



Exploring the attitudes and learning needs of student nurses in relation to care home nursing

Briefing Paper

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Key Points

- Ensuring preparation, recruitment, retention and development of nursing in the care home sector is of pressing public and policy concern
- Student nurses have predominantly negative views about care home nursing which currently are not explicitly countered in the Nursing Studies Curriculum
- Student nurses are open to learning about care home nursing as part of their education and in focus groups made a number of practical suggestions for how care home nursing could be incorporated into the new curriculum

Background

In the UK there are 450,000 care home beds, three times the number of acute hospital beds. It is estimated that the national requirement for registered nurses in care homes in the UK is 40000 (full time equivalent) (Spilsbury et al 2015). This is in addition to the contribution of community nurses providing nursing care to half of all care homes who are not registered to provide nursing care. The healthcare needs of the care home population is increasingly complex relating to the combination of dementia and multimorbidity (Kinley et al 2014). Care home nurses and community nurses therefore require specialist knowledge to care for these residents and work with a range of health care professionals to ensure needs are met and to minimise 'avoidable' transfers to acute care. Despite this, formal education focusses predominantly within the acute sector, bolstering the perception that modern nursing is largely technical (Garbrah et al 2017). This inadequately prepares student nurses to meet the complex needs of an ageing population (Steven 2011). Additionally, a recent UK Delphi study found that two thirds of expert respondents think that currently care homes do not provide supportive learning opportunities for student nurses (Spilsbury et al 2015).

The competencies of nurses in care homes are poorly defined and there is a perception that it is a less skilled branch of nursing and therefore a lower status career (Stanyon et al 2017, Thompson et al 2016). O'Neill (2018) suggests that nurturing, formalising and mainstreaming of gerontological nursing is a necessary development. The care home sector is projected to grow therefore ensuring preparation, recruitment, retention and development of nursing in the sector is of pressing public and policy concern (Spilsbury et al 2015).

Recent studies have identified the competencies of Registered Nurses in care homes which should form the basis of a curriculum (Box 1). Student participation in curriculum development is reported to increase levels of individual and collective student responsibility for their learning,



enhance student performance and teachers’ satisfaction (Bovill 2014), at the same time enhancing student engagement (HEA 2015). On this basis, and the imperative to engage student nurses with a neglected but vital part of the health care economy, funding was sought to undertake this study.

Box 1: The competencies of Registered Nurses working in care homes

<p><i>Stanyon et al (2017)</i> Attitudes and Relationship-centred care Enhancing well-being and maintaining ability Communication Knowledge and understanding of old age Assessment and care planning Administering procedures and interventions Hygiene Urinary Incontinence Bowel Care Nutrition and hydration Pain management Skin Viability Pharmacology Dementia Care Cultural, Spiritual and Sexual needs of residents Sleep Long term conditions and co-morbidities Managing acute ill health End of life care Moving and handling Resident safety Team working Management and leadership Teaching Quality improvement and evidence based practice Policy and procedures Reflective practice</p>	<p><i>Additional points from Kiljunen et al (2016)</i> Attitudinal and Ethical Competencies Ability to respect autonomy and privacy and support individuality and integrity of older people Advocacy Interactional Competence to cooperate with residents, family members and multiprofessional team</p>
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Aim

To understand the attitudes, experiences and learning needs of student nurses in relation to care home nursing in order to inform the BN curriculum development in 2018.

Objectives

- To understand student nurse perspectives of care home nursing.
- To understand student nurse attitudes to, and knowledge of, educational opportunities within the care home setting.



- To use the findings to co-produce the development of the new BN with Honours curriculum.
- To use the findings to inform the Lothian Care Home Centre of Excellence, Innovation, Training and Research (Usher Institute, CPHS).
- To disseminate the findings to Queen Margaret University and Edinburgh Napier; and, with relevant disciplines within the University of Edinburgh such as Medicine of the Elderly, Social Policy, Health Policy and Social Work.

