competencies and undertake clinical assessments. However much the universities may wish to increase their cohorts, there isn't currently the capacity to train greater numbers of students in the clinical environment and this issue does not appear to have been adequately addressed."

Practice placement quality.

The Society and College of Radiographers has significant concerns about ensuring high quality clinical placements.

It is not clear how clinical placements will be funded under the new system. The Society and College of Radiographers strongly believes that there must be a method of ensuring that the Education and Training Tariff is used for the purpose it was intended. In some cases, this may mean the money follows the student to the placement department. However, there should also be recognition that funding may work best in other ways, especially where good systems are already in place. For example, a hospital-wide collaborative approach may be more suitable. One size does not fit all. However, what is clear, is that there must be an audit trail to ensure that the money is being used for pre-registration student education.

The Society and College of Radiographers recognises that providing practice educators is very good use of the tariff money as it is unfair to expect education providers to pay for practice educators when the placements are already receiving money that could be used for this purpose. Education providers have evidence that the provision of a practice educator supports students in clinical practice and facilitates learning. This helps to prevent avoidable attrition and creates a link between clinical radiographers, the service manager and the education provider. However, finding examples of *good* use of the Education and Training tariff is difficult. It is far more common to find service managers who cannot access the money, or who have been told to not even try, by their finance departments.

There is significant inequality between the amount of Education and Training Tariff paid for medical students and that paid for diagnostic radiography and therapeutic radiography students. The Society and College of Radiographers believes that all clinical learning environments should have at least one practice educator to support students and to facilitate clinical learning. The Education and Training Tariff should be sufficient to support this.

Placement managers who do not receive, or cannot access, the Education and Training Tariff have no incentive to work in innovative ways with the education provider to increase placement capacity. The Society and College of Radiographers strongly believes that funding practice placements appropriately will be critical to the success of the new system. If it is not possible to audit where the Education and Training Tariff money goes then further money should be provided directly to the clinical departments, for the explicit purpose of providing practice educators to support students. The use of the Education and Training Tariff must be addressed if the new systems are to work.

Many imaging and radiotherapy departments train students from more than one education provider. The Society and College of Radiographers has already identified worrying indications that placement providers will make their placements available to the education institutions of *their* choice. This will introduce competition into health care education provision that may not be in the best interests of the students. Education institutions may no longer be able to provide placements close to campus and students may need to travel further for a placement. If an education provider is unable to negotiate sufficient placements this will put the viability of their programme at risk.

The Society and College of Radiographers has also received indications that universities are already starting to become more competitive in order to gather placement spaces. Again, it may not be in the best interest of the students if placements are more remote from the university or their term time accommodation. There is currently good collaboration between universities but indications

are that this is changing and educators are becoming more guarded with information about placements.

The Society and College of Radiographers welcomes new providers to radiography education where there is currently an unmet need. However, there must be sufficient quality assurance checks to ensure that the students experience high quality clinical and campus learning environments. There is insufficient information in the proposal document to understand how this will be achieved.

Changes to practice placements and especially to their funding could lead to huge variation in education provision and potentially closure of programmes that are unable to obtain sufficient placements close to campus. This would have a detrimental effect on students who may have to travel even further between the education provider and the placement.

Clinical education providers and students are already reporting to the Society and College of Radiographers that there is insufficient placement capacity. Placement providers continually report that they will not be able to cope if they have to take more students. If student numbers increase beyond capacity, the quality of the education provision would become questionable and thus, the quality of the quality of the learning experience.

1st year diagnostic radiography student

"I am concerned about how the quality of training will be maintained if the numbers of places on undergraduate programmes are increased to the numbers that have been suggested through the reforms; it is not just the student place at the university that needs to be considered when increasing student places but how a quality training programme can be maintained whilst on placement. If student numbers significantly increase it is reasonable to assume there will be limited training available on placement. This may have a detrimental effect on the quality of newly qualified radiographers.

More staff would need to be employed to manage the increased numbers of students on placement and this would increase costs."

