Gillespie, Mark and Rivers, Ian (2017) Assistant grade nurses and nursing students : a diary study. Mental Health Practice, 21 (3). pp. 21-25. ISSN 1465-8720 , http://dx.doi.org/10.7748/mhp.2017.e1227

This version is available at https://strathprints.strath.ac.uk/62692/

Assistant Grade Nurses and Nursing Students: A Diary Study

Abstract

Little is known about the role of the assistant grade nurse in the clinical development of pre-registration student nurses during their practice placement experiences, and even less focus has been given to this relationship for those in training for the mental health field. Recent policy changes in parts of the UK have markedly enhanced the career opportunities for assistant grade staff, who are now able to work towards registration and to undertake increasingly complex tasks, many of which require competencies student nurses are expected to master. This paper reports on the descriptive statistics that emerged within a wider phenomenological study of this subject, with the qualitative components considered in a separate article. Results from diaries kept by nine participants suggest a larger and more complex relationship than has been previously understood.

Introduction

The ratio of assistant grade staff within clinical nursing teams in the UK has grown considerably since the training of pre-registration student nurses moved into the domain of higher education (Hancock and Campbell, 2006). Prior to this the bulk of hands-on care was delivered by the students and their removal created a gap that was filled through the recruitment of assistant grade nurses (AGN's) (McGowan, 2006). More recently government responses to the care delivery concerns raised by investigations such as the Francis Report (2013) have included a focus on the relationship between student nurses and

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the assistant grade workforce, including combining the two in an effort to increase occupational opportunity and a more caring workforce (Department of Health, 2014). This focus emerged without strong evidence for its effectiveness and one recent study even identified a negative correlation between the two roles (Snowden et al, 2015). The role of AGN's in the supervision of student nurses during practice placements is poorly understood and markedly under-researched, especially in fields such as mental health (Hasson, McKenna and Keeney, 2012). This study therefore sought to examine the relationship between AGN's and mental health nursing students, commencing this exploration with a literature review, the findings of which are summarised below. The review findings were used to shape a phenomenological research study that utilised an Interpretative Phenomenological Analysis Methodology comprising individual interviews with nine subject (3x mentors, 3x AGN's and 3x student mental health nurses (SMHN's)), and a diary of the participants work patterns. This paper will focus on the diary findings.

Literature

Three research groups have been active in investigating the role of AGN's in the clinical development of student nurses. Each of the groups have incorporated a multiple method approach to data collection, and as their main studies were carried out almost a decade apart and emerged from two countries with markedly different formats for nurse training, so they allow comparison over time and across culturally diverse health systems. The studies by the University of Tasmania (Robinson et al, 2005) and the University of Canberra (Grealish, Bail and Ranse, 2010) meeting Australian government intentions to identify how best to support student nurses within older adult residential care settings, and the study by Hasson, McKenna and Keeney (2012) reporting the AGN perspective on the topic within a Northern Irish, adult care setting.

The work of Grealish and associates in Canberra reflects a number of studies spanning a term of over a decade, building a picture of student nurse development within Australian aged care settings. More recent papers from this group recognising that student awareness of the value of learning from AGN contact needs aligned to a more positive and realistic perspective in order to maximise the effectiveness of the relationship (Grealish and Henderson, 2016).

A group of Tasmanian researchers published a paper in 2005 detailing what they identified as the final report in a series of documents emerging from the one research project. Subsequent publications from this group have explored the efficacy of interventions they implemented to overcome deficiencies in student support within such environments, including one specifically relating to the role of AGN's as student mentors (Annear, Lea and Robinson, 2014).

Their 2005 study identified that AGN's were influential in determining the satisfaction levels students reported with the placement, providing up to 60% of the students' supervision (Annear, Lea and Robinson, 2014). Time spent with AGN's strongly shaped the tasks students were involved in, with higher levels of time supervised by AGN's correlated with engagement in what the study termed "basic care". This involved carrying out personal hygiene and attending to dietary needs of patients. More time with registered nurse mentors equated to more involvement with clinical tasks such as medication administration.

