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## **Alison Luckett Attrition project report for publication**

**SuTuRe study. Supporting Students to Return to study following course interruption.**

### **ABSTRACT**

#### **Background**

Pre-registration BSc Nursing education in the United Kingdom (UK) is renowned for being a challenging course due to its requirement for 2300 hours each for theoretical and practice-based learning. It is therefore inevitable that some students may need to interrupt their study at some point during the course. In many cases, these students do not return and leave the course which has an impact on the future nursing workforce.

#### **Aims**

To examine the reasons why pre-registration student nurses, interrupt their studies and consider ways to enable them to return successfully and complete the course.

#### **Methods**

The research project was based in one Higher Education Institution (HEI) in the Northwest region of the UK. Interrupted students due to return to study in semester 1 of the 22/23 academic year (n=95) were invited to participate in semi structured interviews.

#### **Findings**

The results of this study found that health, including mental health was the most dominant factor leading to the interruption of study for the students.

#### **Conclusion**

This research has led to the HEI to introduce an improved support package for students. Alongside other recommendations it is hoped the changes will reduce attrition and lead to an improved interruption/return to study experience.

## **KEYWORDS**

Student Nurse, Education, Interruption, Attrition, Support. Return to study

## **INTRODUCTION**

Attrition in student nursing refers to the number of students who do not complete their nurse training (Hamshire, Jack, Forsyth, et al (2019). Attrition from pre-registration nursing programmes is a concern for HEI's, negatively affecting income and student experience (HEE 2018). The Health Foundation (2019) states that the average attrition rate for UK pre-registration nursing students is 24% with the Northwest region at 21%. Health Education England [HEE] (2018) published the Reducing Pre-registration Attrition and Improving Retention [ RePAIR} study which identifies the 10 main reasons why student nurses interrupt or discontinue their studies with financial reasons being the most prevalent from their research.

At the HEI there are currently 157 pre-registration nursing students on interrupted studies. Approximately 75% of these interrupted students could return in time to join the Nursing and Midwifery Council (NMC) register by March 2024, supporting the 50k nursing expansion manifesto (Department of Health and Social Care, 2022). A challenge to HEI's and the future of the NHS workforce is not all students return from interruption. When interrupted students do return, they may struggle to pick up the pace of academic work and integrate into a new cohort of students (Handwerker, 2018). This research will examine the reasons why students have suspended their training and what measures they feel will aid them to successfully complete the course.

## **STUDY AIMS**

The aims of this study are:

1. to examine the reasons why pre-registration student nurses, interrupt their studies and consider ways to enable them to return successfully and complete the course.

## **STUDY DESIGN**

This is a qualitative research project consisting of a pre interview scoping questionnaire and 1 to 1 semi structured interview

### **Participants**

- Interrupted BSc pre-registration Adult, Mental Health, or Child field nursing students due to return to study in Semester 1 of the 22/23 academic year.

## **LITERATURE REVIEW**

Prior to commencing this study, a literature review was undertaken to understand what was known about the issue, see appendix 1.

Wray, Barrett et al (2012) undertook a retrospective cohort study to identify the factors affecting progression from year 1 to year 2. This study was based in the North of England so its findings may arguably be similar to the student population in this HEI. Study findings suggest that younger, traditional entry students were more likely to withdraw than non-traditional older students. Wright & Wray (2012) support this finding that in their research, younger nurses left mostly within their first year of study often citing that the role of the nurse in clinical placements was not what they expected.

DeWitty and Byrd (2021) explored the recruitment and retention of under-represented, first generation and ethnically diverse students within their student nurse population. Noting that these students often had additional academic and social challenges, that if left unaddressed would negatively affect retention. Jean-Baptiste (2019) and Ooms, Fergy Marks-Maran et al (2013) also highlighted the specific needs of non-traditional students. Identifying these students need for additional numeracy and literacy support alongside pastoral support. Tranter, Gaul, et al (2018) undertook an Integrative review of initiatives aimed at retaining minority students; they found that the provision of both academic and pastoral support demonstrated better student outcomes.

Eick, Williamson et al (2012) undertook a systematic review into placement related attrition. In their summary perceptions of the profession, workplace acceptance and placement support were seen to have a direct effect on student decisions to leave the course. Stress was identified as another factor from this review. Mills, Ryden et al (2020) examined 100 first year student nurse narratives for themes, noting that stress was mentioned by almost all participants. For these students trying to juggle academic, social, and financial pressures added to their poor mental health. Galvin et al (2015) looked specifically at Mental Health student nurses' experiences of stress during their training. They found that younger students were more likely to report feelings of stress, along with academic demands and placement culture.

