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Good Practice in Recruitment, Selection and Retention of Pre-Registration Nursing and Midwifery Students on behalf of NHS Education Scotland and Scottish Government Health Directorates

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Scottish Government Health Directorates & NHS Education for Scotland

GOOD PRACTICE IN RECRUITMENT, SELECTION AND RETENTION OF PRE-REGISTRATION NURSING AND MIDWIFERY STUDENTS

November 2010

CONTENTS

GLOSSARY OF TERMS

HEI	Higher Education Institute
PT	Personal Tutor
PEF	Practice Education Facilitator
OSSP	On-site Selection Procedure
GPA	Grade Point Average
MCAT	Medical Colleges Admission Test
KELPIE	On-line software to assist with administering student retention methods http://esdstudent.gcal.ac.uk/kelpie/
Programme	Nursing/Midwifery undergraduate programmes leading to registration as a nurse or midwife at either Diploma or Undergraduate level (Undergraduate only from 2013).
Course	A session or series of sessions as part of a curriculum that make up a programme.

BACKGROUND TO THE DEVELOPMENT OF THE GUIDANCE

Foreword
This guidance has been developed as part of the wider work led by the Scottish Government Health Directorates/NHS Education for Scotland Delivery Group on Nursing and Midwifery Student Recruitment, Selection and Retention.

Recognising the existing variations in attrition/retention across Scottish nursing and midwifery pre-registration programmes, the short-life working groups for 'Recruitment and Selection' and 'Retention' have commissioned this work to help Higher Education Institutions (HEIs) in Scotland develop robust recruitment, selection and retention strategies for students in all branches of nursing and in midwifery and to benchmark good practice in this area.

The resulting document is based on the findings of a literature review, national benchmarking exercise and a detailed survey of recruitment, selection and retention practices in pre-registration Nursing and Midwifery programmes. It provides both proposals for further initiatives and evidence-based indicators of good practice to support the work already being undertaken across Higher Education and service in Scotland. Further evaluation of the strategies developed by HEIs will enhance the evidence base and inform future strategic development.

Recruitment, selection and retention of nursing and midwifery students involves a number of stakeholders including PEFs, service users, recruitment personnel at corporate levels within the HEIs, and service staff. It is hoped that this guidance will prove useful to all those involved. We believe that this guidance will also be of interest to Careers/Guidance staff at local and national levels and to Scotland's Colleges.

The new NMC Standards for Pre-registration Nursing Education (NMC 2010b) provide a real opportunity to take forward enhancements to student selection, retention and support across Scotland and, whilst implementation of any initiatives should reflect the institutional context, we hope that all stakeholders will use this guidance to critically evaluate, develop and support initiatives and to focus resources/activity on areas of greatest benefit.

Iain McIntosh,
Napier University
(Joint Chair, Delivery Group)

Prof. Elizabeth Wilson,
NHS Tayside
(Joint Chair, Delivery Group)

Equality & Diversity

By promoting the development of robust, evidence-based and transparent strategies, these guidelines uphold the principles of equality and diversity within the processes of recruitment and selection of nursing and midwifery students. Whilst this guide does not make specific reference to issues of equality and diversity and disability, it supports the useful work that has been published in this area and readers are referred to these sources in the section on further information.

ENDORSEMENTS

'As CNO, I am firmly committed to excellence and that requires a quality workforce. Getting the right people into nursing and midwifery and supporting their successful transition into practice in our health and social care system in Scotland is central to that.

The current climate makes evidence-based prioritisation and benefits realisation central to all our planning processes and I believe that this guidance and support will ensure better selection, strong academic and placement support and challenging learning experiences to support motivated and committed nursing and midwifery professionals and through that enhance standards of care - this is my core priority.'

Ros Moore, Chief Nursing Officer Scotland

'I welcome the publication of the Guidance Good Practice in Recruitment, Selection and Retention as part of the wider work led by the Scottish Government Health Directorates and NHS Education for Scotland.

Whilst both HEIs and service partners have been working hard to support enhancements in selection and student support, this guidance draws together, for the first time, both the range of initiatives and the evidence to support their use.

Recognising the need to support wider dissemination and to strengthen the evidence base for such initiatives, NES is committed to the on-going development of this guidance and will work closely with all stakeholders to enhance our shared understanding of the impact of interventions upon student support, retention, the wider learning experience and its translation into the high quality practice to which we all aspire.

Our work with education and service colleagues across Scotland in support of the new NMC Pre-registration standards and all-graduate outcomes gives us further impetus and the current educational, professional and operational context makes innovation, efficiency and effectiveness equally important. We look forward to working with all stakeholders to critically evaluate, develop and support good practice.'

