

## Improving student retention through enhanced academic and pastoral support: A Case Study

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### Abstract

*This case study presents an innovative approach to student retention. The Integrated Learner Support model brings together professional support services and programme-focused academic support to deliver 'the team around the student'. A redesign of the University of Northampton's Personal Tutoring system has sought to foster a sense of care and belonging; embedding this support within curricula with triage to the wider team. These developments have been informed by best practice from the University's Faculty of Health and Society where two senior nursing lecturers have developed an additional level of student support. Initiated originally by the Subject Lead for Nursing, these roles provide emotional and pragmatic interventions to the needs of individual nursing students as they progress through their programme. Informal feedback and retention statistics suggest that in the face of rising mental health issues in the national student population, this kind of face-to-face, caring and timely support is of clear value.*

personal tutoring; student experience; student support

## **Introduction, Context and Rationale**

In 1975, Vincent Tinto stated that universities need to engage in enhanced analysis of student dropout if they are to better support students thinking of giving up their studies. He argued that deeper understanding of 'dropout' and the development of theoretical models that explained the various processes and interactions between the student and the University resulting in dropout were required if universities were to respond appropriately both in policy and practice (Tinto, 1975).

Tinto's recognition of the importance of both normative and structural integration into the University paved the way for many subsequent research projects seeking to better understand the nature of students' interaction with HE institutions, including critiques and alternative theoretical approaches (Yorke and Longden, 2004; Seidman, 2006; Braxton *et al*, 2004; Zepke *et al*, 2006). Most recently in the UK, the Higher Education Academy (now Advance HE) undertook a wide-ranging 2-phase change programme between 2008 and 2015 - 'What Works? Student Retention and Success' (HEA, n.d.). The aim was to develop and implement whole-institution approaches to improve retention and attainment that provide evidence-based solutions supported by senior leadership. The programme concluded that

effective interventions have an academic purpose relevant to all students and are delivered in the mainstream, facilitating collaboration between students and staff. Interventions are most successful when ongoing, and part of a programme of measures featuring the monitoring and follow-up of engagement by individual students (HEA, n.d.)

The focus of this case study is to present a specific student support intervention at the University of Northampton and consider the evidence

generated by this intervention in the light of a wider redesign of the University's approach to pastoral support by academic teams. But first, it is helpful to be aware of the broader context within which this increasingly necessary and valuable resource is expected to function.

In 2017-18, over 49,000 undergraduate students disclosed a mental health condition to their institution from a student population of 2.3 million – up from 8,415 in 2007-08 and an increase of 10,000 on the previous year alone (Universities UK, 2018). At Northampton, the 2017-18 Higher Education Statistics Agency (HESA) return showed 209 (out of 9,656) undergraduate students self-disclosing a mental health condition – up from 40 in 2007-08 (XLEV302=2<sup>i</sup>, Disable=55<sup>ii</sup>). Moreover, the rate of suicide among HE students in England and Wales in the 12-month period ending in July 2017 was 4.7 deaths per 100,000 students, equating to 95 student suicides (Office for National Statistics, 2018).

## **Enhancing Student Success at the University of Northampton**

At the University of Northampton, our Enhancing Student Success (ESS) project adopts a data-informed approach to tackling student retention, continuation and progression, particularly to year 2 of University study. The project aligns with our institutional strategy – *Transforming Lives + Inspiring Change* (University of Northampton, 2015) and the strategic plan refresh of 2018, which explicitly articulated the University's commitment to delivering a 'super supportive' student experience (University of Northampton, 2018a). 'Super supportive' is defined as being 'inclusive, on your side, encouraging and caring, diverse and international' – aspirational statements to be achieved through offering the 'best possible support [to] create an environment where students grow into confident, self-propelled learners' (University of Northampton, 2018a p.10). In meeting this aspiration, the project team has

sought to break down traditional siloed ways of working and ensure meaningful delivery of a concept articulated to students as 'the team around the student'. Intended as more than mere rhetoric, this concept is a direct response to the marketisation of UK HE brought about by the introduction of fees in 1998 (Teaching and Higher Education Act, 1998). Central to this is the provision of personal and pastoral support for students and this is the primary focus of this case study.