Hamshire, Jack et. al (2019) identify 3 key themes affecting attrition as personal circumstances, workload pressure and clinical placement culture suggesting that attrition is a systems problem requiring a multi-faceted approach. Gaining a better understanding of these factors and tailoring support to interrupted/returning students may enable successful course completion for returning students and reduce attrition.

## **METHODOLOGY & METHODS**

Qualitative research methods have their philosophical roots within a constructivist medium favouring a collaborative approach with participants (Safdar, Abbo, et al 2016). When conducting qualitative research, it is important to consider the methodology of best fit for the project. Semi structured interviews present as a natural conversation with the potential to gain more genuine response (Maltby, Williams, et al, 2010). This methodology was chosen as it held the potential to provide the richest data.

An anonymous questionnaire (MS Forms) was sent out to all eligible students to better understand their reasons for suspending their course and to invite them to be interviewed. Individual semi structured interviews were conducted with consenting students. Interviews were conducted via MS Teams using the recording and transcription option. These were then checked by the researcher for accuracy and kept in a secure password protected file.

Inductive thematic analysis was undertaken using Braun and Clarke (2006) 6 step inductive thematic analysis process by the lead researcher with input from the project lead and quality lead for this study. Transcripts were read several times and open coding identifying meaningful quotes took place. These codes were then merged into categories to identify key themes within the evidence

### **Recruitment**

Students identified as being on interruption and due to return within 4 months of the study to semester 1 of the 22/23 academic year (n=95) were identified for inclusion. They were contacted via individual email with an invitation to participate in the research study.

Response to the invitations sent to students was low which could be attributed to them not accessing university emails while interrupted. The invitation was also sent to personal email accounts where provided. The questionnaire was completed by (n=14) students from which (n=9) agreed to be identified and undertake individual interview. The remaining 5 participants declined the invite for an interview but agreed to their comments being used for this study. Email reminders were sent weekly to eligible students until at the point where the researcher needed to move on.

## Ethics

Ethical approval for the study was obtained from the HEI Ethics committee. Unique reference number HEALTH 0332

## THEMES

Fig 1- Themes identified from (n14) questionnaires



## Findings (Anonymous MS Forms)

Qualitative comments from the questionnaire can be seen below. The most cited reason for interruption in the questionnaire group was stated as Mental Health, followed by time management and family issues (Fig 1)

*"My mental health was getting worse, and I just felt incredibly burnt out" (anonymous 1)*

*"I was diagnosed with acute anxiety disorder which at the time had a major impact on the most basic of my activities of daily living, and my ability to function." (anonymous, 2)*

When asked what the students felt would help them return successfully, support was identified from both academic and pastoral sources

*“Some support on academic writing and how to set out assignments etc. would be helpful as I haven’t done it for a year” (anonymous 4)*

*“Support relating to health - time for appointments, help to avoid illness, understanding when off due to health” (anonymous 3)*

### **Qualitative semi- structured interview themes**

Following completion of the questionnaire, nine students agreed to be interviewed for this study. To ensure anonymity student participants were given letter and number identifiers. Relevant data can be seen in Fig 2 below.

Fig 2- Participant data

Student participant	Field of Study	Length of interruption	Reason for interruption
S1	Adult	2 years	Covid + Mental health
S2	Adult	1 year	Physical health + Covid
S3	Adult	1 year	Mental Health
S4	Mental health	1 year	Family illness/caring responsibility
S5	Mental health	2 years 8 months	Physical Health
S6	Adult	1 year	Academic failure + stress
S7	Adult	1 year	Mental health
S8	Child	1 year	Mental health
S9	Adult	1 year	Mental health



Comments from student participants can be seen below as S1-9

### **Perceptions, belonging and uncertainty**

When discussing interruption, the students had differing experiences with the process. Those interrupting for health reasons seemed at ease with the decision

*“We did discuss the like different routes and stuff. I think, this was generally the best thing for me” (S7)*

*“My mental health was getting really bad at that point, and I just felt really burnt out and I just needed some time.” (S6)*

Validity of the decision to interrupt was also questioned by some students.