Dr Colette Ferguson, Associate Director, NMAHP, NES

1 RECRUITMENT

KEY POINTS FROM THE LITERATURE

The aim of recruitment strategies is to produce a pool of candidates from which to select (Land, 1993). Expectations of nursing/midwifery have a potential impact on recruitment, particularly with regards to denotative expectations, those shared by a group or society (Perry, 1985). The wider perception of nursing/midwifery as portrayed in the media, friends/family and career advisors will have an impact on how nursing is viewed as a potential career.

Studies of young people have found that nursing was not perceived as a desirable career (Helmsley-Brown & Foskett, 1999), whilst studies of high school counsellors (Blasdell & Hudgins-Brewer, 1999) and guidance counsellors (Campbell-Heider, 2008) found that nursing was perceived as requiring only moderate academic ability, minimal leadership and limited decision-making. Such perceptions can be influenced by the media as illustrated by the positive evaluations of the 'Discover Nursing' campaign in the USA (Bauerhaus et al, 2005; Donelan et al, 2008).

Personal experience has also been found to influence the perception of nursing/midwifery as a viable career option, with Larsen et al (2003) finding that knowing someone who was a nurse had a positive influence on whether nursing was considered as a career. Similarly, Kersten et al, (1991) and Rawlins et al, (1991) found that advice from family and friends was important in programme selection.

KEY POINTS FROM THE BENCHMARKING STUDY

Many of the larger HEIs had dedicated recruitment teams, whereas smaller HEIs rely on staff to undertake recruitment as part of their wider role.

Pre-application information is usually in form of prospectus, web based material or a leaflet. Such information is generally updated annually. Much of this information was concerned with selling the programme and the university. All HEIs have wider marketing resources that are used to supplement open days, including pens, cards, bags and bookmarks. Some HEIs have developed DVDs to use with senior school children in advertising their programme. One HEI had a site on 'you tube' with links to the department.

Open days, both planned and ad hoc, are used by all HEIs. PEFs or non-uniformed clinical staff were often involved in these open days. Some also hold evening drop-in sessions which they report as successful.

Networking with schools and Scotland's Colleges also involves presentations, and may include the use of marketing DVDs as well as the opportunity to participate in some practical skills such as taking blood pressure. These outreach sessions are generally aimed at children in S4 upwards, although staff in one HEI had visited a P7 class and involved them in some practical tasks.

Summer schools are used by some HEIs as an opportunity for prospective applicants to upgrade their qualifications or to re-enter an adult learning environment. Most summer schools are run at university level and are not subject specific, although they may result in the recruitment of one or two students per annum.

The main concern for HEIs is recruitment to that particular institution rather than to nursing/midwifery. For the majority, contact with careers services or school guidance staff was at corporate level, and the information was generic. Two HEIs had managed to run their own information day with school guidance staff.

Evaluation by the HEIs of all aspects of their recruitment strategy was very limited, and mainly subjective.

PRACTICE GUIDANCE

Two principles emerge from the literature and data examining issues of recruitment to nursing and midwifery pre-registration programmes: Information; and Evaluation

Information

Information about undergraduate nursing programmes, the role of the student nurse/midwife and the realities of working as a nurse/midwife are regarded as important factors in helping potential nursing/midwifery students make informed decisions about whether a career in nursing/midwifery is what they want to do.

Recommended Strategies:

1. Development of a National initiative providing realistic information on the role expectations of
   - being a student nurse / midwife
   - nursing / midwifery as a profession

2. Development and provision of information by HEIs, Scotland Colleges and careers/guidance services using a variety of media including DVD and internet based social networking sites on
   - the realities of being a student nurse / midwife
   - the realities of nursing / midwifery as a profession
   - the academic requirements of pre-registration nursing/midwifery programmes
This information may supplement and compliment material provided in any National initiative.

3. Development of information would be enhanced by the involvement of practising nursing and midwifery staff and pre-registration nurses and midwives.

4. Development of strong and direct links between agencies involved in careers advice and Departments/Schools of Nursing and Midwifery. For example,
   - Careers Scotland
   - NHS Education Scotland
   - Scotland Colleges
   - Scottish Government Education Directorates (Schools)

Examples of practice

Edinburgh Napier University provide evening 'drop in' sessions for potential candidates to find out about nursing/midwifery programmes outside normal working hours.

Glasgow University have produced a DVD giving information about the undergraduate nursing programme.

Glasgow Caledonian University run a one-day workshop for school Guidance staff on an annual basis.

Queen Margaret University run 'taster' sessions during their open days where potential candidates can get a taste of some of the clinical skills taught on the programme.

Evaluation

Evaluation of strategies leads to targeted improvement in recruitment.