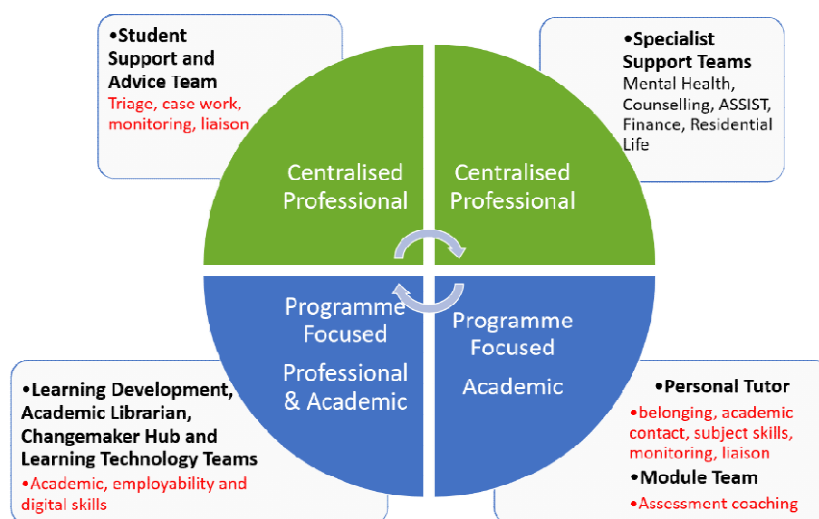
During 2017-18, the University redesigned its Personal Academic Tutor (PAT) scheme. The redesign drew on 4 years' of staff and student PAT survey data, National Student Survey feedback and sector best practice, typified by the conclusions from phase 2 of the *What Works 2?* Programme (Thomas *et al*, 2017). Internal survey data identified that respondents considered PAT provision to be both sporadic and polarised. For example, in the 17-18 academic year:

- Only 68% of respondents met with their PAT at the beginning of the year (up 10% from 16-17, but only a 4% increase over 3 years). However, only 20% of students met with their PATs more than three times across the year, with significant variations across Faculties (53%-82%).
- While 87% of respondents considered it important to have a PAT, only 48% reported that they had received effective personal/pastoral support, and only 54% that they had received effective academic support (a drop from 66% in the previous year).
- The range and level of satisfaction from Joint Honours respondents was also significantly lower (37% - 69% depending on Faculty) (Hinks, 2018).

## The Introduction of Integrated Learner Support

Fundamentally, the new model - Integrated Learner Support (ILS) - consists of 4 integrated elements (figure 1):

- Programme-based Personal Tutor (PT) and module support
- Programme-based academic, digital and employability skills development
- A centralised Student Support and Advice Team
- Centralised specialist Support Teams