*“At times I felt like I was just being a bit, you know, dramatic. I should not have, like, wasted the year.” S6*

Uncertainty about the length of interruption needed caused some concern from students with an unsure diagnosis. Two of the student participants had interruptions for longer than the usual 12 months. This led to them voicing concern about returning after such a long break.

*“Nervous, I am, yes. I have had like 2 years off, so it is a. big step coming back”. (S1)*

*“I have been off for two years, eight months. It has been a long time and all that apprehension just because it had-been that long” (S5)*

Despite this there were several students feeling positive about their return to study.

*“I am excited. There are so many things I want to do.” (S2)*

*“Yeah, I think I am looking forward to it (S4)*

*“I feel refreshed, and I am going in with this new mindset that like I can do it. Or as before I was like, I do not think I can do it. I cannot get through this year, things like that” (S6)*

The theme of support academically and with integration into a new peer group featured in both the questionnaire responses and interviews.

*“I think I'd benefit from some help with the academic side, going over like how to format assignments and things like that”. (S6)*

*“The only thing I suppose that I would be that the I haven't got now that I had before was the peer group” (S4)*

*“I'm not going to know anyone.” (S1)*

*“I'm a bit anxious about people already having their little groups feeling a bit like an outsider, I suppose.” (S7)*

Some students had stayed connected with members of their previous peer group, but this evoked some strong feelings.

*“It just upsets me that I could not be part of it, you say, and they will all be graduating without me. But that is as it, isn't it? (S2)*

### **Visualisation and experience for future practice**

Students were asked how they felt about returning to clinical placements. Two students had been able to maintain clinical contact by working as healthcare assistants while interrupted. This led them to not feel disconnected from practice.

*"I have done more. Uh, you know, feel more attached to practice because I have done more hours work because I was able to." (S4)*

Others for health reasons were unable to maintain clinical links while interrupted.

*"I've not done any work since COVID." (S1)*

The effect covid had on the participants was evident for those with long term health issues or living with vulnerable people as they could not go onto practice placements or work in healthcare while on interruption to study.

Students were asked how they visualised themselves as nurses and aspirations for their future. Some were undecided and just trying to get to the end of the course.

*"Not really, I'm hoping I can finish the year at the moment and fingers crossed the course." (S7)*

*"I can visualise myself during the job. Uh but what in what area? I am keeping an open mind." (S4)*

Some students had formed firm ideas of where they felt they wanted to be as a nurse.

*"I just want to qualify and be a good nurse" (S5)*

*"I think I want to be someone who's there for their patients and taking good care of them and doing the best they can to get vulnerable people well again." (S6)*

*"A health visitor, since I've had my little boy sort of changed my outlook a little bit" (S1)*

### **Student ideas for improving the interruption/return to study experience**

Students were asked to reflect on their experience of interruption and give ideas of how they felt the process could be improved for future students. Many had a positive experience of the process. Some students felt overwhelmed with the return process currently followed at the HEI. Specifically, there were issues identified with enrollment.

*“I found the return and enrollment process quite stressful” (S6)*

*“Enrollment issues/information needs clarity “(S3)*

Other ideas included refresher session for clinical skills (S3). Having a “buddy” system for returners (S6). Holding a workshop for returners where all the different processes involved in returning are dealt with together (S8)

## **DISCUSSION**

From the interviews and existing literature, the reasons for a student needing interruption to study are multifactorial (Hamshire, Jack et al, 2019). Mental and/or physical health are the most common reasons stated for the need to interrupt from this study, often exacerbated by the pressures of the course. This warrants exploration of how students can be best supported to manage their health while on the programme. Mills, Ryden et al (2020) examined the specific needs of first year students as they learn to juggle the demands of the course alongside personal circumstances. They recommend that providers review their support systems alongside student engagement to maximise their effectiveness and potentially reduce year 1 attrition.

The continued impact of COVID19 on some students was identified from this research. Students stated fears regarding their own health and health risks for vulnerable loved ones.

Student nurses' disclosure of feeling stressed and overwhelmed due to COVID were among the highest concerns relating to attrition (HEE 2020). Griffin and Riley (2022) found that all participants stated stress due to COVID19 causing increased workloads and emotional distress. COVID is and will remain a challenge within all areas of healthcare provision. Griffin and Riley (2022) recommend that HEI's include the recognition of psychological distress within pre- registration programmes and encourage students to seek support.