Recommended strategies:

1. Evaluate recruitment initiatives to nursing/midwifery as a career choice

2. Evaluate recruitment initiatives run by the HEI to recruit to nursing and midwifery programmes

3. Longitudinal research to identify successful recruitment strategies

Examples of practice

Abertay University examine the return rates from their Summer Camps and links with Scotland's Colleges.

Edinburgh University gather data from visiting days on things such as the type of offer made if any and how the visitor heard about the Open Day, to enable focus of effort where it is most fruitful.

University of Stirling hold Open Days which include meetings with students and the opportunity to participate in simulated clinical skills.

2   SELECTION

KEY POINTS FROM THE LITERATURE

There is limited literature on recruitment and selection to pre-registration nursing and midwifery programmes, with much of the evidence being drawn from the medical literature. The literature on selection to medical undergraduate programmes emphasises the potential benefit of selecting students with good cognitive and non-cognitive skills, as a means of preparing them for the rigours of modern healthcare. GPAs or MCAT are the favoured way of assessing the former, whilst there is ongoing debate regarding the validity and reliability of the various means used to assess non-cognitive skills (Salvatori, 2001).

Child et al (1987) and Benbassat and Baumal (2007) both advocate the provision of plentiful information about all aspects of the programme and nursing/midwifery as a career so that prospective candidates can fit themselves to the programme/career, and thus a form of self-selection occurs. The development of job and person specifications is also proposed as a helpful tool to aid self-selection and selection by HEIs. The development of such specifications however would require agreed definitions of what constitutes the job of nursing/midwifery, and the qualities that make good nurses/midwives, issues that continue to be debated (Buckingham and Maycock, 1994; Price, 2000; Land, 1993).

The use of personal statements is explored by Land (1993) who identifies five areas that should usefully be covered: experience of healthcare; leadership qualities; reliability; motivational factors; and voluntary activities. However, Frean (2009) reports concerns about the authenticity of such statements. The exploration of interviews (both individual and group) within the literature, highlights their lack of reliability and validity as a selection tool. Research indicates that they are difficult to administer in any standardised form, do not predict attrition (Ehrenfeld and Tabak, 2000), involve subjective rating even when objective criteria are used (Land, 1993), and have limited predictive value for interpersonal skills (Basco et al, 2008).

KEY POINTS FROM THE BENCHMARKING STUDY

Most HEIs give some information before on-site selection procedures (OSSPs) with some giving quite specific information about the OSSP.

Most HEIs have corporate level screening that filters out those applications that are not eligible, usually due to inappropriate qualifications or lack of experience of care/healthcare.

Whilst most HEIs had a view of the type of student they were looking for, none of them had formal job or person specifications.

Personal statements alongside references and academic grades are used as the sole means of assessment in a few HEIs, most operate some form of OSSP. The authenticity of the personal statement is difficult to verify unless written as part of the OSSP; one HEI requires applicants to write a piece about their understanding of caring and nursing/midwifery as part of the OSSP.

The majority of HEIs conducted interviews either as group or individual. Those who had experience of both group and individual were unable to argue the superiority of one form over the other. Those HEIs who had experience of interviewing and not interviewing argued

that interviewing made no difference to attrition or quality of candidate; these tended to be the HEIs with smaller student cohorts. Refusal of candidates for nursing at interview is low; however refusal in midwifery is high as there is greater competition for limited places. Reasons for refusal were generally the perception that the candidate lacked motivation, or did not fully grasp the nature of nursing/midwifery either as a student or career. Some HEIs use interviews to deselect those whom they perceive have poor moral or ethical reasoning.

There is some involvement of service users in the selection of mental health students, although this is not evaluated in terms of its contribution to the selection of successful candidates. The different frameworks and scoring grids developed by HEIs for interview have not been systematically evaluated with regards to validity or reliability.

HEIs give out a great deal of information to prospective candidates that would facilitate self-selection, but self selection is not overtly addressed within their selection strategies.

PRACTICE GUIDANCE

Two principles emerge from the literature and data pertaining to the selection of nursing and midwifery students onto pre-registration programmes. These principles relate to the organisation of the personnel involved in the selection phase, and the processes through which selection is realised.

Personnel

Selection of candidates onto the pre-registration nursing and midwifery programmes will be enhanced by engaging with the range of personnel who might usefully contribute to this process, and defining the role that each might play.

Recommended Strategies

1. Define who might usefully be involved in the selection process
   - Administrative staff
   - Service staff
   - Service users
   - Academic staff

2. Define the role that each group of personnel will fulfil in the selection process
   - Development of selection processes
   - Interviewing
   - Administration

3. Maximise efficiency by defining the administrative role of corporate/university admissions staff to compliment the professional role and responsibilities of the school/departmental admissions staff to avoid duplication of the administrative process.

