

Learning to care in unprecedented times

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About this Research

This Policy Briefing draws on the emerging findings from the British Academy-funded project, 'Learning to care in unprecedented times: the Impact of Covid-19 on nursing education' and makes recommendations for the NHS and university Schools of Nursing. The study aims to assess the impact of the COVID-19 pandemic in the midst of the emergency and the immediate aftermath, and the wider repercussions for nursing education.

Nursing in higher education

The role of Registered Nurse (RN) has only relatively recently become an all-graduate occupation¹. Professional identity for nurses is often seen as one of 'inner dedication or vocational commitment' rather than based in an academic discipline². While disabled, Black and Minority Ethnic, and lower socio-economic groups make up a significant proportion of the RN workforce, there is a lack of evidence over how to best meet the needs of these populations within universities³. There have been broader attempts to diversify higher education through widening participation to increase students from under-represented groups. This is at the same time as increased personal costs to students⁴ who increasingly are viewed as consumers⁵. A range of sociological literature has explored the difficulties for under-represented students to gain access to, 'fit in', and gain the same graduate outcomes from universities⁶. The pathways into, through and out of nursing education were already of great importance in addressing workforce problems before the COVID-19 pandemic. The 2019 NHS Interim People Plan dedicated a chapter to 'Tackling the Nursing Challenge', with a number of immediate and long-term actions focused on education, including increasing placements, stimulating demand, alternative routes, financial support and retention of newly qualified staff⁷.

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The class of 2020

The COVID-19 outbreak meant that undergraduate nursing degrees were disrupted as clinical placements could not be provided and university campuses closed. Students in the final six months of their programme in England were asked to volunteer or 'opt in' to support the NHS through working in clinical practice as an 'Aspirant Nurse'. Over 28,000 nursing students in England took a paid work placement or work opportunity in response to the pandemic by 17 July 2020⁸. As well as the unprecedented circumstances these students found themselves in at the end of their degree, they were also the first cohort of undergraduate nursing students (starting 2017/18) to have to pay tuition fees and lose the NHS bursary. Their experiences highlight ongoing issues in nursing education, but also are unique.

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Key Findings

- The disruption to the final year of their nursing degree caused participants anxiety, confusion, uncertainty and stress, compounded by a perceived lack of communication from their universities.
- In place of official communications, student nurses engaged with peer networks on Facebook or WhatsApp for support.

*Communication wise from the university was completely shut down. Yes, nobody could get answers, nobody knew what was going on and I get that there was pressure on the lecturers about the situation. Of course we were hearing stuff from students of other universities. Obviously you make friends through placement from other universities. It seemed like our one was terrible, they weren't giving us any information. **We felt completely abandoned** (Ruth, post-92).*

- They had extended networks from students at other universities and felt that the differences between how institutions were handling the pandemic were unfair.
- Many found it difficult to concentrate on finishing their academic work, exacerbated by the difficulties of online learning and the lack of access to campus facilities.
- The student-as-consumer idea was not at the forefront of their understanding of education, and they put more emphasis on practical training rather than academic skills.
- Overwhelmingly, the decision to opt in as an Aspirant Nurse (AN) was driven by the need to finish on time.

*So it wasn't really a difficult decision for me. And I knew as well that if I opted in, I would still be able to finish my degree on time, because I would have done the hours that I needed to do... **that's been the main goal for the last three years, getting the degree and being able to start my career.** So to have that put on hold, I don't know, it kind of would have been a bit disheartening, I think, if I'd had to finish in December/January. (Mia, post-92)*

- As student nurses, they also felt some obligation and wanted to contribute.
- They chose where to work based on existing relationships where they had previously had placements, and many were already working or had jobs lined up on that ward or unit.
- Some reported feeling that they had no choice but to opt in, or were forced to do it, even though they were reticent because of the safety concerns for themselves and their family.
- Financial pressures were not evenly experienced, with single parents, those from working class backgrounds or ethnic minorities more likely to juggle their studies and placements with bank work. This meant that being paid as an AN was another key incentive to opt-in, but also added to stress.

