

Diversity, recruitment and retention in nurse education, catalyst event 19th September 2017



- Professor Liz Thomas, Edge Hill University
- Dr Vanessa Heaslip, Bournemouth University
- Dr Michele Board, Bournemouth University
- Dr Vicky Duckworth, Edge Hill University
- *... a bit about us...*
- Participants *... and a bit about you...*
- **Information and consent forms**

Overview of the Catalyst Event

- Context and purpose of the day
- Student stories
- Key issues: Short presentations
- Stakeholders' priorities for widening participation in the nursing workforce
- Experiences of nurse recruitment and retention
- Improving widening access and success in nurse education
- Priorities and next steps

Context and purpose

- Widening participation to higher education (HE) has evolved from expanding who has access to HE, to also considering their experience and success in HE and beyond.
- Research commissioned by Health Education England (HEE) looked at widening participation in NHS-funded course. Financial issues were raised much more than in research with WP students more generally.
- This coincided with the removal of bursaries for NHS-funded students and the introduction of student fees and loans, - and inclusion in Access Agreements.



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Research studies and evidence

- Integrative Review on WP in Nurse Education (Heaslip et al. forthcoming): empirical studies and editorials on WP in pre-reg nurse education in UK (2013-2016; n=14 papers). Whilst WP is a key issue for nursing there is a lack of conceptualisation and focus regarding mechanisms to encourage and support wider diversity of entrant to the profession.
- UCAS data: Analysis by UCAS (which will be extended through further analysis at the end of the cycle to consider changes in relation to student characteristics).

- Widening participation in NHS-funded programmes: this study included analysis of HESA data, 70 interviews by student-peer-researchers with NHS-funded students and recent graduates, review of institutional strategies to widen participation in health.
- Today we have students from Bournemouth University here to share experiences and views on the topics discussed.

- Registered nurse perceptions of diversity: 806 registered nurses responded to the online survey which sought to explore:
 - motivations for training as a nurse
 - understandings of the term diversity
 - perceptions regarding diversity in nursing and health care
 - factors that may influence diversity in nursing students
 - thoughts regarding the funding changes on recruitment of a diverse student body

Key issues: What we know and what we don't know

- Lack of clarity about what diversity and WP mean in nurse education context.
- Emerging evidence about a decline in applicants to nurse education.
- Limited evidence base about how to expand participation and increase diversity and success.
- Research and interventions focus on what students lack.
- Concern amongst existing students and workforce that funding changes will reduce diversity, and particular concern with regards to some WP groups.

What is widening participation?

- Health Education England have a commitment to WP to ensure:
- *...the NHS workforce is more representative of the communities it seeks to serve... and development and progression is based upon a person's merit, ability and motivation and not their social background or the privilege, extent and effectiveness of their social networks.*
- Little definition of groups/who is a WP student, lack of recognition of the student lifecycle, written before changes to student funding.

Lack of evidence base

- There is a lack of evidence about all aspects of WP in healthcare education in general and nursing education in particular – resulted in HEE-commissioned studies.
- Comprehensive searches in 2014 and 2017 have revealed few studies (23 and 10 respectively). Small scale, isolated studies, usually in single institutions.
- Access focus on lack of awareness (= information provision) and academic barriers to entry (= alternative entry routes).
- Retention focus is on academic challenges (= academic and personal support).

Finance lack of economic capital

- Finance influenced students' decisions about entering HE. Tended to be more planned (e.g. postponed or fitted around personal circumstances).
- Lots of uncertainty about finance, especially eligibility for additional grants.
- Once in HE students juggled studying, placements and paid work.
- Travelling and/or relocating for placements created significant financial barriers.
- Childcare is costly and needs to be booked in advance. Often relied on family and friends.