Examples of Practice

Edinburgh Napier University involve service users during the on-site selection process (OSSP) for mental health nursing students.

University of West of Scotland has service side and lay user involvement in the admissions process through representation on Admissions and Marketing groups.

Procedures

Selection procedures developed by the HEIs must increase their chance of recruiting nursing/midwifery students who will remain in their chosen career and have the capacity to develop into successful nurses/midwives. A range of selection procedures can be identified in the literature and the data from the study. However, key to all of these is the HEI's definition of what qualities they are looking for in the potential candidate, inextricably linked to their understanding of what qualities make a successful nurse/midwife.

Recommended strategies

1. Give information to potential candidates about the different constituents of the selection procedures

2. Facilitate the ability of potential candidates to self-select through
    - the provision of information about Nursing/Midwifery as a career
    - the development of job/person specifications detailing the skills and personal qualities required to be a nurse/midwife
    - making information on the professional requirements of the role of the nurse/midwife available for example by providing copies of the NMC Guidance on Professional Conduct for Nursing and Midwifery to potential candidates (NMC 2008c) or the Guidance on professional conduct for nursing and midwifery students (NMC 2010a)
    - providing information on the demands of the undergraduate programme

3. Development of on-site selection procedures that
    - enable verification of the personal statement, the application and the candidate
    - assess both cognitive and non-cognitive skills of candidates using tools that have been confirmed as valid and reliable
    - require students to meet a minimum standard in all areas assessed
    - acknowledge the diverse qualities required in different areas of nursing and midwifery

Examples of Practice

University of West of Scotland ask candidates to participate in numeracy and literacy tests at the on-site selection procedure.

University of Dundee provides a pre-selection information pack.

Edinburgh Napier University require candidates to write an essay to illustrate their ideas about nursing/midwifery and caring for people as part of the on-site selection procedure.

University of Stirling uses a scenario-based group interview. Candidates are required to write a short essay from a selection of topics that have been distributed to the candidates prior to the day.

3 RETENTION

KEY POINTS FROM THE LITERATURE

The literature pertaining to issues of retention of student nurses/midwives on undergraduate programmes is generally focussed on issues of attrition rather than retention of students. Further, the lack of agreed definitions of such terms as attrition, drop-out, turnover and withdrawal hinder the comparison of data and therefore the development of a clear picture of the key issues.

A study comparing attrition rates (of students per se) recorded in Australia, Ireland, Netherlands, and USA found that personal reasons, wrong choice of course, decreased motivation and socialisation issues were the reasons for students dropping out (Stolk et al, 2007). Lindop (1987) identified the link between perceptions and expectations of nursing and attrition. In their study, Harvey and McMurray (1997) found that expectations that did not correlate with the educational experience of students were associated with attrition. Such unrealistic expectations are thought to be more likely when recruitment fairs and tours portray programmes in an overly positive light (Hays, 2007). Increased pre-course information is linked with continuing on programmes (Harvey & McMurray, 1997), an intervention implemented in the countries studied by Stolk et al (2007).

Whilst attrition in the first year is generally attributed to the wrong career choice, those dropping out of programmes thereafter often do so because of academic failure (Wharrad et al, 2003; Ehrenfeld et al, 1997; Pitkethly and Prosser, 2001; Yorke, 2001; Last and Fulbrook, 2003; Andrew et al, 2008; Glossop, 2002; McCarey et al, 2006). Academic failure may be the result of non-attendance (McCarey et al, 2006), or linked to low pre-registration qualifications (Newton et al, 2008). However, findings by Ofori (2000) and Houltram (1996) suggest that where mature students are concerned, academic qualifications (on entry) are not predictive of attrition. Study skills programmes may be a means of improving academic success and therefore decreasing attrition (Higgins, 2004; Lockie & Burke, 1999; Hopkins, 2008).

Prediction of attrition requires data on those who drop out to develop knowledge of the variables that are most strongly associated with attrition. Moseley and Mead (2008) used such data to develop a model which suggested that 31% of the cohort of student drop-outs studied could have been predicted. The development of predictive models requires complete and comprehensive data sets, which in turn require an agreed definition of attrition. However the development of predictors of attrition can only enable de-selection rather than identifying predictors of success which would enable selection for retention and completion.

Work examining the factors that enable students to complete their programme of studies have found that those with strong self-efficacy beliefs are more likely to stay (McLaughlin et al, 2007); lay support enables older cohorts to complete (Price, 2004); and high levels of motivation to become a nurse/midwife help students overcome obstacles (Robshaw & Smith, 2004).