*I failed my dissertation, initially, and then I had to sort of, like, talk to my supervisor and just be honest and say, "Listen, I am very tired. This is affecting me mentally. **I'm on placement. I'm doing so many hours. I'm banking at the same time, yeah.**" So, it was all a bit too much for me, yeah (Sarah, post-92)*

- Free university accommodation during the AN period helped to mitigate financial pressures.

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- There were administrative problems applying for their AN positions, and would have liked more support from their universities.
- The AN role was seen as ambiguous, with some in supernumerary roles, some acting as Healthcare Assistants but others reporting they were asked to perform tasks beyond their competencies.
- Student nurses felt their contribution during the pandemic was undervalued.
- Out of the 15 interviewees, two had contracted Covid-19, one of whom had been seriously ill and placed on a ventilator.
- There were some positive outcomes, such as the aspirant nurse role building confidence and skills.
- Drawing on their training and making a contribution gave a sense of purpose and developed their professional identity.

For me, it sounds horrible, but Covid has been a good thing. I've been able to be trained early on and have a lot more practice with that. The support going into the trust as a student that I'm going to working at, rather than being thrown in as a qualified nurse and how no idea of the trust either, and just being able to slowly progress and work at that trust and lead myself in nicely (Rosie, post-92)

- Most interviewees felt that they were better prepared for the transition to registered nurse due to the AN experience.
- There were concerns that preceptorships would be cut short, and that the training and continuing professional development available was curtailed due to Covid-19 restrictions.

Recommendations for Policy Makers and Lessons Learned

- NHS Trusts need to put measures in place so that these newly-qualified RNs who graduated during the pandemic are not disadvantaged by curtailed preceptorships or restricted training.
- Communication to student nurses about their programmes from both universities and national bodies such as Health Education England needs to be timely and consistent, to minimise both stress and potential misinformation among peer networks.
- A transitional period in a Band 4 pre-registration position, similar to the Aspirant Nurse role, could be beneficial following the undergraduate nursing degree.
- Any future schemes such as the Aspirant Nurse role need to be effectively administered and organised so that applicants do not miss out on their choice of specialism or are delayed in starting their positions, which would likely impact on retention.
- Ongoing support from universities post-qualification could also help with transitions into the Registered Nurse role.
- Universities in partnership with the Nursing and Midwifery Council may need to revisit how the academic discipline of nursing as taught in higher education relates to clinical practice, given that practical experience was still more valued among the participants.
- More work is required on how changes to the funding of nursing education puts additional pressures on nursing students, and how the effects are not experienced evenly.

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Notes on method

15 semi-structured interviews were conducted with participants who were final year nursing students during the outbreak of the 2020 Covid-19 pandemic. They were drawn from two institutions: a post-92 university and a Russell group university. All interviews were conducted online. A topic guide was designed to gather demographic information about the participants, and provide prompts for participants to 'tell the story' of their pandemic experiences and the impact has been on their education.

¹ Willis, P. 2012. *Quality with Compassion: The Future of Nursing Education*. Report of the Willis Commission on Nursing Education. London: Royal College of Nursing.

² O'Connor, S.J., 2007. Developing professional habitus: A Bernsteinian analysis of the modern nurse apprenticeship. *Nurse Education Today*, 27(7): 748-754.

³ Young, K. 2016. "Working towards widening participation in nurse education", *British Journal of Nursing*, 25(2): 112-116.

⁴ Harrison, N. 2018. "Patterns of participation in a period of change: social trends in English higher education at 2000 to 2016" In *Higher education and social inequalities: University admissions, experiences, and outcomes*, edited by R. Waller, N. Ingram and M.R. Ward, 54-80. London: Routledge.

⁵ Wilkins, A. and P.J. Burke. 2015. "Widening participation in higher education: the role of professional and social class identities and commitments" *British Journal of Sociology of Education*, 36(3): 434-452.

⁶ Waller, Ingram and Ward (eds) 2017

⁷ NHS England, 2019. Interim People Plan, <https://www.longtermplan.nhs.uk/publication/interim-nhs-people-plan/> 3 June 2019.

⁸ Health Education 2020. HEE COVID-19 student data collections to support paid placement deployment <https://www.hee.nhs.uk/coronavirus-covid-19/hee-covid-19-student-data-collections-support-paid-placement-deployment> 17 July 2020.