The only UK focused paper on this subject reported on a large scale qualitative component of a larger mixed methods study, completed as part of a doctoral qualification programme (Hasson, McKenna and Keeney, 2012). This study canvassed almost sixty AGN's on their involvement within student nurse training. Findings were similar to the Australian study in that AGN's were identified as providing significant input to student nurses on placement within their clinical areas. AGN's saw themselves as teaching student nurses an extensive number of skilled clinical tasks including venepuncture, the delivery of patient education and the use of a variety of clinical assessment formats. This role however seemed to be completed on an ad- hoc basis, with students generally allocated to work with AGN's either because mentor support was unavailable, or because the assistant was seen as having a particular skill, useful to the students' development.

These studies identify reliance upon AGN's to contribute towards the development of a wide range of clinical skills in student nurses placed within their clinical teams. These skills range from those labelled as basic, though essential may be a more accurate description, through to highly complex therapeutic interventions. This role is informal and therefore AGN's are not involved in the coordination or documentation related to the student's programme and learning needs. Each of the studies identified that further research was

required, and as the studies took place within several clinical teams in different continents a decade apart, it is obvious that the phenomenon is not isolated to one care environment and that surprisingly little research focus has been directed to investigate what seems to be a major influence within student nurse education. As no prior research has been done within the mental health setting there is obviously a need to explore this issue.

Ethics

The requirement for consideration of, and adherence to ethical principles, is strongly linked to the process of social research (King and Horrocks, 2010), and the moral parameters for such a study are generally defined by the application of common ethical principles (Edwards and Talbot, 1994), and via the requirement to meet professional standards (Hek and Moule, 2006). This study was considered and approved by the ethics committees of three organisations; two academic institutions and the host Health Board. Ethical considerations included a focus on fully informed participation, participant awareness of their right to withdraw from the study and a focus on retaining the confidentiality of those involved.

Methodology and methods

Weaver and Olson (2006) recommend a pragmatic process in selecting research methods in nursing on the basis that they should ultimately result in improvements for those studied and for society in general. Recognising the paucity of formal recognition of a role for AGN's in the clinical development of SMHN's, and the contrasting widespread acceptance of it in discussions with practitioners, led to the selection of a research methodology considered to aid investigation of previously unexplored subjects. Interpretative Phenomenological Analysis (IPA) facilitates exploration of such subjects through engagement with the lived experience of participants close to the area of investigation (Smith, 2004).

IPA enables such deep exploration through focusing on a small number of key participants, using descriptive and interpretative phenomenology to analyse information generated mainly via individual interviews, the themes emerging then available to compare across individuals and groups (Smith, 2004). Diaries are also commonly employed within IPA studies, one advantage being that they encourage participants to focus on the topic in

question, moving their appraisal of it from a superficial pre-conscious awareness to a more considered understanding (Smith, Flowers and Larkin, 2009). This paper will focus on the findings of the completed diaries, the results of which were used to frame the semi structured interviews used in the subsequent interviews. The diaries asked mentors, SMHN's and AGN's to review their activity over a consecutive working week and as the timeframes were broken into half hour slots so the results allow a snapshot of work practices within mental health services in one Board of the Scottish NHS in 2016.

Results

Who the student was supervised by	Student sessions/ (%) S1- total= 80	S2- total= 73 sessions	S3- total= 100 sessions
None identified	9 (11%)	5 (7%)	4 (4%)
Nurse direct	20 (25%)	32 (44%)	22 (22%)
Nurse indirect	20 (25%)	12 (16%)	3 (3%)
No one	5 (6%)	5 (7%)	0 (0%)
AGN	20 (25%)	18 (25%)	66 (66%)
Other professionals	3 (4%)	2 (3%)	6 (6%)
Activities when AGN was main supervisor (in descending order); **S1**= Diet and fluids, Patient escort, Patient activity (Quiz/ dominos), Personal Hygiene. **S2**= Patient activity (talking to and calming patients), Diet and fluids, Personal hygiene. **S3**=Diet and fluids, personal hygiene, Patient activities (Quiz, painting, relaxing with patients, General tidying			

Table 1 Students perceptions of who was supervising them.