It is worth noting that the students who are perhaps most at risk of dropping out are often the least likely to ask for help (Wilson, 1999; Higgins, 2004; Shelton, 2003). Any proposed intervention to reduce attrition must therefore be pro-actively targeted at those identified as most at risk. Such at risk students should be identified as soon as possible to receive targeted intervention (Jeffreys, 2004, 2007; Lockie & Burke, 1999; Higgins, 2004).

KEY POINTS FROM THE BENCHMARKING STUDY

None of the HEIs operates a policy of risk profiling at selection. However, one HEI operates a 'traffic lights' system that facilitates interaction between student and personal tutor with regards to early indicators of possible failure.

There is no clear pattern of attrition across HEIs who operate one or two student intakes per year.

Attendance is monitored to some degree by all, with more formal systems being adopted by some HEIs. It is felt that smaller student cohorts may be easier to manage with regards to identifying non-attendance, and KELPIE has been adopted by one HEI to manage their large cohort.

Placement attendance is managed in a variety of ways. There is no single system for reporting student absence by the service side. A dedicated phone line with answer phone has been reported as useful. The link lecturer role is operated in a variety of ways, and has not been evaluated across institutions and settings.

Social integration was perceived as more difficult for those who had intakes that were out of kilter with the rest of the university, thus missing out on Fresher's week activities.

Within the first year, most HEIs offer study skills support.

Contact with personal tutors (PTs) was thought to provide invaluable academic and pastoral support. This was managed in a variety of ways – group and individual – with HEIs reporting different staff student ratios. Some HEIs developed PT groups with the aim of promoting peer support.

Many of the HEIs were able to offer flexible study arrangements, although these were rarely taken up by students. Some HEIs were able to be flexible about clinical placements over the summer so that those with families could take time out over the school holidays, making the time up later in the programme.

Assessment loads and credit rating of practice varied across HEIs. The impact of this on student retention is unevaluated.

Exit data is gathered by HEIs as fulfils their requirement; standardised data across HEIs is therefore not available. Similarly, attrition data took a variety of formats. Attrition was greatest in the first year of study, with personal reasons being most commonly cited. Reasons tended to be complex, and those citing personal problems were often those with poor attendance who were failing academically.

PRACTICE GUIDANCE

The ability to retain students on undergraduate nursing and midwifery programmes is inextricably bound up with the recruitment and selection strategies of the HEIs. There are three principles which emerge from the literature and study data: the need for increased knowledge about attrition; the role of student expectations; and the structures and processes that need to be developed to support students. The recommendations below should be read in conjunction with advice from the NMC on 'Standards to support learning and assessment in practice' (NMC 2008b).

Increased Knowledge

Within the literature there is some evidence that it is possible to develop models that enable HEIs to identify those at risk of attrition. These models rely on large, detailed data sets in order to identify patterns of personal information that indicate an increased risk of attrition

Recommended Strategies:

1. To facilitate the collation of data on a national scale, it is necessary to develop a definition of attrition for common use.

2. Research into why students remain on programmes in order to understand the aspects of the undergraduate experience that may facilitate retention.

3. Qualitative follow up of those who leave undergraduate programmes and comparison to those who stay.

4. Research the assessment loads and credit rating of practice in undergraduate nursing/midwifery programmes to identify variations in these across different HEIs, and examine the impact of this on student retention.

5. Develop systems for accurately recording student absence to facilitate the linking of this with retention rates.

6. Further testing of 'At Risk' assessment tools and development of 'At Risk' tools for use at the point of selection.

Examples of practice

Robert Gordon's University use a 'Traffic light' system (Student Review Record) for early warning of those at risk of attrition.

Glasgow Caledonian University use 'KELPIE' an electronic absence management system to gather data about student absence.

Edinburgh University have a dedicated phone line with voicemail to record student absence from practice placements by service staff and students.

Support Structures

The development of structures and processes that support the needs of students can increase their ability to complete their undergraduate nurse/midwifery education. The literature highlights an association between the academic performance of students and retention on their programme of study.

Recommended Strategies

1. Focus on developing effective peer support mechanisms. This might include
    *   Creating peer groups that are similar in terms of age and experience
    *   Development of Personal Tutor groups
    *   Agree an optimum Personal Tutor group size

2. Facilitate the integration of nursing/midwifery students into University life
   - Time intakes to enable students to access University Fresher's weeks
   - Initiate strategies for social integration, including attendance at Fresher's weeks

3. Develop mechanisms to enable students to acquire the necessary academic skills to successfully complete academic assessments
   - Provide tailored study skills support alongside the curriculum

4. Develop effective mechanisms for provision of pastoral and academic support by staff (results of the pilots at GCU and RGU around pastoral support may inform these developments).
   - Offer support in the affective components of programmes to all nursing and midwifery students
   - Identify those 'at risk' at the point of selection and provide targeted academic and pastoral support
   - Ensure students are aware of the support available through professional bodies (RCN, RCM, UNISON)

