



STUDENT NURSES: CAPTURING THEIR VIEWS AND ASPIRATIONS AROUND PATIENT CARE

At the end of April 2012 a cross-section of students from the University of Chester were interviewed in order to gather a range of views from our next generation of nurses. These interviews were conducted as part of NHS North West's work around [Energise for Excellence](#) (E4E), which is the 'call to action' of at least 200,000 nurses, midwives and health visitors across the country to take ownership of improving patient care whilst reducing costs.

Two first year students, four second years and two third year students each volunteered to take part, and their responses were recorded in a series of short interviews. The questions were centred on students' opinions in regards to their own nursing careers as well as the NHS as a whole, and what could be done to improve the health service.

Why were the interviews conducted?

Led by Margaret Williams, Assistant Director of Nursing at NHS NW, the interviews were designed to provide an informal snapshot of current opinion amongst the students, as opposed to being an empirical piece of research.

Margaret explained that it is important to consider student nurses when looking at pre-registration courses, in order to understand why people come into nursing in the first place, what is entailed in such courses and what the challenges are. She believes that it is important that student nurses have a voice, as they are going to be our future workforce.

The other purpose of conducting the interviews was to raise awareness of the E4E campaign amongst the students themselves and to signpost them towards the website, so that they can understand the importance of sharing good practice and to galvanise them to action.

How will the data collected be used?

A Quality and Care Forum has been set up which has asked for responses to several questions. Margaret will feedback the students' informal responses (See Appendix 1) and will also use their interview responses to help inform future work around improving patient care.

Responses will also be taken to senior nurses across the North West and Higher Education Institutes (HEIs) in order to improve their understanding of the students' experience and what changes they feel would help drive improvements.





GOOD PRACTICE CASE STUDY



Laura Heatly – is a second year student who has been working in care for eight years. Lisa worked her way up as far as she could by undertaking NVQs, before entering an access course and going on to become a student nurse. *“I worked my way up and did my NVQs and got to the point where they wouldn’t let me do anything else because it was level 4 and that was management, so I went and did an access course for health”*



Stephen Kewn – a first year student, Stephen started his training in March 2012, so he is right at the beginning of his nursing career. However he has worked in the healthcare sector since he was sixteen, and over the course of the last thirteen years rose to the role of senior support worker in a high-secure mental health unit. *“I got to a senior support worker in a mental health unit and got to a position where I couldn’t get any higher”*



Richard Hall – is a mature student who is also in his first year. Richard joined nursing as he wants to make a difference in patient care and displayed a clear passion for making this happen. *“I can make a difference. If I come home at the end of the day and one person has benefited from my being there, then that’s something, it’s an achievement”*



Marie Walsh - has always been drawn to a career in nursing but having a family at a young age led her down a different path initially. Now in her third year, Marie entered nursing as a mature student, having worked full-time in an accountancy career.

In reference to giving up a full-time job to retrain as nurse *“I wouldn’t change it for the world. I don’t wish I’d done it sooner because I feel the life experiences I’ve got ... have helped me in my training”*



Sara-Rowles-Wright – Now a second year student Sara also undertook her degree as a mature student. Having worked in the healthcare sector for fourteen years, Sara rose as high as she could, working in broad range of settings from care of the elderly to mental health. Therefore she entered her new career with a broad wealth of experience behind her. *“I wanted to take a more direct role... in patient care ... rather than just as a support worker in the background. I wanted to be more involved in clinical decisions”*



Marie Rowe – another mature student in her third year, Marie felt naturally drawn to a career in nursing, having worked as a carer to her grandmother from a young age and also in various care settings since leaving school. After raising a family Marie decided to become a nurse herself so that she would have, as she felt, a more secure future *“I was brought up in a very caring environment and it seems like just a natural part of my life. (Becoming a nurse) just seemed second nature to me”*



Laura Burkey and Lisa Critchley – are both in their second year. Laura and Lisa entered nursing straight out of school. Their motivations for joining the service were quite different but they are enjoying their training and looking forward to their future careers.

“I pretty much grew up with my Grandma and Granddad and want to be able to look after them when they’re older” (Laura Burkey)

“I did want to be a social worker ...but I found that now that I’ve started my nursing I wouldn’t change that” (Lisa Critchley)



KEY FINDINGS

Even though the students all came from very different backgrounds and had unique personal aspirations it became apparent as the interviews progressed that many students were giving very similar responses to certain questions, demonstrating a clear consensus of opinion around key areas such what makes a good nurse and what potential service improvements could be made to improve patient care.

Q1 - Why did you choose to become a nurse?

When asked for their reasons for becoming a nurse, the responses were as varied as the students themselves, ranging from a desire to make a difference, to feeling that it was the next natural step in their careers, or wanting to enter a profession that could give them long-term security. However one similar reason appeared again and again, which was that they believed that nursing was their natural vocation, and that being part of a caring profession just felt right.