Methods

Ethical approval was granted by the Ethics Committee School of Health in Social Science, University in Edinburgh. All student nurses in each year, one to four, were invited by email to attend a focus group. An information sheet and consent form were attached and an opportunity given to ask questions. Focus groups began with Year 4 and Year 3 in October 2017, Year 2 in January/February 2018 and Year 1 in March 2018. Written consent was obtained at the beginning of the focus groups and all groups were digitally recorded and fully transcribed with permission. All names were removed and each participant given a unique code. Attendance is shown in Box 2. NVIVO software was used to manage the data. Each researcher undertook an initial reading of the transcripts and an initial list of codes were inductively derived and then organised into themes. These were discussed among the team to identify areas of agreement and disagreement and reach consensus.

Box 2: Attendance across year groups

Year Group	Number attending
Year 4 Group A	8
Year 4 Group B	3 (2 Year 4 plus 1 Year 3)
Year 3 Group A	6
Year 3 Group B	8
Year 2 Group A	2
Year 2 Group B	1
Year 1 Group A	7
Year 2 Group B	1
Total	36

Findings

Student Nurses Attitudes to Care Home Nursing

The overarching attitude towards care home nursing of participating student nurses at the outset of the focus groups, with some notable exceptions, was negative.

What they had to do wasn't using the max...they weren't using all of their knowledge, they weren't putting sort of...they weren't faced with new situations every day, they weren't faced with things that would necessarily be mentally taxing, although it was tiring and long and sort of...it took time and a bit of physical effort. (Year 2)

These negative attitudes were formed in a variety of ways



- Visiting relatives in care homes
- Working as a volunteer in a care home while at school
- Visiting care homes with community nurses while on placement
- Negative media portrayals

While fourth year students spoke positively about their experiences of the Management of Transitions course and how it helped them understand better the depth of understanding required to nurse older people, their negative attitude about care home nursing was not explicitly addressed or countered by the current curriculum and nor was the possibility of care home nursing as a career option considered:

I think it's just something that I never really thought about. Just because we're not guided down that route and we are more...we have placements in hospitals and we speak to nurses in hospitals and they ask us what we're considering and we say something to do with the hospital, 'cause we've never really met...care home nurses. (Year 4)

At the beginning of focus groups the predominant view of care home nursing as a career option is captured in the following quote:

'As a young nurse, going out, a care home isn't really somewhere I would initially be wanting to work. I think you would lose quite a lot of your clinical skills and stuff. Like, I want to work somewhere that's busy and I can learn lots of stuff and have interesting cases. Whereas in a care home, I don't really know if I would get that'. (Year 4)

There was initially a lack of understanding of the role of the nurse in care homes and difficulties in distinguishing the role of nurses from that of health/social care assistants. Previous studies have indicated that the occupational status of nurses is higher when their principle involvement is with medical and technical interventions as opposed to 'essential care' (Thompson et al 2016). This view was evident among student nurses and appeared to become more embedded as students progressed through their training: those in fourth year put more value on clinical (technical) skills than those in earlier years who put a higher value on building relationships with patients. Indeed some students spoke about their decision to study nursing being influenced by fast paced medical television programmes such as *24 hour A&E* and *Gray's Anatomy*. While this style of nursing will always exist, it is at odds with the changing epidemiology of long term and life limiting conditions in the population where the dominant thrust of nursing will be with patients with chronic or slowly progressing rather than acute conditions with relationships lasting over many years.

The few students who were interested in care home nursing were already experiencing negative attitudes from their peers about their preferences:

I knew that boys my age would be like, oh, what are you doing at a care home, and stupid stuff like, oh, personal care; they'd act like it's not a good job and well. It's not just personal care, it's everything else. It's a good job, I'm not just going to work to help somebody with incontinence. That's not what it's all about. People might think that's all, the dirty jobs or whatever, but it's not. I feel like people maybe think that a hospital is more clinical, but I feel that you can still have rewarding role in a care home as well. (Year 1)



However, during the course of the focus group discussion, as the students were engaged in thinking about what care home nursing entails, there was a dawning realisation among some students of the challenges and complexities of care home nursing:

'We would have the most autonomy in a care home, 'cause we would be out there as the nurse and there wouldn't be the MDT there, it would be also the nursing assistants...we would really need to know everything...there's not really a hiding place. Whereas I think in a lot of hospitals, there is a wee bit more'. (Year 4)