5. Develop mechanisms for effectively supporting students whilst on practice placement
   - Evaluate the impact of working 12 hour shifts so that students could work alongside mentors on the experience and learning of the student
   - Develop flexible arrangements for study and clinical practice when this can contribute to successful completion of the programme. For example, consider the impact of shift patterns on study time
   - Evaluate and develop the role of the link lecturer to effectively support practice area staff and students during practice placements
   - Continue to develop and evaluate the role of the practice placement mentor in supporting students on placement. (This is being considered as part of the work of another Short Life Working Group on 'Practice Learning')

Examples of practice

Glasgow University uses the 4th year students to help deliver the clinical skills sessions for other years.

Edinburgh University offers study skills support in areas such as using the library; writing; web blogging; time management; assessment preparation.

University of West of Scotland streams students into small groups for study skills and to create peer support too.

Queen Margaret University have developed a buddy system for support with the affective components of the programme*.*

Glasgow University has link lecturers visiting students on placement on a weekly basis.

1 RECRUITMENT

Theme	How	Rationale and supporting evidence	Current Practice	Desirable outcome / Evaluation criteria
INFORMATION on the role expectations of; - being a student nurse / midwife, - of nursing / midwifery as a profession, - the academic requirements of pre-registration nursing/ midwifery programmes.	Development of a National initiative providing realistic information	Mixed evidence from current local initiatives by HEIs. Hays (2007) Zysberg and Zysberg (2008) Harvey and McMurray (1997) Success of national campaign in USA. Bauerhaus et al (2005)	Being developed as part of the work of the Marketing Short Life Working Group	Applicants to programmes report the influence of the campaign in their choice of career.
	Development and provision of information by HEIs using a variety of media including DVD and internet based social networking sites. National media could be supplemented by locally produced information for each HEI. Material targeted at younger school age children or at mature candidates to inform of access routes could be produced.	Initial use of DVD and social networking by two HEIs well received.	DVDs used in two HEIs, social network site run by one HEI.	Applicants to programmes report the influence of these sources of information in their programme choice.
	Involve practicing nursing / midwifery staff in the development of information.	Bauerhaus et al (2005), Grossman et al (1999)	Some PEFs involved in recruitment initiatives.	Students on programme report feeling informed of the realities of the programme and career choice prior to starting the programme.
	Development of strong and direct links between agencies involved in careers advice and Departments/Schools of Nursing and Midwifery. For example, Careers Scotland.			Up to date, realistic, co-ordinated information provision to agencies.

RECRUITMENT CONTINUED

Theme	How	Rationale / Supporting Evidence	Current Practice	Desirable outcome / Evaluation criteria
EVALUATION Evaluation of strategies leads to targeted improvement in recruitment	Evaluate recruitment initiatives to nursing/midwifery as a career choice.	Hays (2007)	None identified	Evaluation data from which further recruitment strategies can be successfully developed.
	Evaluate recruitment initiatives run by the HEI to recruit to nursing and midwifery programmes.	Some HEIs able to focus on more productive recruitment strategies after evaluation.	Few examples of evaluation and none systematic	Systematic evaluation of all routine recruitment activities. Evaluation data to enable HEIs to focus on successful recruitment initiatives.
	Longitudinal research to identify successful recruitment strategies.	Hays (2007)	None identified	Evaluation data on completion rates associated with different recruitment strategies.

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2 SELECTION

Theme	How	Rationale / Supporting Evidence	Current Practice	Desirable outcome / Evaluation criteria
PERSONNEL Selection of candidates onto the pre-registration nursing and midwifery programmes will be enhanced by engaging with a range of personnel who can usefully contribute to this process, and defining the role that each might play.	Define who might usefully be involved in the selection procedures - Administrative staff - Academic staff - Service staff - Service users	Reported in Benchmarking exercise. NMC (2008a, 2010b).	Service users often involved in selection of mental health students.	Statement of personnel identified for involvement and rationale. Working definition of service user provided.
	Define the role that each group of personnel will fulfil in the selection procedures - Development of selection procedures - Conduct of selection procedures - Administration Streamline commitment required from service users and service staff to involvement in development of selection procedures rather than conducting OSSP.	Reported in Benchmarking exercise. NMC (2008a)	Varied levels of involvement by different groups of staff.	Effective and efficient use of personnel. Service users not over-burdened. Training provided to all involved in conduct of selection procedures.
	Maximise efficiency by defining the administrative role of corporate /university admissions staff to compliment the professional role/responsibilities of the school/ departmental admissions staff to avoid duplication of roles.	Reported in Benchmarking exercise	Some duplication in many HEIs of the review of applications.	Clear protocol of responsibilities and streamlined systems with good administrative support.