The Society and College of Radiographers strongly believes that there needs to be increased accountability in practice placements to ensure that all radiographers are involved with the delivery of high quality student education and training. Students spend 50% of their time in the clinical learning environment and if there is little audited education and experience quality assurance in place by commissioners or placement funders then the quality of the experience cannot be guaranteed. There is insufficient detail within the consultation document about how Health Education England will ensure the quality of the clinical education provision they fund.

The Society and College of Radiographers calls for more investment in resources and technology to compliment clinical placement training, such as simulation. Equipment must be accompanied by the provision of practice educators and lecturers who can, and are willing to, use it to facilitate high quality learning.

The Society and College of Radiographers continually receives reports from prospective students and practice educators that they cannot facilitate pre-application observational visits to placement departments. An observational visit is a pre-requisite to ensure that students understand the role of the diagnostic and therapeutic radiographer. This is due to the Trust's requirements for DBS and occupational health clearance and other administrative processes prior to even a single day visit. Consequently, prospective students have only a very limited experience and knowledge of

the profession they are applying to join. “Wrong career choice” is one of the main reasons students give when they leave the education programme. Unless this problem is addressed, recruiting more students will not make a difference to the number of diagnostic and therapeutic radiographers entering the workforce at the end of their education programme.

Mature students, widening participation and fair access

The Society and College of Radiographers welcomes the increased support for living costs for the majority of students, however, not all students will be financially better off and students’ aversion to debt must be considered. Debt aversion will particularly affect mature students and those from low income backgrounds.

The consultation document acknowledges child care expense but not the gravity of the situation for some students. When students are placed remote from their home for mandatory placements for 50% of the programme, plus potentially considerable travelling time, childcare costs are considerable. Many able students who are single parents, or those without a family support network, will be disincentivised from applying to diagnostic radiography and therapeutic radiography programmes.

Student diagnostic radiographers and therapeutic radiographers participate in shifts, including night shifts. It is hard to find child care outside normal hours, especially official, registered child care. The suggested childcare support arrangements will have a detrimental effect on the recruitment of a diverse range of students. The changes are counter to long standing efforts to widen access to health careers.

The Society and College of Radiographers welcomes the inclusion of discretionary maternity support in the new funding arrangements. However, the support provided is *less* than that provided by the current system. The current system includes paternity provision as well as maternity and adoption awards. The proposed system, although discretionary, makes no mention of paternity leave or payments. Clear and transparent information about maternity and other support systems will be essential to ensure that students can make an informed choice prior to embarking on their course.

The Society and College of Radiographers believes there are further measures that need to be considered to ensure fair and equitable access to radiography education. A high proportion of radiography students are mature. Of the 2970 diagnostic radiography and therapeutic radiography students who are members of the Society of Radiographers, 37% are ≥ 25 years old. Mature students bring welcome diversity, skills and knowledge to their cohort. Radiographers, lecturers and mature students have indicated that the funding changes pose a considerable risk that mature students may not consider diagnostic or therapeutic radiography as a career option if they had had to pay fees.

Therapeutic radiographer

“Many mature students of radiography who I trained with or work with (I was a mature student) agree with me that we would never have embarked on the uncertain course of radiography training, diagnostic or therapeutic, if bursaries had not been available and course fees paid by the NHS. If these reforms go ahead, most potential mature applicants will not even consider applying.”

Diagnostic radiography lecturer

“Mature students represent a significant proportion of healthcare cohorts and are generally valued for their maturity and life experience. The current funding arrangements are attractive to mature students wishing to embark on a career change without the financial risks of taking out student loans. These students often meet the criteria for the widening participation agenda having been unable to engage in higher education at an earlier stage in their lives.

They frequently have family commitments such that the burdens of large loans (albeit repayable slowly) may prove a deterrent.”

1st year MSc Radiotherapy student

“The NHS acknowledges the contribution that therapeutic radiographers make in improving services for cancer patients. For students who are studying Radiotherapy & Oncology for a future career, the NHS funding provides a supportive environment that enables them focus on learning and training without worrying to earn enough money to pay fees and bills. Without NHS funding, I could not take my two years off work and focus on studying to become a therapeutic radiographer. The loss of NHS funding will definitely have impact on the work force of future and of course more bring challenges to manage the increasing demands of cancer patients’ service.”

