Using supported learning to ensure nurse recruits are skilled to care for acutely ill patients

Nurses often lack the necessary skills to care for patients with acute illness. A trust set up a programme to enable applicants to train before taking up posts

AUTHORS Linda Chapman, MSc, PGCEA, BSc, RGN, is education lead; Julie Blackman, PGDip, BSc, RGN, is head of clinical skills; both at Royal United Hospital Bath Trust. ABSTRACT Chapman L, Blackman J (2010) Using supported learning to ensure nurse recruits are skilled to care for acutely ill patients. Nursing Times; 106:11, 10-11. Recruiting registered nurses to acute care wards can be difficult as applicants often lack the necessary skills to work with acutely ill patients. To overcome this problem the Royal United Hospital Bath Trust set up an acute care training programme. Through partnership working between managers, clinical, education and human resource staff, it provides an opportunity for nurses to develop confidence and competence to meet the needs of the acutely ill.

INTRODUCTION
A shortage of competent nurses could jeopardise the government’s plans to modernise the NHS. Nurses are central to delivering healthcare and a crucial resource (Maben and Griffiths, 2008). The changing profile of acute care requires nurses who are competent to respond effectively to the needs of acutely ill patients.

Like many acute trusts, the Royal United Hospital Bath Trust faces a challenge in recruiting enough registered nurses who are up to date and confident in meeting these acute needs. The trust’s recruitment strategy group recognised that many nurses were put off applying for jobs in acute care, or were unsuccessful at interview because they did not have the skills necessary to work with very sick patients.

To recruit suitable staff, the trust’s nurse recruitment group commissioned a working group with representatives from education, human resources and nursing practice to develop an acute care training programme.

This training offers supportive learning to enable registered nurses to change their area of practice, and develop knowledge and skills to meet the needs of acutely ill patients cared for in busy wards. Although the transition from acute care to primary care has been supported elsewhere (Clegg et al, 2006), there is no documented evidence of a specifically designed programme for nurses to gain skills in caring for acutely ill patients in an acute trust.

THE ACUTE CARE PROGRAMME
The programme provides an opportunity for registered nurses to undertake up to six months of supported learning to enable them to meet the needs of patients with acute illnesses.

A partnership approach is used to develop and implement the programme, which includes clinical and education staff who design the content and implement training and HR staff who organise the contractual arrangements. These include a fixed term contract for the length of the programme and a substantive band 5 post on successful completion.

During the programme each student is allocated a learning partner, who is an experienced nurse working with acutely ill patients, and an educational coach from the education department; they jointly supervise and support students.

The learning partners’ role is to provide guidance and enhance clinical skills development. They identify learning needs by considering students’ experience and the needs of the workplace with the aid of a learning contract (Knowles et al, 2005), which helps individualise each student’s learning. Learning partners give their students feedback on progress as well as constructive comments on aspects of practice that need further development. Students are encouraged to express difficulties and skill gaps that are identified in the workplace.

Educational coaches help students and learning partners understand the requirements to pass the programme successfully. They organise a schedule that includes taught sessions, led by experts in the trust, and facilitate work based learning sessions. These sessions promote the sharing of incidents from practice, encourage reflection and provide opportunities for learners with similar concerns and difficulties to come together and support each other.

The programme places significant emphasis on students being self directed learners. For the first two weeks, they have supernumerary status and are given protected learning time to attend study days and undertake independent study and work experiences. This is essential to enable them to complete the required clinical competences and collate evidence for the development portfolio, which is assessed.

Students are expected to be proactive in seeking learning opportunities such as e-learning, in-house training or working in alternative teams for short periods.

They are also responsible for demonstrating they have achieved their agreed competences and skills by completing a learning contract and portfolio of evidence. Those who do not complete the required competences are not offered a substantive post at the end of the programme.

