

NET2021 Conference

Live session full abstracts

Theme Session 5D

Key challenges for healthcare education

5Di, 10:30 - 12:20, 2 September 2021

Research paper

Exploring the potential of the Nursing curriculum to develop nurses who are non-judgemental

Su Everett, Middlesex University

Promotional abstract: This research explored student nurses' understanding of non-judgementality and their experiences and ability to be non-judgemental and tolerant of the diversity in sexuality and nursing. A pluralist methodology was used, based on a synthesis of narrative and psychodynamic theories. This research describes the experiences of student nurses in becoming non-judgemental when caring for patients and their sexuality. We describe several factors that constrain and enable this journey.

Background, including underpinning literature and, wherever possible, the international relevance of the research: This research explored student nurses' understanding of non-judgementality and their experiences and ability to be non-judgemental and tolerant of the diversity in sexuality and nursing. The researcher wanted to know how teachers can develop nurses who meet the Nursing and Midwifery Council's (NMC) expectations of non-judgmentally in relation to sexuality (NMC, 2015 updated 2018). This study was conducted after an introductory module on sexuality to a cohort of second year undergraduate Nursing degree students. A two-week module on sexuality and nursing was developed and implemented, which comprised two taught days of theory and discussion, online reading and multiple-choice assessment.

Aim(s) and/or research question(s)/research hypothesis(es): The aim of the module was to increase awareness in Nursing students of the importance of patients' sexuality on their emotional and physical health and encourage discussion on any anxieties surrounding the subject area. In this study student nurse participants were asked to join an online discussion group during the teaching, and then complete a digital diary whilst in clinical placement.

Research methodology/research design, any ethical issues, and methods of data collection and analysis: A pluralist methodology was used, based on a synthesis of narrative and psychodynamic theories. Data collection: 27 students in 2016/17 were recruited to participate in the study and a range of methods were used to collect data: online discussion groups, digital diaries, face-to-face interviews. Three groups participated in online discussion; group two included two participants, group three five. Eight digital diaries and three interviews were completed. Data Analysis: Data were analysed using the narrative theories Labov, Braun and Clarke and the psychodynamic theory of Michael Balint.

Key findings and recommendations: Findings: This research describes the experiences of student nurses in becoming non-judgemental when caring for patients and their sexuality. We describe several factors that constrain and enable this journey:

1. Students' own backgrounds, which are diverse, shape how they meet/deal with the challenge;
2. Students observe/witness judgemental practices in their mentors and other nurses towards sexuality, which challenge their own developing non-judgmentally;
3. These experiences raise emotional challenges which are processed through emotional labour.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

1. Students' own backgrounds, which are diverse, shape how they meet/deal with the challenge;
2. Students observe/witness judgemental practices in their mentors and other nurses towards sexuality, which challenge their own developing non-judgmentally;
3. These experiences raise emotional challenges which are processed through emotional labour.

References:

NMC. (2018). *Professional standards of practice and behaviour for nurses and midwives*. London. NMC.

Keywords: Non-judgemental, Sexuality, Curriculum. Pluralism.

5Dii, 10:30 - 12:20, 2 September 2021

Research paper

Ambidexterity: A vital capability for healthcare educational managers

Dr Eve Collins, University of Chester

Promotional abstract: This case study explores the lived experience of academic managers of a faculty of healthcare in the UK where neoliberal, social, economic and political forces are shown to be having a transformative effect on academics' world of work (Taberner, 2018; Beattie, 2017). The construct of ambidexterity attracts considerable attention in the field of organisational theory but to date has been afforded scarce attention in the higher education arena (Stokes *et al.*, 2017). Here ambidexterity emerges as a vital managerial capability indicating that the academic community may have much to gain by its development at both the individual and organisational level.

Background, including underpinning literature and, wherever possible, the international relevance of the research: A central challenge of contemporary healthcare educational management lies in the dual need to maintain and enhance existing provision and services to succeed in an increasingly competitive educational arena, while also ensuring future survival by responding to new business opportunities to meet the evolving needs of the healthcare workforce. This is reflective of the wider corporate world where the construct of "ambidexterity" is used to describe the ability to balance dual exploitative and explorative strategic aims (Hughes, 2018). Thus, this study uses the construct of ambidexterity as a theoretical lens through which to explore the experiences of healthcare educational managers.