**Figure 1: Integrated Learner Support at the University of Northampton**

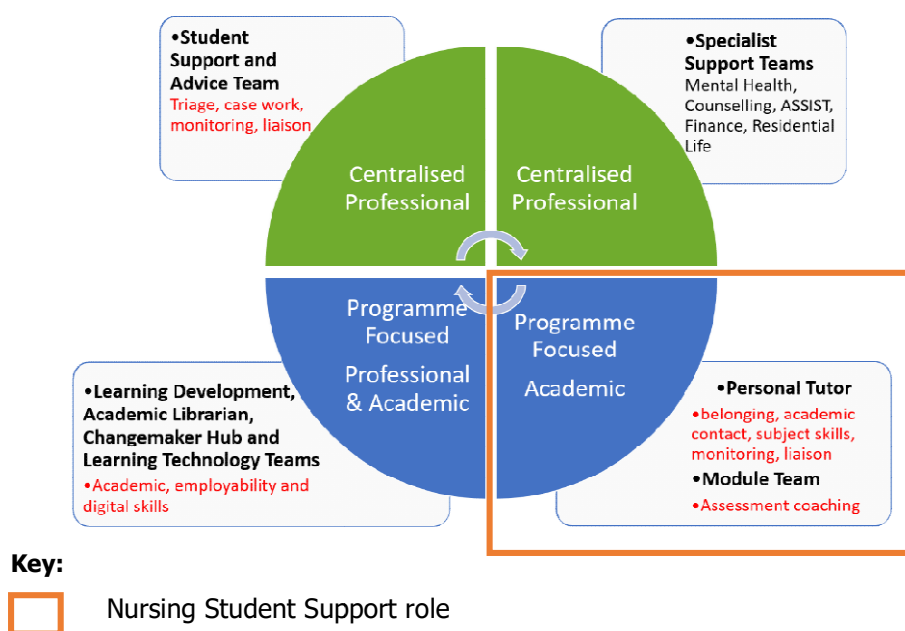
While recognising that students typically seek initial support from those with whom they have a good relationship (crisis situations aside), the model aims to deliver an equitable, embedded and transparent *entitlement* for all, make better use of specialist skills and expertise, triage student needs earlier and effectively direct students to the right source of help and support from the outset (as shown by the different quadrants of the ILS model in figure 1). In these aspects, ILS signifies a departure from the traditional Personal Academic Tutoring model. Moreover, the rationale behind these features

actually reflected in the University's new campus which was intentionally designed and built around learner needs. In the new campus, traditional siloed ways of working were broken down. Academic work space was integrated with physical learning resources, teaching spaces and the full range of student-facing support from our Professional Services teams. The building itself reflected the desire to deliver learning, teaching and student support in a more holistic, integrated way. This ethos carried through to the design of ILS and its subsequent delivery as evidenced by the following key features of Integrated Learner Support:

- A shift from individual, ad hoc meetings to scheduled group tutorials delivered by the PT thus increasing regular, timetabled contact with the PT<sup>iii</sup> for each student, albeit on a group basis;
- Additional, assessment coaching from the academic team for all modules, linked to number of academic credits to support in-year attainment;
- The creation of an embedded, entitlement-driven, programme-specific skills curriculum led by professional teams with programme-team input into design and co-delivery across all programmes rather than on an ad hoc basis; and
- Regular opportunities for PTs to co-work alongside their students in social learning spaces, providing informal time to 'check-in' alongside time for 1:1 appointments.

The new model has seen a fundamental shift in resourcing and workload allocation for academic staff, primarily to support the creation of a new central Student Support and Advice Team and reflect delivery of the different elements by colleagues other than PTs.

Finally, this case study explores how existing best practice within Nursing continues to inform and influence development of ILS. While ILS offers a redefined sense of entitlement to Personal Tutoring, the Nursing Student Support team offer 'entitlement plus' - an extra layer of specialised support to that provided by the bottom right quadrant of the ILS model. This approach was designed to address the particular complexities faced by Nursing students (figure 2).



**Figure 2: Identification of the Nursing Student Support Role in relation to the ILS Model**

## Student Support in Nursing

Attrition in nurse education is a well-recognised and longstanding area of concern (Willis Commission, 2012), with Buchan et al (2019) reporting an average student nurse attrition rate in England of 24%. In 2019, Jones-Berry reported that the University of Northampton saw a 14% improvement in Nursing retention between 2013-17, down to 10%. This case study unpicks one key initiative that has contributed to this improvement. In 2011-12, the

Nursing team secured funds from Health Education England to create two new enhanced student support roles over and above the standard academic and pastoral support role with the specific aim of directly boosting student retention. Initially established for an 18-month period, an improvement of 3.5% in the retention rate by 2014 resulted in the roles becoming a permanent enhancement to the Nursing curriculum<sup>iv</sup>.