PRACTICE POINTS
- The acute care training programme has helped nurses to develop confidence and competence when caring for patients in acute settings.
- Close working between clinical and educational staff and students has helped overcome the many challenges of developing a new programme.
- An assessment day involving an interview, clinical skills test and team management exercise is vital to nurses successfully completing the programme.
- Flexibility is essential to enable each student to learn according to their personal learning needs and the demands of their workplace.
- An emphasis on students as self directed learners is vital for their ongoing development.

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CHALLENGES AND SOLUTIONS

The working group had to resolve several difficulties before and during implementation of the initial programme. Choosing candidates who are suitable for work in the hospital and motivated to develop skills is a major challenge. Sisters and matrons prefer to choose candidates who are suitable to work in their areas, based on matching their past experience and preferences to the requirements of the post.

There is an assessment day for each cohort, which aims to enable candidates to demonstrate their knowledge and potential to develop. It also enables clinical staff to assess candidates’ suitability for their practice areas, which involves one to one interviews with ward sisters. An assistant director of nursing gives a presentation on the trust’s expectations and a member of the education team outlines the programme’s structure.

Candidates participate in activities such as a clinical skills test and team management exercise. These give them an opportunity to demonstrate their problem solving and teamworking qualities. To encourage as many potential applicants as possible to attend, these days are held on Saturdays.

As applicants have a wide variety of experiences and skills, learning has to be flexible to meet their individual needs and the needs of the areas where they will work.

In developing the programme, education staff considered the difficulties in assessing work performance and clinical skills. Clinical staff do not want to have to complete long and complex documentation as evidence of students’ skills.

National Occupational Standards competences, developed by Skills for Health (2010), are already used in the hospital to assess practitioners, so many clinical staff are familiar with them.

The working group identified four compulsory competences from within the NOS that they felt all staff should achieve when working in acute care. Additional optional competences are discussed between students and their learning partners. This allows competences to be met according to patients’ needs. The required competences to complete as part of the programme are summarised in Box 1.

The use of the NOS competences has proved successful in helping students improve performance and as an assessment tool.

An nurse working with the student witnesses the achievement of each competence and learning partners and educational coaches check that portfolios reflect students’ achievements. Although the portfolio is not assessed at higher education institution level, there are opportunities to gain credits towards an academic qualification within the trust.

Other obstacles

Some ward sisters and charge nurses are apprehensive about accepting acute care students onto wards with staff shortages. It is difficult for staff to provide additional support as busy wards do not have time to facilitate learning and skills development for newly recruited staff.

To overcome this, two students undertook their acute care training on a ward that had sufficient staff to support them, then moved to another ward of similar specialty towards the end of their training period before they began their substantive posts.

To allow students to settle in to the ward, get to know team members and observe new skills and practices, two weeks of supernumerary practice is included. For some, this has proved insufficient, especially for those who work fewer than three days a week. The programme is therefore not suitable for students who cannot commit to working at least three days a week in clinical practice while undertaking training.

OUTCOMES AND BENEFITS

The acute care programme has been running for a year and two cohorts of five students each have participated, with more planned for autumn and spring.

Through the evaluation process, learning partners and students have outlined the benefits of the programme on professional development. Students have appreciated being given support and time to adjust to changes in practice and the pace of acute care nursing, in particular in developing their clinical practice and ensuring they are working to current policies.

Before undertaking the training, most students expressed apprehension and a lack of confidence in being able to nurse in an acute setting. They have been surprised at how their confidence has grown and how quickly they have been able to achieve their competences.

Flexibility in the programme enables students to complete it in 3-6 months, depending on their ability and work patterns. After successfully completing it, all have been given permanent work contracts. So far, most students have completed the programme within 3-4 months, and only two have taken nearer to six months. Two left during the early stages of training because of unexpected changes in their personal circumstances.

CONCLUSION

The success of the acute care programme relies heavily on learning partners and managers, education and HR staff and the determination of students themselves.

The trust is fortunate to have dedicated staff who provide excellent support for this programme.

As it is proving to be a positive factor in supporting recruitment to our nurse workforce, the programme continues to be offered twice a year with cohorts of up to 10 students at a time.

REFERENCES


tinyurl.com/skills-competences