Workforce concerns re changes in funding on diversity

- Students and recent graduates reported that they would have been unlikely to enter HE without grants.
- UCAS data shows 23% fewer applicants to nursing from England in 2017 cycle in January.
- UCAS data post-clearly shows decline is in those aged 20+.
- Findings from the Nurse Diversity questionnaire highlight that
 - 80% of the respondents felt that having tuition fees paid was important/very important
 - 88% of the respondents identified that having access to financial support was important/very important

Workforce concerns re changes in funding on diversity

- *...narrows the pool of potential students to those who can either fund themselves or who have a familial financial support network, therefore you will potentially miss out on a huge number of nursing students who have fabulous potential and determination to see the course through but are financially restricted. We need nurses who are caring and compassionate about healthcare not ones who can simply afford to be a nurse! (nurse respondent)*
- *What about those people who aren't sure if they'd be able to nurse (those with a disability for example). What if they join the course but have to stop half way. They will live with the debt to pay off, it would be a constant reminder that they couldn't be a nurse because of their disability (nurse respondent).*
- *Mature students will disappear. This will be a huge loss to the profession (nurse respondent)*
- *It may encourage applicants to be more certain of their career choice and so reduce the attrition rate (nurse respondent)*

Passion for nursing

- Students made very deliberate decisions to enter nursing, underpinned by a strong desire to be a healthcare professional, rather than drifting in.

I chose adult nursing because it is what I want to do. It's just a pure passion. I believe you should do something you enjoy in life, whatever that may be, and this is what I choose to do, and this makes me happy (Fiona, Nursing)

- Also identified in the nursing workforce (90% wanting to help people and 75% wanting to register as a nurse).



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Passion for nursing

- Passion comes from either personal or professional experience.

I worked on a young dementia unit for a little while, a long time ago... That was what made me want to do nursing in the beginning. (Liam, Nursing)

- Present in the nursing workforce (35% personal experience and 45% previous paid care experience)
- The passion helps them overcome the challenges they encounter both accessing and succeeding in HE.

Passion for nursing

I think it was just a desire to be a nurse and get on in life. That's what kept me motivated and kept me going. Sometimes it is so much easier to think, 'What on Earth am I doing? You know, it's just so hard... but you just carry on. Well, I try to carry on. (Myrtle)

No, I can't just give up, but maybe work around it. For instance, if I can't reach a deadline for whatever reason, extend it, mitigate the circumstances, work around it. It might hold me back but I eventually go, because it is what I want to do. I will eventually get there, in the end. (Nahleejah).

- Having access to emotional support was identified as important/very important to 88% of the respondents in the workforce questionnaire.
- People are supported by friends and family.

- Academic challenges
- Financial concerns
- Practical difficulties
- Integrative review (Heaslip et al. forthcoming) noted lack of research undertaken exploring attrition of WP students in Nurse Education (1 study (Brimble 2015) who noted that access students less likely to complete in comparison to BTEC and A levels (but not statistically significant)

Impact on the workforce

- Nursing workforce questionnaire identified that 85% of respondents felt that diverse entry routes into nursing was important/very important.
- 83% of the respondents in the nursing workforce agreed/strongly agreed that diversity of nursing staff was important for the nursing profession.



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Impact on the workforce

Anyone who is able and motivated to do the job well should have the opportunities to undertake training and become a qualified nurse. From this point, everyone should have equal opportunities to develop their careers based on their abilities, not upon their social or ethnic background (Nurse respondent).

It is an opportunity and a challenge. Cultural and economic aspects of nurses and students who are from other ethnicities or classes are not always factored in adequately into training nor career development initiatives, often leaving a status quo that feels like there is a 'them' and 'us' (Nurse respondent)

It has a place but too much diversity could result in a lack of focus for my ward! (Nurse respondent)

Not entirely sure it adds much (Nurse respondent)

Impact on patients

- 83% of workforce respondents strongly agreed/agreed that:
 - diversity of nursing staff is really important in healthcare
 - diversity of nursing staff benefits patient care
 - diversity of nursing staff working in healthcare is important for the wider community



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Impact on patients

I feel that diversity or lack of it directly impacts patient care. It may be that the clinical needs are met but the patient may not (I believe) experience a truly holistic, supportive healthcare episode which in turn may affect a variety of things such as repeat presentation, successful medication use and confidence in their care (Nurse respondent).