Table 1 above confirms a substantial percentage of time recognised by students wherein their practice is supervised by AGN's. In the case of S (student)3 this covered two thirds of the timeframe investigated and for the other students a quarter of their placement time. For one of these students (S3) the duration over which they believe they are supervised by AGN's exceeds the maximum determined by the NMC during which non-mentors are able to

take responsibility for guiding student learning (NMC, 2010). These students therefore consider AGN's as significant contributors towards their clinical learning.

There was also a clear connection between AGN supervision and the delivery of direct care, including the application of essential care tasks, especially the meeting of nutrition, hydration and hygiene needs. Several other authors (for example Gillespie, 2013: Grealish and Henderson, 2016) have commented on the connection between the AGN role and the completion of these skills, and the lack of relevance in learning these skills seen by some student nurses. As seen in table 2 these diaries have additionally shown that AGN's are the main guides for student mental health nurses during the application of a wider range of tasks requiring skills in group-work, de-escalation, communication and socialisation. This would suggest that SMHN's recognise AGN involvement in guiding student nurse learning in a far more significant scope of competencies than previously identified.

Time AGN spent as the students main guide	AGN sessions/ (%) N1- total= 73	AGN2- total= 8 sessions	AGN3- total= 17 sessions
Direct guide	25 (34%)	6 (75%)	13 (76%)
Not direct guide	30 (41%)	2 (25%)	2 (12%)
No answer	18 (25%)	0 (0%)	2 (12%)
Activities when AGN was main supervisor (in descending order); AGN1- Patient activities (Crossword/ quiz/ talking to patients), Diet and fluids, Personal Hygiene. AGN2- Communication (writing case files/ reporting back to team), Education (teaching staff, teaching relatives). AGN3- Patient activities (assessment/ carer contact/ teaching student communication interventions), Student induction, Communication (feedback to own team, feedback in wider review).			

Table 2 AGN perceptions of their role in supervising students

Table 2 suggests that AGN's saw themselves as being the main student guide over a period ranging from 34 to 76% of the time recorded. The main activities they engaged in at the time included recreational pursuits with patients, clinical skills including patient assessment, family educational programmes and support, as well as the delivery of essential care skills within in-patient settings. In addition then to identification of involvement in, and responsibility for, a wide range of skilled tasks, the AGN's here recognise that during the times where they have a student allocated to work with them, they are carrying out a broad range of therapeutic tasks; tasks which require a significant level of competency and which are highly relevant to the students' development. The lack of recognition of this in the current NMC (2010) guidance around student nurse education, is therefore concerning.

Time spent providing direct support to the student	Mentor sessions/ (%) M2- total= 80	M3- total= 76 sessions	M4- total= 78 sessions
Providing direct support	23 (29%)	41 (54%)	51 (65%)
Not providing direct support	39 (49%)	19 (25%)	16 (21%)
No Answer	18 (23%)	16 (21%)	11 (14%)

Table 3 Mentor perceptions of their supervision involvement

Mentors see mentors as spending large volumes of time directly supporting students, between a third and two thirds of that available according to M (mentor)2 and M4. The high figures given however identifying the volume of time within which students are not supervised by mentors are notable as the influence of role models in the development of student nurse practice is well recognised (Felstead and Springett, 2015). For students to be guided through their development by non- mentors over large swathes of their programme would support the notion that other groups, including AGN's, are contributing significantly to student mental health nurse education.

Mentors recognise that between 10 and 20% of the student's direct supervision is allocated to AGN's, and that within that the AGN's are showing students how to complete tasks as diverse as security checks, personal hygiene and graded exposure.

The importance of placement location

The location within which the students' placement occurs is strongly influential on the relationship between the AGN and the student, as is the stage of their training and their own personal preferences. With all of the students working with the same client group S1 and S3 spent the same percentage of their time working with registered nurses, however the time spent with AGN's was markedly different, with S3 (a stage 2 student) working alongside this group for over two thirds of the time covered, while this occurred for only a quarter of the time the more senior S1 recorded. S2 (a stage 1 student) showed a more even spread in working with people from a variety of backgrounds despite working in the same clinical specialism as S3. As this was in a different hospital and ward from S3 it appears that factors other than specialism shape this phenomenon. A study by Gillespie (2013) found that while a group of student nurses in Scotland identified undertaking tasks they saw as AGN related, as the most concerning issue for them during the first week of their programme, such concern was not unanimously held. That individuals vary between acceptance and avoidance of association with the AGN role, from the very commencement of their programme, suggests variance in student engagement with AGNs is likely, and at least partially shaped by individual student preference.