Bal, Hoyle, et al (2020) argue that the current content laden nursing curriculum leaves no space to address student nurse mental and physical health. Recent changes to the NMC (2023) pre-registration nurse education standards recommend students take responsibility for their own health, through being empowered and supported across all course provision. As HEI's look to update their curricula, the importance of supporting students physical and mental wellbeing is vital.

Peer support and anxieties with losing peers and having to find new ones on return to study was identified by students. Recommendations from Wray, Aspland et al (2014) suggest the use of social networks to address student isolation. The introduction of a returning students peer social group may help these students integrate. The sense of "belonging" to a peer group and feeling comfortable in that group was reported by student participants. This can be hampered further for students who are returning directly to clinical placement as they will not meet their new peers in person prior to return. Pearson and WONKE (2022) published several recommendations from their study "Building belonging in HE" aimed at improving the student sense of belonging and inclusion.

Wray, Aspland et al (2012) identified factors influencing attrition, stating that HEI's need to improve the quality of their personal and academic support. HEE (2020) also report that a high percentage of students cite a lack of HEI support as a factor when considering leaving the course

Since starting this research project, HEE (2022) have published a good practice guide for HEI's which will be used alongside this research to make improvements to the support system for interrupted/returning students.

## **Key points**

This study has highlighted the difficulties faced by interrupted and returning BSc pre-registration nursing students. In response, the HEI intend to introduce an improved student support package as below

- Regular “keep in touch” points of contact during the period of interruption to improve sense of “belonging” to the HEI
- Course Leader meeting 6 weeks prior to return date to explain the process and assist the students return.
- Identification/introduction of a Personal Tutor (PT) prior to return, PT then to identify a “group buddy” for peer support and inclusion. PT to become primary student contact for further information/support.
- Referral to the Achievement Coach on return for academic skills refresher and rebuild confidence with academic study
- Referral to Health and Wellbeing team on return (if applicable)

## **Strengths and limitations**

Strengths of this study include it being primary research. It has identified some issues faced by students at this HEI based in the Northwest of the UK.

Limitations of this study include the small response rate to the scoping questionnaire (n=14) as this could mean the findings are not representative of the whole group. Some of the (n=9) student interviews unearthed significant issues and it could be argued that these students agreed to be interviewed as they had their own agenda. This in turn may affect the generalisability of the findings.

## **CONCLUSION**

The reasons why pre-registration nursing students decide to interrupt their studies are multifactorial. Ensuring that HEI's have tailored support for the return to study for these

students is vital to improve attrition and student experience. Findings from this research project and recent HEE (2022) good practice guidelines hold the potential to reduce student nurse interruption and attrition by implementing support prior to interruption, during interruption and on return to study. This HEI will use the findings from the research study and HEE good practice guidelines to introduce a comprehensive support package for their students.

### **Reflective questions**

Consider times when you have been supporting an interrupted/returning student nurse. Can you identify specific issues that they faced during their time with you?
How does your area of practice help to support student nurses' health and wellbeing?
If you have supported a student returning following interruption, how has their return and placement experience differed from their peers?
What support mechanisms could your institution put in place to help interrupted/returning students to successful course completion?



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## **Appendix 1**

Literature review summary.

A literature review was undertaken on the CINAHL ultimate database using the search terms *Student Nurs\** and *attrition or interruption to course*. This search identified 653 papers. Limiters of full text, English language, publication year 2012-2022 were applied. This narrowed results with 116 articles identified. From this, further limiters of academic journals and UK (United Kingdom) was applied to identify papers relevant to UK education. Once applied this identified 22 papers. After reading the titles and abstracts 6 papers were chosen as having some relevance to the research study.

In view of the small number identified the UK limiter was removed to explore the relevance of overseas literature to the research study, identifying 86 articles. Titles and abstracts were read and a further 6 articles were identified for further scrutiny with regards to the research study. Due to the limited amount of literature extracted for the initial search a further literature search using the terms *Student nurs\** and “attrition or retention or dropout “with the same limiters produced 315 results. This was narrowed using an additional subject heading of “student retention” producing 34 results of which 5 were removed as duplicates. After reading of abstracts 16 papers were excluded as they were not relevant to the study. Three further papers were rejected as they were duplicates from the first search.

In total 22 papers were read in full of these 12 were rejected as their content was not relevant to this research study. The remaining 10 research papers have some relevance to this research study and form the basis of this literature review.