3rd year MSc Radiotherapy student

“I know I wouldn't have been able to do the course if I had to pay fees on top of funding it myself. It would have made a difficult situation so much more difficult and as master's students, a large number of us are not in a position where we can ask our families for help.”

The Society and College of Radiographers strongly believes that if fair access is to be a reality then practice placement accommodation provision inequalities must be addressed as a matter of urgency. Currently, there is insufficient student accommodation at many practice placement sites. Practice educators who try to book accommodation for diagnostic radiography and therapeutic radiography students are regularly told that accommodation is only available for medical students. Radiography students are placed in bed and breakfast accommodation, hotels or have to travel long distances from their home to placement each day. Private hotel and bed and breakfast establishments do not always have suitable access to study facilities such desks, internet connection and facilities to store books, clothes and other personal items over weekends when students return to their families. This has a significant and detrimental effect on students’ wellbeing and ability to successfully complete their programme of education.

Therapeutic radiography and diagnostic radiography students work shifts and this severely limits the possibilities of gaining part-time work for those who need to supplement their income. Lack of parking and evening public transport exacerbates placement capacity issues - if the student cannot get home after their shift, they cannot work shifts. Unlike nursing students, who can gain employment as bank staff, therapeutic and diagnostic radiography students cannot gain employment which would also benefit their clinical skills unless they are formally employed during

holidays as assistant practitioners; this happens very rarely, thus putting therapeutic and diagnostic radiography students at a financial disadvantage compared to other health professions especially nursing.

Fair access requires some investment in monetary terms as recruitment to, and attrition from, therapeutic radiography programmes is a concern. It is difficult to encourage fair access when the profession is still not highly visible, student numbers are small and there is confusion, or complete lack of understanding of the difference between therapeutic and diagnostic radiography at high level in Health Education England and at the highest level of government.

There is no mention in the consultation document of the Department of Business, Innovation and Skills' guidance on Disabled Student Allowance. Under this guidance, education providers will be required to meet disabled students' needs as part of fulfilling their institutional responsibilities, rather than through direct financial support being provided to individual students. With this guidance due for implementation in the same period as the funding changes, consideration must also be given to the support that these students may need while on placement. What method will there be to cover additional costs to the *clinical* education provider? This important point must be considered during the implementation of the funding changes.

The Society and College of Radiographers is deeply concerned that the proposals do not address inequalities in a meaningful way and strongly believes the changes will cause diagnostic radiography and therapeutic radiography students more financial hardship than they currently experience. This is very likely to lead to attrition from programmes and thus a critical workforce shortage. The Health Education England Reducing Pre-registration Attrition and Improving Retention (RePAIR) project is currently investigating attrition and will be making recommendations for retention of pre-registration therapeutic radiography students.

Benchmark price equity

Both diagnostic radiography and therapeutic radiography programmes are longer than traditional university programmes due to essential practice placements, thus, they are more expensive to run. There is a worrying lack of information and assurance that these extra weeks will be funded over and above the £9000 tuition fee.

The Society and College of Radiographers calls for clear assurances to be made, as a matter of urgency, that education providers will receive appropriate funding to provide high quality diagnostic and therapeutic radiography education to meet workforce needs. Radiography and other allied health professions *must* be included within the Higher Education Funding Council (HEFCE) price groups that attract funding above and beyond student tuition fees. Such assurance will go some way to mitigate the risk of education providers leaving the radiography education market.

Scope for part-time study is limited. Currently there are no part-time programmes for diagnostic radiography or therapeutic radiography due to small numbers of students, making part-time programmes financially unviable for education providers.

The new funding arrangements for 17/18 might encourage part-time study as this would facilitate students working part-time to fund their studies. However, there would need to be some incentive for education providers to run part-time programmes. As there is no indication in the consultation document that the current benchmark price will be met, it seems unlikely that there is sufficient incentive for part-time programmes to be set up.

The Society and College of Radiographers advocates that education providers must be properly supported to ensure there are sufficient staff to provide education and engage in research and scholarly activities. The benchmark price for radiography is higher than £9000 and there is a risk that education providers will not invest in sufficiently experienced lecturing staff, especially for small programmes where economies of scale have a much smaller contribution.

