TRANSITION FROM CLINICAL SUPPORT WORKER TO NURSE

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This study aims to review the emergence of clinical support staff and to explore the experience of a cohort of non-traditional students as they embark on the transition into nursing. Using a qualitative approach it explores students’ experience and measures their performance, recognising motivation and success. The results show students often found the transition from clinical support worker, to student, to nurse to be both daunting and exciting. Role confusion characterised these transitional stages. This staff group should be recognised within the context of new gateways into pre-registration nursing, in the drive to improve recruitment and retention.

BACKGROUND

The impetus to widen access to pre-registration programmes has been driven by the changing demographic profile of the nursing student. Non-traditional students have become vital to the profession and have contributed to these changes. There has also been a growing awareness of the value of healthcare assistants (HCAs) and clinical support workers (CSWs).

In response to these issues, the Scottish Executive created an alternative pathway into nurse education for CSWs (unregistered staff who act as assistants to the professional care team engaged in direct patient or client contact – other titles include nursing auxiliaries and care assistants). A programme was designed to help CSWs prepare for entry into pre-registration nurse education, in which each received £7,500 towards salary costs while completing a one-year HNC course in healthcare. This new route of entry into nurse education was validated by the governing bodies of nurse education in Scotland, and supported by a partnership between the trust, further education and higher education institutions. A literature review was carried out – for details see nursingtimes.net.

METHOD

Combined research methods were used to provide data and an understanding of the experience of the student cohort. Questionnaires and focus interviews were used by the researcher, a lecturer with responsibility for admissions in the school, to provide qualitative data. This was supported with quantitative data from placement reports and theory assessments.

A pilot study was carried out using a previous student cohort to evaluate the research tool and identify potential problems in the design of the questionnaire, data collection and analysis. Questionnaires were sent to eight students and seven completed questionnaires were returned. The same seven students took part in the focus group interview. The sample was necessarily small due to resource constraints.

RESULTS

Student transition

The data revealed that students found the transition from CSW, to student, to nurse both daunting and exciting. Three were undertaking the course because they had an enduring career goal to become a nurse, while three said they enjoyed their jobs as CSWs but felt they were marking time; the secondment offered them the possibility to progress in their career.

However, the group also expressed fear of failure. They were concerned about whether they could “cope with the academic workload” and adjust to college life. The effects of study on family life were a worry, and time was a significant issue for one student who would have to spend extra hours in the workplace to achieve required learning outcomes. Two other respondents indicated apprehension about giving up a secure job to embark on a venture without knowing whether they would be successful.

The transitional experience as students within the further education college was described as enjoyable and valuable. This was enhanced by the academic support and advice they received from lecturing staff in both further and higher education.

Socialisation

The students’ transitional experience was characterised by phases of socialisation into a variety of roles.

Both the questionnaires and the focus interviews revealed that respondents felt a lack of “student status” in the workplace, which meant they did not receive the learning opportunities they had hoped for.
This contributed to a blurring of roles, which affected learning experience to varying degrees. All said that role confusion diminished once they were recognised as ‘nursing students’. As students from the higher education institution, three said that they received reflection time, in accordance with the requirements of their course.

The questionnaire responses also suggested disparity in the students’ perception of themselves as nursing students as opposed to CSWs. They felt they had more time to ask questions, and three identified that this questioning was indeed part of reflection. In the focus interview one student commented that there was more time to reflect on why things were done. Another identified that this was the way in which students take responsibility for their learning.

There was, however, confusion concerning the boundaries and expectation of this role. The CSWs were not able to transfer some skills from one role to another. The participants expressed difficulty adjusting to their role as nursing students, particularly in acknowledging the overlap between the roles of CSWs and qualified staff.

Mentorship
Support was also discussed in both research tools in relation to the clinical learning environment.

The role of the mentor has developed and is used to facilitate students’ socialisation and provide personal support during the transitional experience.

The respondents felt they were encouraged to reflect on experiences they may have encountered for the first time, such as terminal illness, abuse or extensive trauma, and whether they felt supported by their mentors.

Adult learning
The focus group unanimously described the academic demands of the course as difficult but said that they were easier to organise now they were full-time students. The seven students passed all six assessed modules. The overall pass rate of the complete cohort for this semester was 93%–99%.

All seven students received favourable placement reports in both clinical areas on completion of semester 3 of the higher education programme. There was a clear consensus about their qualities and skills.

The reports of all seven students referred to their ability to work both as team members and under their own initiative. Six were noted for their keenness to learn. Maturity was mentioned in relation to three, a quality often linked in the reports to professionalism. Five students’ communication skills received positive comment, and six reports discussed students’ insight and the ability to link theory to practice.

DISCUSSION
To cope with transition, students need a framework that supports their journey towards acceptance by the profession (Delaney, 2003). Known as socialisation, this process was defined by Dingwall (1977) as: ‘A process by which newcomers to a group worked to make sense of their surroundings and came to acquire the kinds of knowledge which would enable them to produce conduct which allowed established members of that group to recognise them as competent.’

Lack of clarity regarding the role of unqualified staff is well-documented. The findings of this research supported previous studies, demonstrating confusion and lack of clarity regarding the role of CSWs in their place of work where they also functioned as CSWs. Conversely, this familiarity of role was also given as an explanation for why five students found the clinical placement was also given as an explanation for why five students found the clinical placement.

Role confusion is implicit in the range of tasks and nursing activities carried out by the respondents in the roles of CSW and nursing student. All stated that this confusion diminished once they were recognised as ‘nursing students’. This coincided with a passage to another stage of the socialisation process marked by acceptance of and into the profession.

Dissonance concerning socialisation was explored by Wood (2006), who investigated the experiences of HCAs seconded into nurse training. Their transitional experience was impeded by this confusion concerning the roles of support workers. This was demonstrated by mentors’ and colleagues’ high expectations of the students due to previous care experience, and the juxtaposition of competence as a worker and learning as a student.

Despite differences in perceiving the nature of socialisation, all writers concurred that it exists and can be stressful (Delaney, 2003). Mentorship has been identified as a key process in supporting nursing students through socialisation (Kenny, et al, 2004).

CONCLUSION
The research demonstrates role confusion between student and CSW. This should be addressed by small practical changes such as standardising uniform, ensuring CSWs have parity of learning opportunity, and appropriate facilitation and mentoring. Recognition of the role of CSWs is key to any attempt to address recruitment and retention, and should be supported by a structured approach to the provision of equal opportunities for unqualified staff.

REFERENCES