The Nursing Student Support role is unique at Northampton because it translates and integrates “super supportive” directly into the nursing curriculum. The team consists of two senior nursing lecturers whose working week embraces the dual role of student support and senior lecturer. In this way, they establish academic and practice-based credibility with the students they both teach and support. Access can be direct or by referral from Personal Tutors or other colleagues – including those in practice. This accessibility is enhanced through the team’s teaching role such that today, they are a consistent and seamless presence in the lives of the students – in the classroom and beyond. Adoption of a proactive approach to supporting students’ individual needs is furthered by their practical working knowledge of the curriculum. Their holistic stance aims to uncover and distil presenting issues so that crucial problems are addressed, often through liaison with other colleagues working within the ILS model.

Students seek help with a range of issues including physical and mental ill health, financial burden, relationship or personal problems, academic difficulties, homesickness and bereavement (Willis, 2018). In addition, the team reach out to students who are unable to recognise situations which are impacting on their ability to succeed, drawing on triggers such as non-submission of an academic assignment, or non-attendance in practice.



A caring and listening response that inspires trust is coupled with practical solutions so that situations are normalised, and immediate pressures relieved. Time is given to unravel complex issues which students may not yet have recognised. From the team's experience, acknowledging the impact of layered stressors is pivotal in enabling the student to feel safe enough to pause, reflect and leave with a more manageable perspective and nurturing a sense of agency, creating order from apparent chaos, crisis and stress. Ultimately, the student can deal with the immediate situation and develop some future resilience. Adherence to professional boundaries with regards to confidentiality and safeguarding is modelled from the outset [Nursing and Midwifery Council, 2015].

Sharing the role between two academics in Nursing who are naturally suited to this role has proven vital in terms of pastoral effectiveness, resource efficiency and sustaining the resilience of the team. Crucially, after meetings, there is opportunity for debrief to safeguard the mental health and well-being of the team and cushion the risk of compassion fatigue (Coetzee and Klopper, 2010). Mental Health First Aid training provided the team with affirmation and invaluable insight into their own coping strategies.

This 'Super Supportive' approach in Nursing works with the new PT role and is transferable across the University. Retention strategies have been embedded in the curriculum, explicitly through resilience workshops, and implicitly through consistent and timely reminders of the wider 'team around the student'. Emphasis is placed on demystifying policies and regulations so that with appropriate support, potential pinch points can be managed by students.

Informal feedback values this individualised response. The following examples demonstrate some of the positive outcomes achieved<sup>v</sup>, reflect the range of presenting issues and how these were addressed.

The team supported a third-year student with severe anxiety, struggling to complete her dissertation. Through emotional support from both Nursing Student Support and a trained counsellor, the team appropriately individualised academic policies to support her (Universities UK, 2017). She emailed:

This morning I received my dissertation results. I cannot believe it but I got an A. I wanted to thank you all for the support and help you have given me these last few months to help me get through my mental health issues and to keep me focused on my work. I am so grateful for your input as I truly would not have been able to finish my dissertation without you. Words can't describe what graduating with a first-class nursing degree means to me. I am completely overjoyed.

An EU student was supported through a difficult transition into higher education in a new country. The approach taken included acknowledging her sense of isolation. She was permitted to take time out to meet UK-based family members. As a student with limited funds, reasonable adjustments via a student support plan ensured that her practice learning opportunities were located near her accommodation. She said:

Your support throughout this journey means a lot to me. From being homesick and scared if I would be able to cope, I've grown to be confident and believe in myself as you did 3 years ago. I never thought that I would actually finish this course, but yet here I am! You both helped me without anything in return to survive my 3 years of nursing (mentally,

emotionally and academically), whilst empowering and inspiring me to be as you would say, brilliant :)

She received a first-class degree!

A young male, first-generation University student was struggling with the financial burden of fees and living costs, alongside managing anxiety and depression. Male students have a higher rate of attrition than women and tend to have difficulty engaging with pastoral services (Fotheringham and Bevan, 2012). Arguably, with his mix of issues, no family role model to help shape self-expectations and no understanding of what the University could offer, this student was already disadvantaged. The challenge for the team was in maintaining contact. He has now almost completed his studies and is thriving personally and professionally. His counsellor commented on the effectiveness of this collaborative approach:

The support that you both have given him has been fantastic and to see him back and on track to complete his degree is great, I really don't know if this would have been possible without your input.