Assistant practitioner bridging courses

There is no recognition within the proposals of the full range of prospective students that apply for radiography programmes. Assistant practitioners can currently join the 3rd year of some pre-registration radiography programmes via bridging courses which recognises their assistant practitioner qualifications and experience via accreditation of prior experiential learning (APEL). Who will pay bridging course fees? Bridging courses are classed as short courses so students are not eligible for an undergraduate student loan. They could apply for a Career Development Loan which is subject to credit status, however, Career Development Loan repayments start one month after the bridging course is completed. This means that the students will be repaying a loan while they are still full-time students and living off an undergraduate student loan. This will not be an attractive option to many and cuts off yet another route into diagnostic radiography and therapeutic radiography.

Assistant practitioners who will be starting the 3rd year of a pre-registration radiography programme in September 2017 will not be classed as continuing students so will have to pay up to £9000 fees. They may well have already committed to the bridging course. Due to insufficient information to date, and the rushed implementation of these changes, these valuable practitioners are not able to make an informed choice about their future education and careers.

European Union and overseas students

European Union students are currently eligible for student bursaries and placement providers receive the Education and Training Tariff to cover clinical training costs. From August 2017 these students will not be eligible to apply for a student loan to cover fees and living expenses. It is not clear from the information provided who will pay for their clinical training. The admissions cycle for 2017 entry has already started in education institutions and there is no clear guidance on how placements will be funded. This lack of information means it impossible for education providers to make decisions about potential students and the number of European and international students they can admit. It also means it impossible for students to make decisions about the programme they wish to study. The lack of information and guidance about practice placement funding will significantly affect education providers who currently take a significant number of students from the Republic of Ireland. Many of the students they train go on to work in the UK as diagnostic radiographers.

The Society and College of Radiographers believes that there is potential for universities to admit large numbers of overseas, full fee paying, students. These students will not help to meet the workforce need in the UK. Department managers indicate that they need students who are local to their department and who will stay within the regional workforce once they qualify.

Timeframe to implementation

The Society and College of Radiographers is very concerned that the funding changes, implemented over a very short timescale, with limited information, will destabilise radiography and wider allied health profession education. The risk may be mitigated in some way by having clear and transparent access to transition funding. This will go some way to stabilising education provision and workforce supply, especially in small, hard to recruit professions such as therapeutic radiography.

Due to limited information available about the funding changes, prospective students are not currently able to make an informed choice about their future career. The Society and College of Radiographers calls on government to provide clear information for prospective students as soon as possible and prior to 6th September 2016 when the Universities and Colleges Admissions Service (UCAS) opens for applications.

Additional concerns

Patient care must be at the forefront of the rationale for change. In order for patients to receive high quality care it is necessary to have sufficient high quality and well trained and educated healthcare professionals. The proposed changes put this provision at risk in many different ways and the government must address the raft of concerns in detail before implementing changes which have not fully been considered.

The Society and College of Radiographers calls on Government to adhere to the advice of the Pay Review Body in order that health professionals receive sufficient salary to make the financial and personal hardship during training worthwhile.

The Society and College of Radiographers provides quality assurance review of therapeutic radiography and diagnostic radiography pre-registration programmes. We advocate the highest standards of education and training both on campus and on placement. Professional bodies are absent from the consultation document. It is the role of the professional organisations to be professional leaders in education and practice. The Society and College of Radiographers welcomes the opportunity to work with government, Health Education England and other key stakeholders in the future.

Summary

The Society and College of Radiographers understands the need in ensuring robust workforce supply, however, our concerns are considerable.

If these concerns are not effectively and quickly addressed there will be a huge negative impact on the education and provision of therapeutic and diagnostic radiographers to the workforce. This, in turn, will impact on the provision of high quality patient care.

Without sufficient, well-educated diagnostic radiographers entering the workforce many patient care pathways will be adversely affected. Without sufficient, well-educated therapeutic radiographers, cancer treatment will be delayed. Without sufficient diagnostic and therapeutic radiographers, the consequences to patients will be potentially devastating.