SELECTION CONTINUED

Theme	How	Rationale / Supporting Evidence	Current Practice	Desirable outcome / Evaluation criteria
PROCEDURES Selection procedures developed by the HEIs must increase their chance of recruiting nursing students who will remain in nursing /midwifery and have the capacity to develop into successful nurses/midwives.	Give information to candidates about the different constituents of the selection process	Reported in Benchmarking exercise.	Provided in some form by most HEIs although level of detail varied	Applicants report being fully informed of the selection procedures.
	Facilitate the ability of potential candidates to self-select through • the provision of information about Nursing/Midwifery as a career • the development of job/person specifications detailing the skills and personal qualities required to be a nursing/midwifery student • make information on the professional requirements of the role of the nurse/midwife available for example by providing copies of the NMC (2008c) Guidance on Professional Conduct for Nursing and Midwifery to candidates • provide information on the demands of the undergraduate programme	Child et al (1987) Buckingham and Maycock (1994) Price (2000)	Information often given at interview as means of promoting covert self-selection. No job or person specifications.	Development of job/person specifications for a nursing/midwifery student. These may be derived from a National standard by each HEI. Applicants report being informed of professional requirements and the demands of the programme.

SELECTION CONTINUED

Theme	How	Rationale / Supporting Evidence	Current Practice	Desirable outcome / Evaluation criteria
PROCEDURES cont. Selection procedures developed by the HEIs must increase their chance of recruiting nursing/midwifery students who will remain in nursing /midwifery and have the capacity to develop into successful nurses/midwives.	Development of on-site selection procedures that ▪ enable verification of personal statement, application and candidate ▪ assess both cognitive and non-cognitive skills of candidates ▪ require students to meet a minimum standard in all areas assessed ▪ acknowledge the diverse qualities required in different areas of nursing and midwifery	Reported in Benchmarking exercise. Currently only GPA has strong supporting evidence as a means of selection. Neither individual nor group interviews are supported by the evidence. There is limited evidence to date to support the use of personality or psychometric tests and moral reasoning tools Chamberlain and Searle (2005) Salvatori (2001) Frean (2009)	Some HEIs asking for on-site writing of knowledge and skills tests and of attitudes to their chosen career. Some HEIs requiring success in all assessed criteria.	Applicants to be successful in all admission criteria to be offered a place. Validated and reliable means of assessing cognitive and non-cognitive skills of applicants against the job/person specification are developed.

3 RETENTION

Theme	How	Rationale / Supporting Evidence	Current Practice	Desirable outcome / Evaluation criteria
INCREASED KNOWLEDGE Within the literature there is some evidence that it is possible to develop models that enable HEIs to identify those at risk of attrition. These models rely on large, detailed data sets in order to identify patterns of personal information that indicate an increased risk of attrition.	Develop a definition of attrition for common use in order to provide reliable comparator data. Consider use of DoH 2006 guidance.	Reported in Benchmarking exercise. Glossop (2001) Jeffreys (2007)	Very varied data collection in each HEI with some central reporting roughly in line with DoH 2006 guidance.	Standardised annual retention rate data available to staff in HEI departments/ schools with responsibility for recruitment and retention.
	Research into why students remain on programme in order to understand the aspects of the undergraduate experience that may facilitate retention. Qualitative follow up of those who leave undergraduate programmes and comparison to those who stay.	Reported in Benchmarking exercise. Glossop (2001)	HEI evaluation data and studies focus on attrition rather than retention.	Improved knowledge of what helps students remain on programmes.
	Research the assessment loads and credit rating of practice in undergraduate nursing/midwifery programmes to identify variations in these across different HEIs, and examine the impact of this on student retention.	Reported in Benchmarking exercise	Highly varied assessment loads	Knowledge of the impact of assessment load on retention. Greater consistency in requirements of programmes at similar academic levels.
	Develop systems for accurately recording student absence to facilitate the linking of this with retention rates.	Reported in Benchmarking exercise McCarey et al (2006)	Some HEIs have strong systems in place with positive feedback to students	Students report positive feedback from absence monitoring as a motivating factor. Improved retention where systems in place.

