

# Student Midwives' Experiences of Pre-entry Care Environments: Contributing to a compassionate workforce?

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## Introduction

Following the release of the Francis report in early 2013, the Government introduced a strategic focus towards the six C's within the NHS: care, compassion, competence, communication, courage and commitment (DH, 2012). This report suggested a more values-based approach to recruitment and selection strategies and also to learning on professional healthcare programmes. One recommendation focused on the need for nursing students to undertake a minimum period of work as a healthcare assistant in the NHS prior to application.

Against this background and increasing demands on pre-registration places and commissioning numbers remaining static; the emphasis on student attrition and issues of compassion within care, have all become key areas of discussion within midwifery education in the UK. As a result institutions of higher education have attempted to develop recruitment and selection strategies to enhance the preparation of candidates for the demands of midwifery practice (Barker, 2013; Fry et.al 2013), and address the wider concerns about care within the health service.



## Aim

The aim of this study was to evaluate a strategy introduced by the Midwifery team at the University of Northampton in which applicants applying for the midwifery programme were requested to gain a period of pre-entry work experience of health or social care. This was considered to be a desirable entry requirement as a means to prepare candidates for the reality of working within a caring setting prior to commencing the midwifery programme.

## Methods

### Participants:

Participants were recruited from a cohort of 31 first year students on the three year pre-registration BSc (Hons) Midwifery programme. Of the eleven participants (n=11) who completed the on-line survey, four (n=4) agreed to be interviewed. Ethics approval for the study was granted by the School of Health Ethics Committee.

### Data Collection:

A mixed method approach was adopted including;

- An online survey with a mixture of open and closed questions;
- Individual interviews (face-to-face) with participants who self selected following completion of the survey.

### Analysis:

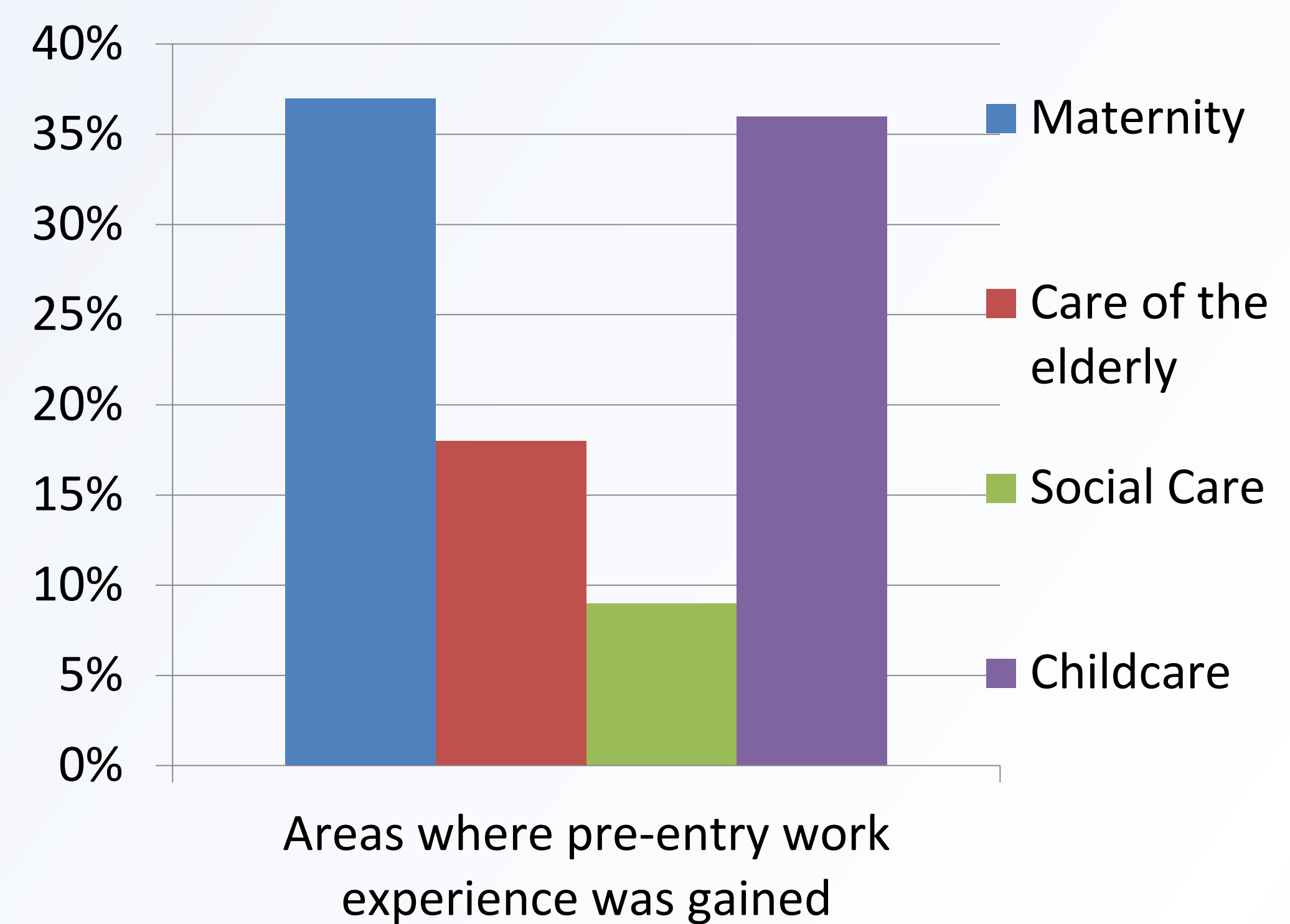
On-line survey data were analysed using descriptive statistics and illustrated using bar charts, pie charts and histograms (figure 1). All interviews were digitally recorded and transcribed verbatim. Data were analysed using a process of qualitative thematic analysis adopted from the work of Braun and Clark, (2006). All three researchers met and discussed the development of themes a process which Holloway and Todres (2003:347) describe as "thematizing meanings."

