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PERCEPTIONS OF NURSING IN THE NHS

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PERCEPTIONS OF NURSING IN THE NHS

ABSTRACT

AIM: To investigate the attractiveness of the NHS as an employer to potential nursing staff.

METHOD: Individual and group interviews were conducted with school pupils, mature students on Access courses, nursing students, healthcare assistants, agency nurses and independent sector nurses.

RESULTS: Eighty-one individuals participated in the qualitative stage of the study. Analysis of the interview transcripts indicated that nursing as a career choice is perceived as hard work, involving high pressure and stress. Working with patients is the source of considerable job satisfaction but is offset by staff shortages and lack of flexibility over working hours. Increases in pay and staffing levels, coupled with improved retention strategies are suggested as tactics to improve recruitment.

CONCLUSIONS: Nursing in the NHS is moderately attractive to potential recruits and this attraction is predominately based on the interaction with patients. Improved satisfaction of current NHS staff would help to positively advertise the NHS as an employer. Improvements in pay, recognition and more flexible working hours would help encourage staff working outside the NHS to return.

PERCEPTIONS OF NURSING IN THE NHS

INTRODUCTION

Over the last two decades there has been an increasing level of concern about the recruitment and retention of nursing professionals to the NHS (Seccombe and Smith, 1996; Buchan, 1999). Firby (1990) stated that the number of girls entering nursing at the start of the nineties would need to increase by 50% by 1995 to offset the reduction in intake and maintain staffing levels. However, the number of training places for student nurses fell by 28 percent between 1992 and 1994 (Department of Health, 1999) and it is only relatively recently that this trend has been reversed. Nurse training places increased from 12,000 in 1995 to around 20,000 in 2001, the number of applications for nursing courses has increased, greater numbers of nurses are returning to work for the NHS and the vacancy levels for nursing are starting to fall (UCAS 1994-2000; Department of Health, 2001a). These improvements have been helped by a number of factors including increasing the number of places available to students, national media campaigns, the establishment of NHS Careers, the provision of bursaries for Diploma Nursing Students, more flexible pathways to entering nursing and the provision of financial incentives to support the process of retraining. However, despite these improvements, the NHS is still struggling to recruit and retain sufficient numbers of nurses particularly with the aging nurse workforce and general population (Gulland, 2001; Department of Health 2001b). Consequently, there is a continuing need for well focused research to identify the key factors that encourage or dissuade potential recruits to enter a nursing career and whether to pursue that career with the NHS.

To address these issues a team from the Business School at Loughborough University has been commissioned by the Department of Health to carry out research into the ways in which the NHS is perceived as an employer by potential staff. The project focused specifically on the nursing, physiotherapy and radiography professions. Here we focus solely on nursing. This paper is based on 81 people who took part in group or individual interviews as part of this project. Six groups of potential recruits and returners were investigated including school pupils, mature students on Access courses, students in professional training, healthcare assistants (HCAs), agency nurses and independent sector nurses.

LITERATURE REVIEW

Much of the existing research concerned with nursing has been conducted on specific sample groups such as students in professional training, or young people still at school (Fagerberg et al., 1997; Foskett and Hemsley-Brown, 1998). This research is useful in terms of understanding particular sample groups, but because these studies have been conducted in isolation, comparison across different groups of potential staff is problematic. It is therefore difficult to gauge the extent to which perceptions, and factors that influence those perceptions, are common across different groups of potential staff. This study specifically addresses this weakness in the existing research by targeting six different sample groups of potential recruits and returners to nursing and the AHPs using a standardised research instrument. The following

subsections briefly review the literature concerning the six sample groups of interest for this study.

School Age Young People

Few studies have specifically addressed the perceptions of nursing held by young people and how these perceptions may influence their intention to join the nursing profession. A study by Southampton University found that young people associated nursing with the concepts of *'helping people'*, *'job satisfaction'*, *'responsibility'* and *'saving lives'* all of which were considered to be reasons for pursuing nursing as a career (Foskett and Hemsley-Brown, 1998). Other researchers have found that nursing was viewed as a good career that is interesting and useful to society (Firby, 1990; Moore, 2001). However, numerous reasons were also found for not entering a nursing career. These reasons included, *'squeamish'*, *'not able to work with ill people'*, *'dealing with death'*, *'no appreciation for the hard work'*, *'dirty job'* and *'no respect'* (Foskett and Hemsley-Brown, 1998). Pay issues and a lack of support for family commitments have also been identified as dissuading young people from a nursing career (Moore, 2001).