Theme	*How*	*Rationale / Supporting Evidence*	*Current Practice*	*Desirable outcome / Evaluation criteria*
SUPPORT STRUCTURES The development of structures and processes that support the needs of students can increase their ability to complete their undergraduate nurse/midwifery education. The literature highlights an association between the academic performance of students and retention on their programme of study.	Focus on developing effective peer support mechanisms. This might include • Creating peer groups that are similar in terms of age and experience • Development of Personal Tutor groups • Agree an optimum Personal Tutor group size	Reported in Benchmarking exercise. Trotter and Cove (2005)	Some grouping of students by age and experience. Varied personal tutor group sizes and use of groups.	Personal tutor group sizes reviewed for efficiency and effectiveness. Evaluation of grouping by age and experience.
	Facilitate the integration of nursing/midwifery students into University life • Time intakes to enable students to access University Fresher's weeks • Initiate strategies for social integration, including attendance at Fresher's weeks	Reported in Benchmarking exercise. Jeffreys (2004)	Most intakes accessing Fresher's weeks although January / February intakes may have a poorer experience.	Students report positively on their integration into becoming a student of nursing /midwifery
	Develop mechanisms to enable students to acquire the necessary academic skills to successfully complete academic assessments • Provide tailored study skills support alongside the curriculum	Reported in Benchmarking exercise Jeffreys (2007) Hopkins (2008)	Most HEIs providing some study skills	Study skills provision for all students. Active targeting of students 'at risk'.

RETENTION CONTINUED

Theme	How	Rationale / Supporting Evidence	Current Practice	Desirable outcome / Evaluation criteria
SUPPORT STRUCTURES cont. The development of structures and processes that support the needs of students can increase their ability to complete their undergraduate nurse/midwifery education. The literature highlights an association between the academic performance of students and retention on their programme of study.	Develop effective mechanisms for provision of pastoral and academic support by staff • Offer support in the affective components of programmes to all nursing and midwifery students • Identify those 'at risk' at the point of selection and provide targeted academic and pastoral support	Reported in Benchmarking exercise Wilson (1999)	Varied means of providing pastoral and academic support. No identification of students at risk from point of selection.	Evaluate a scheme of identification of students at risk from point of selection. Evaluation of pastoral care initiative awaited.
	Develop mechanisms for effectively supporting students whilst on practice placement • Evaluate the impact of working 12 hour shifts so that students could work alongside mentors on the experience and learning of the student • Develop flexible arrangements for study and clinical practice when this can contribute to successful completion of the programme. For example, consider the impact of shift patterns on study time • Evaluate and develop the role of the link lecturer to effectively support practice area staff and students during practice placements	Reported in Benchmarking exercise	Few students taking up opportunities for flexible study. Varied policies on 12 hour working.	Study to evaluate the impact of students working 12 hour shifts. Evaluation of the flexible study arrangements. Students report flexible study arrangements to benefit their studies available. Evaluation of the role of the Link lecturer alongside work on practice learning environments by Short Life Working group.

FURTHER INFORMATION

NHS Education Scotland

Scottish Government Health Directorates

Supporting Professionals in Admission

Careers Scotland

UCAS

Royal College of Nursing (Scotland)

Royal College of Midwives

UNISON Scotland

Nursing and Midwifery Council (Also see Standards, Guidance and Circulars referred to in the reference list.)

Schools of Nursing and Midwifery

      Edinburgh Napier University

      Glasgow Caledonian University

      Queen Margaret University

      Robert Gordon University

      University of Abertay

      University of Dundee

      University of Edinburgh

      University of Glasgow

      University of Stirling

      University of West of Scotland

Equality and Diversity

RCN (2010) Dyslexia dyspraxia and dyscalculia: a toolkit for nursing staff
http://www.rcn.org.uk/__data/assets/pdf_file/0003/333534/003835.pdf Accessed 10 November 2010

QAA (2010) Code of practice for the assurance of academic quality and standards in higher education Section 3: Disabled students
http://www.qaa.ac.uk/academicinfrastructure/codeOfPractice/section3/Section3Disabilities2010.pdf

Equality and Human Rights Commission Guidance for education providers
http://www.equalityhumanrights.com/advice-and-guidance/education-and-training-providers/

Equality Challenge Unit, www.ecu.ac.uk

NMCEquality and Diversity http://www.nmc-uk.org/About-us/Equality-and-diversity/

Other Recruitment, Retention and Selection Resources

Rodgers S. McCreaddie M (2009) *Benchmarking Exercise and Literature Review on Recruitment, Selection and Retention to Pre-registration Nursing and Midwifery Programmes in Scotland*. Executive Summary prepared for the Scottish Government Health Directorates Short Life Working Groups. University of Edinburgh PDF available at:

http://www.health.ed.ac.uk/nursing/staff/documents/ExecutiveSummaryRSRStudy.pdf

Scottish Government Health Directorates (2007) 'Recruitment & Retention' Report of the 'Facing the Future' Sub-Group & Working Groups http://www.scotland.gov.uk/Topics/Health/NHS-Scotland/nursing/RecruitmentRetentionRepo

NMC pre-registration programme resources http://standards.nmc-uk.org/PreRegNursing/non-statutory/Pages/Resources.aspx

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