Author and Title	Study Methodology	Methods	Findings/res ults	Strengths/Limitati ons
DeWitty, V. P., & Byrd, D. A. (2021). Recruiting Underrepresented Students for Nursing Schools. <i>Creative Nursing</i> , 27(1), 40-45. 10.1891/CRNR-D-20-00069	Narrative review  Qualitative	Discussion paper	HEI's need to attract and retain a diverse cohort of nursing students by introducing targeted support mechanisms	US based  Not primary research
Eick, S. A., Williamson, G. R., & Heath, V. (2012). A systematic review of placement-related attrition in nurse education. <i>International Journal of Nursing Studies</i> , 49(10), 1299-1309. 10.1016/j.ijnurstu.2011.12.004	Qualitative	Systematic literature review	Poor support on placement and age of the students were a factor for placement	UK based  Limited to English language papers

			related attrition	
Galvin, J., Suominen, E., Morgan, C., Connell, E., & Smith, A. P. (2015). Mental health nursing students' experiences of stress during training: a thematic analysis of qualitative interviews. <i>Journal of Psychiatric and Mental Health Nursing</i> , 22(10), 773- 783. 10.1111/jpm.12273	Qualitative	Semi structured Interviews	Key themes; Demands, control & support. Attitude of placement staff to students and Stress/copin g.	UK based single site study may affect generalisability.
Hamshire, C., Jack, K., Forsyth, R., Langan, A. M., & Harris, W. E. (2019). The wicked problem of healthcare student attrition. <i>Nursing Inquiry</i> , 26(3), e12294- n/a. 10.1111/nin.12294	Qualitative	Narrative review. Application of framework	Personal circumstance s, workload pressure and clinical placement culture main reasons for student attrition	UK based
Jean-Baptiste, Anne Marie, PhD, RN, MSN, MS, CCRN, CEN. (2019). Recruiting and	Qualitative, constructivist	Semi structured interviews.	BAME students additional	Study set in US. May not be

Retaining African Americans in BSN Programs. <i>ABNF Journal</i> , 30(2), 44-49.	grounded theory		help with technology, academic and financial needs	transferable to the UK HE sectors
Mills, A., Ryden, J., & Knight, A. (2020). Juggling to find balance: hearing the voices of undergraduate student nurses. <i>British Journal of Nursing (Mark Allen Publishing); Br J Nurs</i> , 29(15), 897-903. 10.12968/bjon.2020.29.15.897	Qualitative	Narrative analysis of 100 written student reflections	Stress felt by students "juggling" multiple demands, time, physical, mental, financial	UK based. Focus on management of stress. Single site study.
Ooms, A., Fergy, S., Marks-Maran, D., Burke, L., & Sheehy, K. (2013). Providing learning support to nursing students: A study of two universities. <i>Nurse Education in Practice; Nurse Educ Pract</i> , 13(2), 89-95. 10.1016/j.nepr.2012.07.011	Mixed methods	Evaluation study, questionnaire using closed and open free text	Academic support, peer groups and library services most important.	UK based, dual centre study. Non-traditional student focus
Tranter, S., Gaul, C., McKenzie, S., & Graham, K. (2018). Initiatives aimed at retaining	Qualitative	Integrated literature review	Focus on ethnic minority	New Zealand based study.



ethnically diverse student nurses in undergraduate programmes: An integrative review. <i>Journal of Clinical Nursing</i> , 27(21-22), 3846-3857. 10.1111/jocn.14609			students.  Issues affecting retention multifactorial.	
Wray, J., Barrett, D., Aspland, J., & Gardiner, E. (2012). Staying the course: Factors influencing pre-registration nursing student progression into Year 2—A retrospective cohort study. <i>International Journal of Nursing Studies</i> , 49(11), 1432-1442.  10.1016/j.ijnurstu.2012.06.006	Quantitative	Retrospective cohort study	Younger students less likely to progress	UK based, focus on progression rather than attrition
Wright, J., & Wray, J. (2012). Exploring the experiences and expectations of year 1 children's nursing students. <i>Nursing Children and Young People</i> , 24(4), 24-28.	Qualitative Phenomenology	Focus groups	Practice placement issues, clinical skill acquisition and placement	UK based, children's nursing students only

10.7748/ncyp2012.05.24.4.24. c9091			support cited as key issues affecting experience	
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