## Findings

### ON-LINE SURVEY

Key findings from the on-line survey focused on the range of pre-entry experience obtained (Fig 1). It was not surprising that 37% (n=4) of participants had gained experience within a maternity setting as a healthcare assistant, volunteer or breastfeeding support. Within the Childcare category, four participants had gained experiences within nursing related settings including child health and home start.

Figure 1: Areas where pre-entry work experience was gained.



The value of the experience was assessed in terms of the perceived learning which took place (Table 1).

Table 1: Question: What did you learn about healthcare through your pre-entry work experience?

▪ Breast Feeding support
▪ Communication and clinical skills
▪ Good communication is essential and keeping accurate records.
▪ Just how to communicate effectively and appropriately. Being able to do the basic care for people, such as changing beds, bed washes and moving and handling.
▪ Safety, terminology and communicating with patients.
▪ That it is fast paced, not always easy and requires dedication.
▪ The importance of working well within a busy team and realizing every team member should be appreciated and respected

### IN-DEPTH INTERVIEWS

Four in-depth interviews generated three broad themes. These were;

#### • Type of experience

*It should be compulsory that everyone spends time in a hospital environment...I don't think a doctor's surgery is adequate or a nursing home is adequate as it's not the same as a busy ward at a hospital...[Erin]*

*I kind of knew what midwives did and I could see they were busy but until I actually did that, I didn't quite understand how busy they are so it was a positive experience for me in the unit...[Lexi]*

#### • The meaning of care

*I think care is an innate thing, you are born with it...you need to be dedicated. If it's just a 'calling' you can't think 'I am meant to do it so it will happen'. You still have to work hard for it. But I think you are a carer or you're not. [Ruby]*

*Caring is who you are; it's part of your personality. I don't think it is a skill you can learn...[Brooke]*

#### • The value of pre-entry experience

*My work experience helped me adapt to the care environment as I previously worked in an office and it was a good idea for me. [Brooke]*

## Recommendations

Recommendations include:

- A period of healthcare pre-entry experience should be considered as a pre-requisite for all applicants to midwifery programmes.
- Further research is required into which pre-entry placement areas provide applicants with the maximum opportunity to develop skills
- A longitudinal study over the 3 years of a BSc (Hons) Midwifery programme is required to evaluate whether service user feedback regarding care and compassion is enhanced for those student midwives who gained pre-entry healthcare experience.

## References