Aim(s) and/or research question(s)/research hypothesis(es): Aim: To investigate how ambidexterity is experienced by managers of healthcare education. Research question: How is ambidexterity experienced by managers of healthcare professional education? Sub

questions: How are exploitation and exploration experienced, at management level, in professional health education? What tensions arise in the pursuit of ambidexterity for managers of health professional education? What are the enablers and barriers to ambidexterity for managers of health professional education?

Research methodology/research design, any ethical issues, and methods of data collection and analysis: An exploratory case study methodology is utilised, integrating data elicited from interviews with archival documentary data and organisational strategy documentation, relating to the four-year period between 2014 and 2018. This interpretivist methodology facilitates a detailed exploration of healthcare managers' experiences of ambidexterity in such a way as to capture the complexity of their work in context. The data which emerges is thematically analysed to derive findings which advance our understanding of the contemporary managerial practice on both an individual and business-unit level.

Key findings and recommendations: The findings from this study offer a novel exploration of the construct of ambidexterity in the higher education arena and advance our understanding of the way in which managers of healthcare education interpret and respond to the complexity of ambidexterity in contemporary practice. Exploratory endeavours, aimed at developing new areas of engagement, are perceived to have an enduring deleterious impact on the managerial team's ability to maintain and enhance the quality of existing provision. Managers' attempts to balance dual strategic aims are hindered by organisational structure, bureaucratic systems and processes and several ambidextrous tensions emerge. Whilst many of these parallel those found in the organisational theory literature some are context specific, most notably the dichotomous perception of other educational providers as both competitors and collaborators. Ambidextrous tactics and facilitative factors are also in evidence with the imperative to develop social capital with external stakeholders, who are espoused with consumer sovereignty, taking precedence in this complex educational marketplace. Together the findings afford a unique insight into the way that managers of professional healthcare education perceive and manage the complexity and dynamism of ambidexterity in their everyday practice.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

1. Ambidexterity is identified as a vital managerial capability for those engaged in the complex and dynamic arena of healthcare education.
2. The contemporary healthcare educational marketplace is perceived to be multifaceted which necessitates a complex relationship between provider organisations as they strive to balance both a collaborative and competitive stance.
3. The development of social capital, with healthcare providers, is identified as an increasingly important means of gaining a competitive advantage in the healthcare educational landscape.

References:

- Beattie, L. (2017) 'Educational leadership: a nirvana or a battlefield? A glance into the UK Higher Education through the lens of Bourdieu.' *International Journal of Leadership Education* 21(5), 608-620. <http://dx.doi.org/10.1080/13603124.2017.1330490>.
- Hughes, M. (2018) 'Organisational ambidexterity and firm performance: burning research questions for marketing scholars.' *Journal of Marketing Management*, 34(1-2), 178-229.
- Stokes, P., Moore, N., Smith, S.M., Larson, M.J. & Brindley, C. (2017) 'Organizational ambidexterity and the emerging-to-advanced economy nexus: Cases from private Higher

Education operators in the United Kingdom.' *Thunderbird International Business Review*, 59(3), 333-348.

Taberner, A.M. (2018) 'The marketisation of the English Higher Education sector and its impact on academic staff and the nature of their work.' *International Journal of Organizational Analysis*, 26(1), 129-152.

Keywords: Academic Management, Marketisation, Ambidexterity, Case Study.

5Diii, 10:30 - 12:20, 2 September 2021

Research paper

The challenging and enabling factors of nursing workforce development in primary care

Karen Evans, University of Sunderland in London

Promotional abstract: Primary care is greatly affected by the shortage of nurses in the UK and the cuts in funding across the healthcare sector. Work-based learning courses are available for nursing roles, including apprenticeships which provide alternative funding routes. This research focuses on the complex issues which impact nursing workforce development in primary care and how these have been overcome in some areas. The objectives of this research project will be to create a model of system-level workforce development and contribute to the published research on primary care settings as a learning environment.

Background, including underpinning literature and, wherever possible, the international relevance of the research: In the UK as with other parts of the world such as Australia, historically nurse training has centred around hospitals (Aggar *et al.*, 2018; Bloomfield *et al.*, 2018). This bias in Pre-Registration nurse training decreases the chance of nurses applying for jobs in primary healthcare settings when they qualify. New education standards and expectations of the future nurses (NMC, 2018a) and the new Nursing Associate role (NMC, 2018b) and the introduction of apprenticeship routes are all hoped to have a positive impact on education of nursing staff working in primary care but there remain challenges which require further exploration.