In talking to the students Margaret commented *"What really is refreshing ...is that none of them have really thought about their first wage packet or what the money would be"*. She noticed that this was still the case even if they had left had a well paying job to become a nurse as they were more interested in the caring side of things.

Q2 - Have you got a role model and what qualities does that person have?

For some students it was their family and friends, in particular their mothers and grandmothers who inspired them to become nurses, and who have supported them throughout their training. *"I don't know how people do it who don't have a strong family behind them"* Laura Burkey

For others their role models have been people that they have encountered as students, such as the mentors on training placements and university tutors.

"There are two role models. There's one from an academic side from the University and there's a personal one. My Nana...she was very warm she could talk to everyone she had great communication skills (and) Jan Barton... she pushes me to do well. Marie Walsh

A few attributes came through for role models time and again, such as warmth, empathy, communication skills and a passion for caring for people.

"She's very non-judgemental ...very caring, very warm" Marie Rowe

"Sympathetic, empathetic, and really passionate about the care she delivers" Sara Rowles-Wright

Q3 What aspect of your training are you looking forward to the most?

With a cross-section of students taking part, from first through to third year, the students' answers tended to reflect whatever stage of training they were at. For instance first year students were looking forward to getting stuck into their first placements, whilst second year students were more focused upon the placements they had done before and how those would compare with the different experiences they were looking forward to. Meanwhile, third year students were understandably looking ahead to their future nursing careers and at the kind of areas they would most prefer.

However, a passion for learning was obvious throughout the entire group, as was an understanding that a nurse can never know everything, and must spend their career developing their skills and striving for more knowledge and experience. Marie Walsh, who wants to start her nursing career within critical care, stated *"I'm always going to be developing my skills, that's never going to change. I'm never going to know everything, that's what I'm looking forward to as well"*.

For Marie Rowe it is the extra responsibility that she is looking forward to the most and the chance to "maybe be heard or allowed a voice". For Stephen Kewn, who has a background in mental health, it is the chance to work in a different field. *"I am actually looking forward to my alternative branch placement"*.

Other students are seeking overseas experience, such as Richard Hall who is looking forward to signing up a diversity placement in Africa. He believes that it will give him invaluable experience and also an appreciation of what is often taken for granted in this country *"I think it will be a life changing experience, it will open my eyes to so many things. I think it will make me evaluate myself and my sort of way of thinking about when I'm on placement"*





Q4 - Where do you see yourself in the next 10,20, 30 years?

The students' aspirations appear to be based on many different factors, from personal circumstances through to individual motivators, such as their families or a desire to work abroad. Some students are highly driven, and although they are not certain where they will end up, they know that they want to move up the career ladder. Others are quite content to remain as staff nurses. However what is important to them all is that they are working directly with patients and making a positive contribution.

Marie Walsh, who is a self-professed achiever would like to progress but doesn't want to stop caring for patients directly, as she feels she will struggle if she does. *"I'm an achiever and I like to progress (but) I don't think I'd like to lose touch of the patient contact"* Marie, who has just completed her final year, is also considering doing international nursing now that her family is older. However all that she really wants is to be happy and to love what she does so she will keep an open mind to any opportunities that might come her way.

Stephen Kewn is not really sure of what his future holds but he too has indicated that he might like to move abroad once his kids have grown, to somewhere like Australia. He wants to undertake training first and build up some experience before making any decisions.

Aspirations also seem to be linked to the student's personal backgrounds and experience. For instance Marie Rowe, who has worked in a care home for twenty four years, would like to run her own home one day, where she is able to use all her experience to make a difference *"What I've always wanted is to have my own care home...just to be able to shape things"*

Similarly Sara Rowles-Wright, who has worked in the field of sexual health, is interested in pursuing a nursing career in this area. She feels that sex education in this country is not robust enough for young people or indeed for the growing number of older people who are dating again and aren't aware of the risks that are out there.

Therefore, she would like to play a part in changing this *"I want to specialise in gynaecology and sexual health as I don't think there is enough, or a decent quality of, sex education in this country"*

Q5 - What one piece of everyday practice have you picked up that will allow you to be a great nurse in the future?

The resounding answer to this question, from all of the students was communication, communication, communication! It was clear that this was the single most important attribute that the students felt made nurses great at their jobs. *"Communication and empathy they're the two main things in nursing"* (Marie Walsh).