Mature Students

The value of recruiting mature students is shown in their performance on Access and nursing programmes (Whitmarsh 1993; Houltram, 1996). However, several studies have highlighted the difficulties that mature students face when undertaking either Access courses or specific nursing programmes (Whyte, 1988; Whitmarsh 1993). In studying mature students undertaking the Diploma in Higher Education with first level registration, Lauder and Cuthbertson (1998: p.423) reported that *'the majority of mature students who participated in the study experienced financial, domestic and family problems as a direct result of their participation in a course of basic nurse education'*.

Students Undertaking Professional Training

One of the more frequently researched areas has been nursing students' views of nursing as a career choice. Although students often cite a number of different reasons for entering nurse training, some core themes have emerged from the studies. The majority of nursing students perceive nursing as a career which offers opportunities for caring for people (Fagerberg et al., 1997) and in helping them lead healthy lives (Vanhanen et al., 1998). Students of nursing also tend to emphasise the job security, recruitment opportunities and the opportunities to promote their own personal development (Fagerberg et al., 1997).

NHS Staff Not Qualified as Nurses

Staff who are working in the NHS and who may have an interest in nursing are one of the more difficult sample groups to study. One occupational group that may have staff with aspirations to become qualified nurses are Health Care Assistants (formerly nursing auxiliaries). The increasing significance of HCAs has been reflected in the recent decision to allow those who have qualified to NVQ Level 3 to join the Royal College of Nursing as associate members. It is also worth noting that by achieving NVQ Level 3 these staff are qualified to enter Nursing Diploma programmes should they choose to.

Ramprogus and O'Brien (2002) argue that universities, trusts and workforce development confederations need to work together to develop courses that will allow HCAs to move on to pre-registration nursing programmes. However, the cost of training and loss of regular income seem to be significant barriers to this progression.

Qualified Nurses Working for Agencies

Department of Health figures indicate that the cost of agency staff is becoming a significant drain on NHS resources. The Audit Commission has reported that for the period 1998-1999, £273m was spent on agency nurses in England (Audit Commission, 2000). There are also practical problems associated with employing agency staff. For example, many Trusts provide agency staff with a brief induction process introducing them to the hospital site, the Trust procedures, who to contact and provide them with IDs and bleeps. The staff concerned may also have to travel several miles to the client site and be contacted at very short notice. However, there are also clear benefits for the agency staff. These include family friendly policies and increased flexibility allowing those staff who cannot commit to full time shift work with a Trust still to work in the NHS. The rates of pay are also usually higher for agency staff those that offered by NHS Trusts. This deficiency has led some NHS staff to use their annual leave and spare time to supplement their income through working additional hours through an agency (Ward, 2000a).

Qualified Nurses Working for Independent Sector Organisations

Very little research has investigated the views of nursing staff working outside the NHS (McGee, 1998). Work undertaken by the UKCC in 2002 found that the main reasons for choosing to work outside the NHS were that nurses felt more able to use the full range of their practice skills. In addition, the study also highlighted the attraction of flexible working and the view that practitioners were able to provide higher quality care. Similarly, Alderman (2001) reports that flexible working hours and good working conditions are helping retain nursing staff working in the independent sector. These factors were thought to be contributing to higher levels of job satisfaction particularly for those staff working in private hospitals.

This study provides an in-depth analysis of the perceptions and influencing factors for potential staff and allows direct comparison on specific issues such as, images of the profession and how the NHS could be made more attractive. It has four main aims outlined in the following section.

AIMS

The study investigated four fundamental questions:

1. What images do potential nursing recruits and returners associate with the nursing profession?
2. What are the key factors that discourage potential nursing recruits and returners from working for the NHS?
3. What are the key factors that encourage potential recruits and returners to enter or return to the nursing profession?
4. How could the NHS be made more attractive as an employer to potential recruits and returners to nursing?

METHOD

The first stage of the study was intended to explore and understand different people's perceptions relating to the central theme of the research i.e. the attractiveness of the NHS as an employer to potential nursing staff. A qualitative approach was adopted for this stage of the study so as to allow a clear focus, but also to provide the opportunity for the capture of wider issues that may help the research team form a fuller understanding of the phenomena under investigation.

