CCR. WISSON CONFIDENTIAL Prime Minister NURSES' EDUCATION AND TRAINING: "PROJECT 2000" I am consulting colleagues about our response to the proposals by the United Kingdom Central Council for the reform of nurses' education and training over the next decade (Project 2000). There is a meeting of the Council on 20 May and on 23 May I shall be addressing the RCN's annual congress. My aim is to build on the political gains from our acceptance and funding of the Review Body report and to demonstrate our support for the nursing profession. In our manifesto we said: "Nurses want a training and career structure which reinforces their professionalism, rewards experience, and

"Nurses want a training and career structure which reinforces their professionalism, rewards experience, and offers opportunities for managerial responsibility without being removed to a distant desk. We share those views and wish to further them."

The career structure is now in place. Project 2000 provides us with the opportunity on training.

Some valid criticisms have been made of the Project 2000 proposals as they were originally presented to us. We are having to modify some parts in significant respects. The resultant package will be substantially different in its effects and I thought you might find it helpful to have this note on the main points.

Our own analysis showed that the proposals as originally presented were not feasible for manpower reasons. They also ran counter to subsequent Government proposals on vocational training, which are now being implemented by the National Council for Vocational Qualifications (NCVQ). We have secured substantial changes in the Project 2000 proposals to meet both these points. We could not accept without substantial modification the proposals that Enrolled Nurse (EN) training should cease and that in time there should be a workforce with a single level of qualification and of broadly the same size as the current Registered and Enrolled levels combined, supported by unqualified helpers at a relatively low level of skill. would have been an impossible target in the light of demographic trends which point to a severe shortage of nursing candidates with the necessary skills, and the benefit in economic terms would have been very dubious. Accordingly, we have pursued instead a two-fold approach:

- a) widening the entry age to professional training to draw from the widest possible range of social and academic backgrounds; and
- b) developing training for non-professionally qualified support workers so that they can both replace ENs in part and, for the most able, enter the wider entry gate to professional training.

This new approach is a key part of the modified proposals, with important advantages. It will result in the proportion of qualified nurses falling from about 63% of the nursing workforce now to between 45% and 50% in the early years ofthe next century, which will fit with demographic realities. We estimate that by the end of this century it will cost £170-200m per year less than Project 2000 in its original form. It will also help the Royal College of Nursing leadership to persuade their members to accept auxiliary nurses as associate members, thus reducing the danger of NUPE and COHSE making membership gains among non-professional staff.

The UKCC have already agreed to extend their proposals for widening the entry gate. They have also accepted the principle of support workers at several levels, trained on NCVQ lines, and

retain the essential recruitment capacity which ENs represent and at the same time replace EN training, which is most unsatisfactory in its present form, with something more suited to the needs of the situation. I propose to tie my agreement to the phased disappearance of EN training to satisfactory further progress on widening the entry gate to qualified nurse training and on the development of NCVQ workers.

I have ensured that the proposals, as now modified, will not result in an all-graduate profession. Nor will nurse training become theory-dominated as some have alleged. I am determined to ensure that nurse training remains essentially practical, and my response will make that clear. The training of nurses will in future be better focussed on the care of patients as people, and their practical training will be more closely geared to the needs of the vocation and each individual nurse's educational progression. There will be more opportunity to follow patients from department to department within the hospital or from hospital to community. Instead of the present inflexible and repetitive three year basic training there will be an 18 month foundation course followed by an 18 month branch programme during which students will recieve specialist vocational training in the care of particular types of patient - the mentally ill, the mentally handicapped, children and general hospital and community care. The end result should be a more self-confident

nurse, committed to longer participation in the clinical workforce and capable of working in either hospital or community settings without the extensive further training which is often needed under the present arrangements.

To sum up, the modified proposals will have three major advantages. They will give us the necessary wider field from which to recruit. They will provide better training for both the smaller number of professionally-qualified nurses and the larger number of vocationally-qualified support workers which demographic pressures will produce and greater opportunities for nurses to obtain better qualifications. And they will tackle the bad effects of the present high-intake and high-wastage system, in terms of resources, nurse stress and morale and quality of patient care.

It has become clear from our extensive consultations on the original proposals and the important modifications I now propose that privately most of the profession's leaders accept that there is scope for changes on the lines which we want. But they will need to carry the profession with them in some difficult discussions, and for this they require a signal from us. I propose to indicate agreement to some of the Project 2000 changes

(eg the change to student status and the new pattern of basic training) for this purpose, but to make it clear that agreement to the full package will remain conditional on the points I have indicated eg on the phasing out of EN training. My soundings suggest that such a response, though less than the UKCC and RCN originally hoped for, will be acceptable to them will avoid the hostility and possible political difficulties associated with further delay, and will set the stage for further discussion and development. Indeed notwithstanding the substantial modifications we have made to the original proposals, my soundings suggest that our response will be publicly welcomed. It will enable us to obtain maximum political value from the announcement, through my RCN congress speech on 23 May.

I am copying this minute to John Major, Malcolm Rifkind, Peter Walker, Tom King, Norman Fowler and Kenneth Baker.

12 May 1988

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