Sara Rowles-Wright cited effective communication as being important and noted the importance of both talking and listening. She explained that in a busy hospital setting most patients try to get eye contact so that they can talk to nurses, so it's good to take time out to do that and to really listen to their experiences, and any needs or fears they might have. All of this she explains helps to make them feel better and more relaxed. Sara also stated that having been a patient herself, it is not particularly nice being in hospital and that although nursing is more person-centred now, in busy wards the patient experience is negatively affected. She feels that by improving communication and staffing levels nursing can be brought into a better, more positive light. *"When you've got really busy wards that are under pressure and understaffed as well I think that affects the patient experience"*

Since being at the University of Chester Richard Hall has learnt more about the actual hand-on skills that are needed and just how important communication is. He and his fellow students have learnt how to wash one another and clean each other's teeth

and this has made him realise how hard it to understand how to communicate properly with patients. *"It's communication... Last week we had to learn how to wash each other and brush each other's teeth...it wasn't until we were actually sat there you realise how hard it is to actually think what it is you have to say to the patient"*

To Marie Rowe the most important thing is also communication skills and she feels that nurses should respect everyone and their individuality. Marie particularly loves working with the elderly as they have a wealth of history and stories to tell. She also pointed out that one day any nurse could be in that position themselves and that they should treat patients with the dignity and respect that they would like. Marie explained that for elderly people with communication problems you have to have time and patience and shouldn't rush them. *"I particularly love the elderly becauseof, all the stories they can tell, their history".*

Similarly Laura Burkey and Lisa Critchley cite good communication and understanding as key skills. Laura also went on to explain that it is vital as a nurse that you don't judge, and that nursing staff are there to help *everyone as a patient and must be able to see past everything else. "You need to have good communication skills to get through to your patients and make them happy being there, because you don't want them to be frustrated"*





GOOD PRACTICE CASE STUDY



Q6 - As a future nurse or nursing leader, what one big improvement would you like to make to the service?

Once again the students showed a consensus of opinion on this issue, with everyone stating that if they could make one big change it would be improved staffing levels. Each student identified that it was staff shortages that led to a wide range of problems, such as lack of adequate time with patients and personalised care. *"Need to concentrate on patient care a lot more.... need to slow down a bit more"* (Stephen Kewn)

Marie Walsh believes that continuity of care is a massive issue from what she has seen personally. She doesn't understand the reason behind employing bank staff when it's cheaper to hire permanent members of staff, either on a part-time or fulltime basis. She feels that permanent staff can deliver a better quality of care and that cut backs are being made in all the wrong places, declaring that front-line staff shouldn't even be considered when making cuts. *"I think continuity of care is a massive issue... from what I've seen personally...I don't understand the reasoning behind employing bank staff when it's cheaper ... (to) hire a fulltime member of staff"*

Both Laura and Lisa also felt strongly that more staff and equipment would make the role of nursing much easier. They have noticed over the course of their two years on placements that hospitals often use agency staff and they felt that it would be better if more full-time nurses were employed instead. They also stated that departments often ran out of vital equipment and that it would be easier for staff and patients alike if they had more effective equipment in the first place,

such as reclining beds to assist with washing patients. *"More Staff and equipment, it would just make the job easier"*

Marie Rowe feels that she should would like to be able to spend more quality time with her patients and that nurses should have time to care holistically for their whole group of patients. She cites lack of time as being a major issue that prevents her from achieving this, due to staff shortages. At the end of each day she feels that although she's done her best for her patients she would like to have time to do everything for each patient during her shift. *"I think you should be able to have the time to care holistically for your group of patients."*

Sara Rowles-Wright, who had just finished a placement on an acute elderly and dementia ward with five staff to twenty-four patients, also feels strongly that staffing issues should be addressed. *"Staffing issues definitely should be addressed....you need more staff in order to be able to care for (patients) in a more effective way. It needs to be a bit more personalised...If we address that I think we'd probably address some of the stresses and pressures that staff feel and sickness levels would probably drop and staff would probably be a lot happier to come into work and probably deliver a better service to the patients."*

Laura Heatly was also of the opinion that staffing levels as well as communication skills needs to be improved. She feels that students are given the time to talk to patients but perceives that qualified nurses don't really get that time. *"You're given the time to talk to the patient because you're a student whereas when you're a nurse you don't seem to get that full time ...maybe more staff or extra support, (such as) volunteers coming in to speak to patients"*

An additional point raised by Richard Hall was that an increase in the amount of paperwork required reduces the amount of time that nurses can spend with their patients. He reflects that often when relatives see nurses sitting there doing paperwork they think that they're not doing anything. To address this issue Richard states that when he qualifies he will

personally spend as much time as possible with patients during his shift and will stay late to do notes if needs be. *"(The NHS needs) more nurses and more time to care...it's all about paperwork, which is good from a legal side... but the more documentation we have to do the less time we spend with the patient. When I do qualify I am going to make sure I try my utmost best to spend as much time as I possibly can with that patient. If that means having to stay late to do my notes, then I stay late to do my notes"*

SUPPORTING MATERIAL

The following resources are available as an appendix to this case study:

Appendix 1 – [Student Nurse Interview Video](#)

Appendix 2 – Time to Care –Student responses sent to Quality & Care Forum

The views expressed in this case study reflect those of the students being interviewed, and are not those of NHS Northwest or the University of Chester.



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