Aim(s) and/or research question(s)/research hypothesis(es): The purpose of this research is to investigate the challenges and enabling factors of nursing workforce development in primary care to facilitate the creation of sustainable paradigms. There will be a focus on how this contribution can be made sustainable, as an embedded function of these workplaces.

The research questions were:

1. What are the barriers supporting training and development in primary care settings and how can they be overcome?
2. What are the enablers to supporting training and development in primary care and how can they be used to increase participation?
3. How can any successful changes be sustained?

Research methodology/research design, any ethical issues, and methods of data collection and analysis: The research takes a social constructivist approach, acknowledging that members of a professional group, such as those employed in primary care, can construct a shared institutional reality (Searle, 1995). This project used a

multiphase mixed-methods approach, with three core elements: a systematic review of the existing research projects, a quantitative online questionnaire and in-depth semi-structured video call interviews. A combination of pragmatic thematic analysis and inferential statistics was used to identify the challenges and enablers from the viewpoints of all those who have been involved in a workforce development either as learners, supporters, teachers, managers or funders and organisers.

Key findings and recommendations: The analysis of the findings has identified three major themes for the factors that challenge, enable and sustain nursing workforce development programmes in primary care.

- Funding Models: current funding is unpredictable and can be hard to optimise as it is often linked to specific projects which may not fit the local needs.
- Training and Career Pathways: to support the recruitment and retention of nursing staff within primary care there is a need for consistency in the core capabilities expected in each role and clearer routes for staff to progress their nursing careers.
- Learning environment: in order to support those on specific programmes, there is the need to support the development the whole nursing team. Adopting an approach which balances learning with work activity increases sustainability in programmes and reduces reliance on external funding.

The overarching recommendation from this research is for greater collaboration, such as working with other practices in primary care networks and with local NHS Trusts. From these findings good practice guidance will be created. As the shortages of nursing staff and increased demand are widespread issues, these recommendations may also be of interest in smaller more specialist sectors in the UK and abroad.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

- The contribution this work makes is recommendation for collaboration to support sustainable workforce development and good practice guidelines that practices can use to contribute to supporting healthcare assistants and nurses to progress their career in general practice and ensure consistency in the learning opportunities.
- This work will increase the body of knowledge across the full range of development opportunities within general practice as well as how they can establish themselves as learning environments.
- Although this research focused on general practice settings, the findings and recommendations may also be useful to other small settings who employ nursing staff.

References:

Aggar, C., Gordon, C.J., Thomas, T.H.T., Wadsworth, L. & Bloomfield, J. (2018) 'Evaluation of a community transition to professional practice program for graduate registered nurses in Australia.' *Nurse Education in Practice*, 32, 101–107. doi: 10.1016/j.nepr.2018.03.005.

Bloomfield, J.G., Aggar, C., Thomas, T.H.T. & Gordon, C.J. (2018) 'Factors associated with final year nursing students' desire to work in the primary health care setting: Findings from a national cross-sectional survey.' *Nurse Education Today*, 61, 9–14. doi: 10.1016/j.nedt.2017.10.001.

Keywords: Primary Care Nursing; Workforce Development; Nursing Education.

5Div, 2 September 2021, 10:30 - 12:20

Poster+

Senior Staff Nurse Programme: Recognising potential, rewarding achievement and being the best you can be

Dr Rosemary Webster and Claire Agnew van Asch, University Hospitals of Leicester

Promotional abstract: Our Senior Staff Nurse Programme has been attended by more than 140 staff nurses. It involves a programme of study days, experiential learning, career coaching and self-reflection. It is built on an appreciation that some experienced Band 5s feel undervalued and others are uncertain how to progress their careers. The programme acknowledges individual circumstances and provides tools and opportunities for development within the current band 5 role as well as supporting those considering a move into other roles. Attendees on the programme are nominated by their ward sister with written support from the Senior Nurse. Programme completion is recognised through a change in job title to Senior Staff Nurse.

Main focus/theme of, or issues addressed by, the poster: Like other areas Nationally our Trust has recruitment and retention challenges within its band 5 Registered Nurse (RN) workforce. Almost 20% of our band 5 RNs are over 50 years of age. A Trust-wide survey of all band 5s at midpoint on the pay scale or above followed by a focused Listening Into Action (LiA) event (www.listeniningintoaction.co.uk) highlighted areas of frustration and uncertainty. A need to be valued for their contribution and to be offered equitable development opportunities was seen as important. The Senior Staff Nurse programme aims to address some of these issues, offering a structured opportunity for developing personally and professionally whilst being monitored and supported by the Education and Senior Nursing teams.