The most appropriate method for the exploratory research was individual and group interviews. Group interviews comprising approximately eight interviewees were adopted whenever practical for sample groups 1 to 4 (see Table 1) although some individual and small group sessions were required for practical reasons. Group interviews were chosen as the primary method for these groups because they were quicker and cheaper to conduct than individual interviews with the same number of respondents. By contrast, individual or small group interviews were the main approach for sample groups 5 and 6 as it was considered impractical to attempt to arrange larger group sessions for these individuals. For each of the groups, organisations based in the East Midlands were targeted. The interviews were conducted in 2001 between February and August. Participants were drawn from two participating organisations. In total 81 participants were interviewed across the six different sample groups as shown in Table 1.

<<<<< INSERT TABLE 1 ABOUT HERE >>>>>

All the interviews followed a common semi-structured topic guide. Adopting a semi-structured approach allows the interviewer to ask certain major questions the same way each time, but remain free to alter their sequence and probe for more information. The interviewer is therefore able to exert some flexibility over the interview style, tailoring it to the level of comprehension and the ability of the respondents to articulate. It also facilitates flexibility for the interviewer to respond to the issues raised by participants.

The analysis of the transcripts involved the three concurrent activities of data reduction, data display and conclusion drawing/verification (Miles and Huberman, 1994). Data reduction was utilised to analyse each interview transcript using a structured coding framework. Data display was facilitated through the use of the qualitative software package QSR N'Vivo.

RESULTS

The results are divided into three main sub-sections. The first sub-section is concerned with the perceptions of the different sample groups toward nursing as a profession. The second sub-section considers the best and worst aspects of working as a nurse for the NHS and finally the third sub-section reviews how participants thought the NHS could be made more attractive as an employer. A summary of the key findings are provided in Table 2.

<<<<< INSERT TABLE 2 ABOUT HERE >>>>>

Images of Nursing

When discussing images of nursing, the pupils responded with characteristics such as helping, *'helping people get better'*, uniforms, *'the blue uniforms'*, and females, *'a lady rather than a man'*. A second set of images, related to the working environment of nurses, were less idyllic with long hours, hard work, and low pay being common themes. These more negative aspects of the role may be having some effect on the attractiveness of the profession as a career choice with one pupil commenting, *'When I was little I always wanted to be a nurse. I think every girl wants to be one and they get a nurses outfit and they dress up when their young and go and bandage up their dolls or their cats or whatever. I don't know it just doesn't appeal to me anymore.'*

The student groups (mature and in professional training) identified similar themes with the caring image of a nurse linked to that of someone who was dedicated, usually female, underpaid and overworked. Healthcare assistants tended to focus on the more negative aspects of nursing in the NHS commenting on the high levels of hard work and being under a great deal of pressure. These participants working in the agency and independent sectors were more concerned about the high level of paperwork and pressure they had encountered when working for the NHS. Participants stated that there were now higher expectations from patients and increasing responsibility in terms of using technology and completing paperwork. This made nursing a more stressful career.

Best and Worst Aspects of working for the NHS as a Nurse

The most prevalent positive theme for those participants who were not qualified concerned working with patients. The interaction with patients was expected to contribute to high levels of job satisfaction and provide a rewarding career. Participants also added that job security and variety in their work were attractive features of choosing to work for the NHS. A good career structure, on-going training opportunities and pension were also cited by all of the non-qualified groups as further positive aspects of working for the NHS. However, agency staff emphasised that by working outside the NHS they had experienced improved flexibility over the hours they chose to work, increased pay levels and reduced pressure and responsibility. Similarly, the independent sector staff identified greater job flexibility, a better working atmosphere and more time to spend with patients as significant factors outweighing the benefits of working for the NHS.

When considering the least attractive aspects of working for the NHS, strong themes that emerged were low pay levels and having to work with abusive patients. Working in an environment that was understaffed was a particular expectation of the student groups and healthcare assistants and was thought to contribute to stressful working conditions. The agency staff supported this view and thought that it had a direct impact on the quality of care they were able to provide to patients, thereby reducing job satisfaction. For example, one agency nurse commented, *'I've always felt very frustrated because I've not had the time to spend with the people and I've always thought that my training has been a waste in that respect because I've got a lot to offer in skills that I think are wasted on a hospital ward because there's just not enough time.'* Other areas of concern identified by the different sample groups included low levels of financial resources (mature students and nursing students), limited

family friendly policies (mature students and nursing students), having to work unsociable hours (mature students and healthcare assistants) and limited promotion opportunities (healthcare assistants). One school pupil summed up their perceptions of the NHS by simply stating, *'Every job has its good points and its bad points, it's just that the NHS has got more bad points than good points.'*