Diversity it's self is good, however when it also results in nurses not speaking English well enough for patients to be able to understand, or having education/experience that isn't up to UK standards it leads to poor care (Nurse respondent)

Students experience

Bournemouth University nursing students

- Stuart Collier (2nd Year Nursing Student)
- Charlotte Collins (2nd Year Nursing Student)
- Norma Noyce (3rd Year Nursing Student)
- Nefriteri Olobia (2nd Year Nursing Student)
- Kelly Weaver (2nd Year Nursing Student)

Stakeholder priorities

Discussion chaired and facilitated by Dr Vanessa Heaslip

- Heather Caudle, Director of Nursing Improvement
- Stuart Moore, Health Education England
- Helene Fouquet, HEFCE
- Chris Scrase, OFFA
- Graeme Atherton, Neon
- Val Johnston, Unison

Your priorities...

Experiences and challenges

- Chaired and facilitated by Dr Michele Board.
- Professor Elizabeth Rosser, Associate Dean, Bournemouth University.
- Your experiences: What are the challenges in achieving WP in nurse education with respect to:
 - Access
 - Success on the course
 - Progression to nursing employment



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Strategies to widen participation

- Facilitated by Prof Liz Thomas.
- *Outreach... going into care homes, going into hospitals, setting up stalls, promoting university and dispelling myths in the workplace, really.*
- *Give people the bug for it...create more work experience opportunities or taster days...*
- *Even if it's not quite a straightforward plan, let them work towards what their ultimate goal is. Support them, be there for them when they need help and advice because if you feel lost, you can get to a point where you feel so lost, you don't even know how to ask for help.*



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Strategies to widen participation

World café, round 1, discuss the following:

- Priorities for widening access to nursing courses
- Priorities to improve diverse students' retention and completion
- Priorities to support diverse student progression into professional practice
- Priorities to retain a diverse nursing workforce

Round 2, if time allows, move to the next topic

Round 3 consider: what evidence do you need to inform the implementation of the ideas discussed?

Feedback from the groups.

Next steps

- Our next steps: analysis of UCAS data to see who has and has not entered HE.
- Plan our next research project.
- Further dissemination.
- Your next steps...
- Collaboration
- Feedback form
- **Thank you to everyone for participating today**



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Publications and outputs so far

- Heaslip, V., Board, M., Duckworth, V. and Thomas, L. (2017) Widening participation in nurse education; an integrative literature review, *Nurse Education Today*
- [http://www.nurseeducationtoday.com/article/S0260-6917\(17\)30203-4/fulltext](http://www.nurseeducationtoday.com/article/S0260-6917(17)30203-4/fulltext)
- Kaehne A, Madden M, Thomas L, Brown J, Roe B (2014) *Literature Review on approaches and impact of interventions to facilitate widening participation in healthcare programmes*. Health Education North West, EPRC, Edge Hill University.
<http://tinyurl.com/jldlxtu>
- Thomas, L., Lander, V., Duckworth, V., Allan, D., Kaehne, A., Birken, G., Moreton, R. and Rodríguez-Cuadrado, S. (forthcoming) *NHS funded healthcare education programmes: Building the evidence for supporting widening participation: Final Report*. London: HEE
- Thomas, L., Lander, V., Duckworth, V., Allan, D., Heaslip, V., Board, M. and Rodríguez-Cuadrado, S. (working paper) Persistent passion: Implications for policy and practice in widening access and success in healthcare education.
- Duckworth, V., Thomas, L., Lander, V. Allan, D., Heaslip V., Board, M. and Rodríguez-Cuadrado, S. (working paper in progress) Using 'capitals' to understand widening participation in nursing education.