Research approaches and underlying evaluation: The Senior Staff Nurse programme acknowledges evidence from healthcare workforce documents which point to a national shortfall in registered nursing numbers and a demographic shift towards a higher percentage of RNs being eligible for retirement (NHS Employers, 2017). It is important that we retain our existing RN workforce (the majority of whom are at band 5) by creating a culture of recognition, development opportunity and support. Our own LiA events support this and provided the evidence for the programme development. We are tracking all attendees on the programme to see where they are working and how they retrospectively evaluate the programme.

Implications for healthcare education: Our programme is the result of a collaboration between the education team and senior clinical nurses in the Trust. The programme moves away from traditional in-house study days towards a suite of learning opportunities, central to which is the role of the attendees on the programme to engage in reflection and self-awareness activities and to negotiate some of their own learning experiences. Attendees write a 'letter to self' at the start of the programme which is sent to them a year later. Early feedback from this, and other evidence from tracking attendees, highlights the programme's potential to empower, engage and energise members of our valuable band 5 workforce. The links between this outcome and staff retention need to be explored further (Hayes *et al.*, 2012).

References:

Hayes, I.J., O'Brien-Pallas, L., Duffield, C., Shamian, J., Buchan, J. & Hughes, F. (2012) 'Nurse turnover: a literature review- an update.' *International Journal of Nursing Studies*, 49(7), 887-905.

NHS Employers (2017) *Improving staff retention a guide for employers*. London, NHS Employers.

www.listeniningintoaction.co.uk/

Keywords: Senior Staff Nurse, Listening into Action, Development Programme, Staff Retention.

5Dv, 2 September 2021, 10:30 - 12:20

Poster+

The Midwifery Expansion Project: Capacity mapping

Clare Boag, Northumbria University

Promotional abstract: This poster+ presentation will summarise a workstream output from The Midwifery Expansion project, funded to support regional development of Midwifery Education via increased practice learning opportunities. The project responds to the United Kingdom Government objective to increase the number of midwives by 3,650 between 2019-2023 in order to support the system-wide implementation of continuity of carer (Department of Health and Social Care, 2018). The project workstream presented is a capacity-mapping tool developed in direct response to regional stakeholder engagement. Mapping explored unused practice learning capacity supporting a sustainable increase in practice learning opportunities within contemporary maternity services.

Main focus/theme of, or issues addressed by, the poster: The focus of this poster+ is the development of a resource to map practice learning opportunities, in maternity areas with the intention of identifying and releasing additional practice learning capacity. The capacity mapping tool is an example of educational enhancement made possible by collaborative regional partnership working. The poster highlights the benefit of establishing a multidisciplinary working group (during a global pandemic) facilitated by online meeting technology. The group effectively developed a resource to map practice learning opportunities in maternity care with the intention of increasing the range of practice learning opportunities available for student midwives within maternity placement providers.

Research approaches and underlying evaluation: Success of the mapping exercise depended on establishing a working group which spanned regional higher education institutions and placement providers, to develop a tool acceptable to professionals in practice, which gathered meaningful quantitative data. Within practice learning environments Practice Placement facilitators and Practice Education Facilitators are fundamental to operationalising practice learning opportunities for students, their specialist professional knowledge and experience were essential in supporting this project workstream. The resulting tool was sufficiently flexible to reflect the dynamic delivery of services in a variety of individual maternity units and is transferable to other services and disciplines.

Implications for healthcare education: Scoping of practice learning opportunities across regional higher education institutions, practice partners, Local Maternity Systems and engaging maternity service users and students informed project direction. Remote networking provided clarity of existing partnerships and highlighted areas for new collaborative practice learning developments, required to support midwifery expansion. Capacity mapping successfully identified additional practice learning opportunities, within maternity services. Development of a multidisciplinary working party promoted partnership working and enhanced existing practice learning capacity in maternity areas, vital to support an increase in midwifery workforce. The mapping tool has been shared with and adopted by other Midwifery Expansion Projects nationally.

References:

Department of Health and Social Care (2018) Improving Maternity Safety - Continuity of Carer and the Midwifery Workforce (UIN HCWS588). Available at: <https://questions-statements.parliament.uk/written-statements/detail/2018-03-27/hcws588> [Accessed 10.3.21].

Keywords: Midwifery, Practice Learning, Capacity, Expansion.