Conclusions

AGN's contribute significantly to the clinical development of student mental health nurses during the practice placement components of the students' programmes and it is likely that this contribution has existed since the inception of formalised nurse training. At present it incorporates AGN's leading students in the development of many of the essential care skills required in modern healthcare, as well as in the application of increasingly complex technical and interpersonal competencies. This contribution from AGN's is expected across all of the groups involved in student nurse education, although largely devoid of any formal recognition. The goodwill shown by AGN's in providing support for student nurses is

compromised by this lack of recognition and the ongoing expansion of the AGN role is further complicating this.

The social scientist Norbert Elias postulated that societal development is a continuous process (van Krieken, 1998) and as a consequence change is something we should expect and prepare for. Modern nursing has evolved considerably since a move to professionalism was triggered by pioneers such as Florence Nightingale, and visionaries such as Annie Altschul and Jack Lyttle have helped drive mental health nursing forward as a specialism. Authors including Harmer (2010) have however expressed caution around the unfolding role that nursing seems to be moving towards, with especial concern focused on the influence of AGN's on the clinical preparation of student nurses (Kendall-Raynor and Duffin, 2008).

The success of the socialisation of student nurses into the occupational role expected of them is reliant upon cohesion between the groups that constitute the clinical nursing team and that relationship is currently in a state of flux. This leaves students uncertain of what they are required to achieve in terms of a professional identity. Madsen, McAllister, Godden, Greenhill and Reed (2009) identify such a group as nursing's orphans, describing their lack of professional attachment as resulting in insecure and isolated workers without understanding of the history of their role. Successful clinical development for students then needs to be closely matched to a considered acceptance of the skills, experience and knowledge available to them from their AGN colleagues and a clearly defined pathway to a professional nursing role.

It is apparent that such development of health delivery structures and processes is ongoing, and far from stopping, seems to be accelerating in pace since the publication of the Francis Report (2013). To date, recognition of the contribution of AGN's towards student nurse development has yet to be formalised, and as such ignores obvious opportunity to embrace and enhance that relationship. It is only within isolated pockets, like older adult care in Australia (Grealish and Henderson, 2016), where practical need has driven acceptance that this should be seen as something to engage with. Nurse education seems blinded to incorporation of structures that fall out-with what fits within the sense of professionalism that nursing strives for, and as a consequence actively fights against accommodation of that phenomenon. This reluctance is complicating student nurse education as it hinders the

creation of a route to development of a professional identity for student nurses. Nurse education must therefore work to predict and lead change, as opposed to waiting until it is forced upon them, or even worse trying to ignore it is happening.

Strengths and limitations of the study

The identification of the strengths and limitations of a health related research study are crucial in allowing identification of the usefulness and applicability of that study towards practice development (Rebar and Gersch, 2015). It is important therefore to identify the worth and limitations of this study.

Exploration of the available literature identified that while there has been limited research around the influence of the AGN on the clinical development of student nurses working within physical and older adult care settings, there has been none investigating this phenomenon within the mental health setting. This study is therefore ground breaking in fore fronting this issue and in determining how it currently presents.

That only nine individuals took part in the study, all working within one Health Board area in Scotland, exposes the project to criticism around the wider relevance of the findings and their applicability across wider healthcare settings. Smith, Flowers and Larkin (2009) counter that the small sample sizes associated with IPA research leads to the uncovering of deeper understandings in as yet un-researched groups. They suggest that while this cannot claim to be representative of all such similar cultures it is likely to uncover meanings recognisable and useful to practitioners within comparable settings. They describe this as Theoretical Transferability.

This study has confirmed the existence of a more extensive educational relationship between AGN's and SMHN's than had previously been recognised. The small number of study participants and limited geographical spread of their clinical environments necessitates further exploration of this topic within a wider spread of locations, the involvement of larger participant cohorts and the use of other research methodologies in order to strengthen what is known about this subject.

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