MEDICAL AND DENTAL STUDENT FUNDING AND FINANCE

I am writing to you to inform you of changes to tuition funding for those medical and dental students starting their course of study in autumn 2012.

I have agreed these changes with David Willetts, the Minister of State for Universities and Science.

In broad terms, there are two groups of medical and dental students affected by the changes we are making – first time students on the five or six-year undergraduate programme and, secondly, graduates on the accelerated four year programme.

At present, undergraduate students have access through Student Finance England, to a maintenance loan and a tuition loan in their first four years. The tuition loan covers the full cost of tuition for the first four years. From the fifth year, the Department of Health (DH), through the NHS Bursary Scheme, provides maintenance support. In addition to the bursary support, DH also funds their tuition costs from the fifth year. In 2011/12 the maximum tuition cap will be £3,375.

The increase in tuition fees in 2012/13, up to a maximum of £9,000, means that it is necessary to take action to ensure that these students do
not have to meet the additional costs of increased tuition fees up-front. We have agreed to increase the tuition charge payment from the NHS Bursary Scheme for this group of students. This meets Government’s commitment that no eligible first time student will have to pay the costs of tuition up-front.

We have also agreed a new package of support for graduates that start to study on the accelerated four-year programme in autumn 2012. As at present, in year one, graduate entry students will have to self-fund the first £3,375 towards their tuition costs. In later years, the NHS Bursary will continue to pay £3,375 towards their tuition. In all years of the graduate programme, a Student Loan Company loan will be available to cover the difference between £3,375 and the tuition charges of their universities, to a maximum charge of £9,000.

This package means that students in both groups entering in 2012 will have to find no more additional up-front fees than those entering in 2011. The funding arrangements explained above are interim arrangements and apply only to students starting their studies in 2012/13. Students already studying will be unaffected by the change.

Both the Department for Business, Innovation, and Skills and the Department of Health are firmly committed to delivering a long-term solution to student support to attract the brightest candidates to these professions and to support widening participation. Arrangements for students starting courses in autumn 2013 and beyond will be announced following further joint work between the two Departments, and we look forward to working with you on this.

I am copying this letter to David Willetts and key stakeholders on the issue of medical and dental student tuition fees, and will place a copy in the libraries of both Houses.

ANDREW LANSLEY CBE