It was acknowledged by the agency and independent sector staff that working outside the NHS also had drawbacks. For example, agency staff commented that they did not have such high levels of job security and were not entitled to a pension, sick pay or annual leave. Independent sector nurses commented that they had to be flexible over their working arrangements to respond to fluctuating demand and that their working environment was very *'consultant led'* which could *'take away your autonomy to a certain degree as a nurse'*.

Making the NHS and Nursing More Attractive

Unsurprisingly, participants in all six sample groups said that increasing pay levels would make the NHS more attractive, as would an increase in staffing levels. It was generally thought that an increase in staff numbers would reduce the stress and pressure on staff, resulting in more time to see patients and higher levels of job satisfaction and morale. Improvements in the flexibility of working hours, promotion opportunities and increased recognition of the role from other healthcare professions and the general public were also considered necessary in order to improve the attractiveness of nursing as a career in the NHS.

It was suggested by the mature and nursing students and healthcare assistants that in order to make the profession more attractive to non-qualified staff improved financial support for the professional training process was necessary, such as increased bursaries and on the job training for healthcare assistants. The school pupils and agency staff also added that the NHS could improve its recruitment strategies with regard to nursing by increasing potential recruits' personal contact with staff already working in the profession. A school pupil commented that, *'If I could talk to someone who was actually doing the job then they could tell you the truth about it'*. An agency worker also saw the attitudes of existing NHS employees as an important influencing factor on the attractiveness of the profession to potential recruits stating, *'If you are thinking about recruitment, younger people are quite influenced by people they know who are in a profession. Father is a doctor or your Aunt is a nurse, and its about how you would view their experiences of the system or the National Health Service, so the better those people are treated, the more able they are to be fulfilled within the profession, that in itself would help recruitment.'*

DISCUSSION

The results suggest that nursing in the NHS as a career choice is only moderately attractive to potential recruits and that this attraction is predominately based on the interaction with patients. The most dominant image of nursing concerned the high workload, which was expressed in themes like hard work, overloaded and long hours and these issues coupled with the perception that nursing was poorly paid would appear to undermine the attractiveness of nursing as a career choice.

Furthermore, understaffing makes it difficult to work as a team, to help patients and in particular to get to know them. Yet it is these features that people considering NHS work expect and want to do. So understaffing may have both direct and indirect impacts, making the NHS working environment unattractive and also eroding positive work features.

It is interesting that pay features even more prominently as a way of making working in the NHS more attractive than it does as a negative feature of the NHS. This finding may suggest that people see the pressure and lack of resources as inevitable when working in the NHS and expect better pay and working conditions as compensation for it. They also expect more encouragement and incentives to qualify if they are to be required to handle the stressful working conditions. Admittedly, these conclusions extrapolate somewhat from the data. If correct, they may indicate that the most desired solutions to problems reflect a pragmatic view of what can realistically be changed.

However, there are several positive themes available for emphasis in recruitment publicity. The secure availability of a job and income throughout the UK to those who prove themselves competent; the chance to gain varied experience and learning; and the chance to be part of a team of professionals are all themes that may help attract more recruits to nursing in the NHS.

The findings also highlight the importance of simultaneous action being taken with regard to improving the retention of NHS staff. If such action is not taken to improve the expectation/reality gap, working experience and retention of qualified staff, in the long-term there is the possibility of erosion of the more positive attitudes and intentions reported by potential staff as these new recruits experience life as qualified staff. Furthermore, improved satisfaction for current staff would maximise the likelihood of them positively 'advertising' the NHS as an employer. Consequently, it is important that efforts are made to improve the working environments of current nursing staff in the NHS as well as emphasising the positive interaction with patients in recruitment publicity.

Also of concern are the views of the agency and independent sector nurses that were interviewed in this study. The comments from participants suggested that returning to work for the NHS is an option they are unlikely to consider. As all the other sample groups interviewed would have to undertake several years of training before they could help address the current shortages, qualified staff working outside the NHS represent one of the fastest possible solutions to understaffing. However, greater levels of recognition, improved pay, less paperwork and more flexible working hours appear necessary before these staff are likely to consider returning to the NHS. The Improving Working Lives toolkit (Department of Health, 2000, p.4) states, '*There are various reasons why people leave and don't come back. But being unable to work because of inflexible hours and lack of practical help with issues such as childcare should never be one of them.*' The findings of this study reinforce the need to address these work/life balance issues in consultation with frontline staff and thereby increase the attractiveness of returning to the NHS for qualified staff.