Students did not feel that they would be equipped to take on this role as a newly qualified nurse and that a degree of life experience and emotional maturity would also be required. Being exposed to sad situations, death and dying was a concern for some but seen as rewarding by others. Not being able to do a good job because of lack of resources and discomfort with providing care 'for profit' were also issues putting students off working in care homes. Despite this, as the discussion progressed there was clearly an openness among students to learn about care home nursing and a desire to be exposed to as many care settings and learning opportunities as possible. They provided a number of suggestions that would help develop the curriculum and these are presented below.

Student nurses suggestion for curriculum development to incorporate care home nursing.

I feel like all we hear is the negative aspects of working in a care home. So I think it would be nice to hear maybe some positive...like, maybe people who have worked there have got positive opinions of it... that come in and talk to you instead of just hearing it on the news or reading about it and just hearing all these horror stories about care homes. (Year 4)

It's planting that seed and watching hundreds of people go out there, and maybe five of them will come back, but that's five more than if you didn't plant that seed. (Year 2)

Going from a ward, to see, like what actually happens when you discharge a patient, because it's always like a mystery where...off they go...the discharge void... I don't really know what goes into the decision making of like the nurse choosing, helping families with a certain care home and like what options are. (Year 2)



Maybe more kind of like experience with students in care homes. Not even just through placements, but like sending a group out to do some kind of activity, or something, with care home residents. Just so they can actually see what a care home's like. Because although I had a tiny experience, I didn't even see the care home, I literally just saw the activities room. (Year 3)

It would be good to have...maybe not a whole placement in a care home, but even if we had a week in the middle in a care home that maybe a lot of your patients went to. (Year 4)

A little dabble... a two week care home placement, like a two week community palliative care then a two week Hospice placement...if you got a wee taster of different aspects of that it would be quite good (Year 4)

I think you should incorporate more care home care in placements for students so they can actually see what a nursing role in a care home's like. Because obviously, from what we see, we just see carers...we don't actually see what (the nurses) role is and what they do. (Year 1)

As a 17 year old, coming into nursing... I'd want to work in A&E. I did an A&E placement, and I hated it and it's not what I want to do with my life now...seeing different areas, like A&E, and care homes, does kind of naturally change your perspective on it. (Year 3)



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Proposal for developing the curriculum

The following are possible aims for developing the new BN Nursing Studies curriculum in relation to care home nursing and gerontological nursing more generally:

1. All student nurses graduating from the University of Edinburgh, whatever their future career aspirations, will have a clear understanding of the role of care homes and care home nurses in the wider health economy and will act as positive advocates for their colleagues working in the care home sector.
2. All student nurses will be introduced to excellent role models from within the care home sector.
3. Those student nurse interested in care home nursing in the future will have excellent learning opportunities within the curriculum which match the competencies required by Registered Nurses in care homes and meet NMC requirements

With these aims in mind the following changes to the curriculum are proposed:

- Year 1 first semester -75 hours in a care home to be arranged between the student and the allocated care home. The aim is to provide an introduction to the care home environment and the care home population with some specific objectives to ensure they gain understanding of the respective roles of nurses and health/social care assistant.
- Care home nurses involved in course content and learning and teaching approaches.
- Develop a resource with students where positive stories from about care home nursing are showcased (applied for IIG)
- A measureable curricular means whereby a potential or expressed desire to pursue care home nursing is fostered and facilitated through the UG programme

Wider context

Curriculum development is only one factor in addressing the crisis in recruitment in care home nursing. Also required is the development of care homes as suitable placements for learning, drawing on models being tested nationally (Tiplady et al 2018) and internationally (Loffler et al 2018, Snoeren et al 2016). Policy changes which alleviate the moral distress felt by nurses in residential care when resources are lacking, and appropriate support and valuing of nurses in this setting are fundamental prerequisites (Pijl-Zieber et al 2018)). These issues will continue to be addressed by the authors in collaboration with Napier University and Queen Margaret University through the establishment of the Teaching/Research Care Centre in Lothian.

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