## **Evaluation**

As stated previously, Jones-Berry (2018) reported a drop in the attrition rate of Nursing students at Northampton of 14%, between 2013-17. Although difficult to prove a direct correlation, the 'super supportive', personalised approach outlined in this case study has undoubtedly impacted favourably. Qualitative data from students continually informs and directs the work of the Student Support team; future co-working and collaborating with the wider 'team around the student' will unite and broaden understandings of the student life cycle (Morgan, 2012). More strategically, the enhancement of the

PT role more generally, aligned to individual skill sets, reflects the University's commitment to improving the student experience and enhancing job satisfaction (University of Northampton, 2018b).

A year after it was first introduced, the University evaluated the introduction of ILS through a revised version of the annual staff and student PT survey and some focus groups. While a full data analysis is outwith the scope of a case study like this, recommendations in respect of ILS focus on practical implementation at Programme Level of the core features of ILS to ensure a consistent student experience and address issues arising at the local level. While allocation of additional resource has not been possible, the way in which PTs use their hours has been revised to enable increased opportunity for 1:1 support. A recommended set of activities for group tutorials with associated support materials exists for Levels 4, 5 and 6 and aspects of Level 4 have been reshaped in response to specific feedback received through the evaluation work (Maxwell, 2019).

## **Recommendations**

More specifically, the success of the Nursing Student Support role enables the proposition of the following recommendations for institutions looking to enhance pastoral support of students, specifically those with large cohorts on professional programmes:

1. Co-ordination of the PT role for larger programmes to foster belonging and support staff health and well-being. At Northampton, this is achieved through a Community of Practice that brings together the entire 'team around the student'.
2. Work-shadowing of the PT role to generate supportive co-working and succession planning.

3. Those in an enhanced or 'entitlement plus' role, with additional time to focus specifically on student support like the Nursing Student Support team, should consider undertaking Mental Health First Aid training.
4. Students on similarly professional programmes could benefit from an 'entitlement plus' model.

In Nursing, the link between the cessation of the bursary in 2016/17 and a decline in student applications is irrefutable (Buchan et al, 2019). More broadly, increased numbers of students disclosing mental health issues coupled with the recent emphasis on the responsibility of Universities to address this problem (Department for Education, 2018), indicates a need for more support. These 'critical factors' are likely to be compounded by falling demographics and the current political climate. These societal issues, as well as individualized student factors, can contribute to attrition across all programmes, necessitating the need for a 'super supportive' approach (Buchan, 2019). From a simple human exchange to University strategy, the ILS model is both kind and good for business.

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<sup>i</sup> XLEV301=2 is defined for HESA purposes as 'undergraduate students who have a particular set of course aims that are identified as undergraduate qualifications - <https://www.hesa.ac.uk/collection/c17051/derived/xlev301>.

<sup>ii</sup> Disable = 55 is the HESA code for "A mental health condition, such as depression, schizophrenia or anxiety disorder" - <https://www.hesa.ac.uk/collection/c18051/a/disable>

<sup>iii</sup> The name for the role was changed to signal the broader shift in approach.

<sup>iv</sup> Special thanks to Ms Donna Bray, Subject Leader for Nursing at the University of Northampton for initiating and leading this project and supporting its long-term continuation.

<sup>v</sup> It is recognised that continuing at University isn't always appropriate for all students and in these cases, they are supported to leave well.

## **Authors' Disclosure Statement**

All materials included in the article represent the authors' own work and anything cited or paraphrased within the text is included in the reference list.

The work has not been previously published nor is it is being considered for publication elsewhere.

There are no conflicts of interest that have influenced the authors in reporting their findings completely and honestly.