Research into the recruitment of nurses across six differing sample groups is an ambitious undertaking and therefore contains a number of inherent limitations. In particular, the adoption of a qualitative interview based

approach in this study limited the number of organisations it was possible to target and therefore reduces the generalisability of the results of this study. The selection of a relatively small number of interviewees to participate in the study, especially with regard to the independent and agency sectors, is also the source of potential bias. Consequently, although the study provides many interesting and novel insights, these limitations should be taken into account when interpreting the results.

CONCLUSIONS

It is clear from these results that the solution to the current shortfall of nurses in the NHS is not a simple one. An organised co-ordinated approach is necessary in order to address the variety of concerns held by different potential recruits and returners to the profession and the NHS. This approach will require inputs at both a national and local level that address the recruitment of new staff and retention of existing staff in equal measures of importance. The results presented in this paper suggest that should such measures be introduced, then the chances of the government meeting its recruitment targets are likely to be significantly greater.

<<<<< INSERT TABLE 3 ABOUT HERE >>>>>

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Table 1: Summary of Individual and Group Interviews Conducted for Stage 1

Group	Actual Number of Participants
A) Those neither professionally qualified nor in the NHS	
1. School Children	21
2. Mature Students on Radiography Access Courses	16
B) Those not yet qualified but working in the NHS	
3. Students in Professional Training	17
4. Healthcare Assistants	9
C) Those qualified but not working in the NHS	
5. Agency Staff*	8
6. Staff Working in Independent Acute Hospitals	10
Total:	81

* Four of these participants worked exclusively for an agency. Three worked for an agency and the NHS and one participant worked for an agency and the independent sector.

Table 2: Key Themes Identified from Interviews

Themes	Sample Group					
	School Pupils	Mature Students	Nursing Students	Health care Assistants	Agency Nurses	Indep Sector Nurses
Images of Nursing						
Low pay	✓	✓	✓	✓		✓
Hard work	✓	✓	✓	✓		
Caring	✓	✓	✓	✓		
Long hours	✓		✓		✓	
High pressure				✓	✓	✓
Female	✓	✓				
Paperwork					✓	
Best Aspects of working for the NHS						
Job security	✓	✓	✓	✓		✓
Job variety	✓	✓	✓	✓	✓	
Pension	✓	✓	✓	✓	✓	
Working with patients	✓	✓	✓	✓		
On-going training	✓	✓		✓	✓	
Good career structure	✓	✓			✓	
Worst Aspects of working for the NHS						
Understaffing		✓	✓	✓	✓	✓
Stressful working environment	✓		✓	✓	✓	✓
Low pay	✓	✓	✓	✓		
Unsociable working hours	✓	✓	✓	✓		
Abusive patients	✓	✓	✓			
Low financial resourcing		✓	✓		✓	
Few family friendly policies		✓	✓			✓
Limited promotion opportunities				✓	✓	
Making the NHS more Attractive						
Increased pay	✓	✓	✓	✓	✓	✓
Increased staffing	✓	✓	✓	✓	✓	✓
Increased flexibility of working hours		✓	✓	✓	✓	
More money for training		✓	✓	✓	✓	
Reductions in paperwork/bureaucracy			✓	✓	✓	✓
Improved promotion opportunities/career structure			✓	✓		✓
Increased recognition		✓	✓	✓		
Increased contact with current staff	✓				✓	
Improved attitude from current staff					✓	

Table 3: Specific Policy Related Conclusions

1.	Participants in this study perceived nursing as a career choice as involving hard work, high pressure and stress.
2.	Working with patients made the profession attractive but the image is undermined by perceptions of staff shortages and lack of flexibility over working hours.
3.	Increases in pay, staffing levels and improved working conditions may help to improve the recruitment, retention and return of nursing staff to the NHS.
4.	Improved satisfaction of current NHS nursing staff may help to positively advertise the NHS as an employer to potential recruits.
5.	Greater contact between existing nursing staff and potential recruits such as school pupils may encourage applications.