

STUDENT FOCUS GROUP THREE

PRACTICE PLACEMENTS

ATTENDEES

- Facilitators: Trudi Neenan, Matthew Jacobs, Liz Wands-Murray, Danielle Simpson
- Total of 9 students attended (open invitation sent to all 700 UG/MNurse students)
- All 3 years of BSc Nursing & MNursing represented
- Facilitators general observations were that the group were constructive, honest and self aware regarding the systems in place and the challenges of this.

Q1 – What have you found most enjoyable about your placements?

- Building respect, relationships and partnerships
- Variety of practice experiences
- Being made to feel welcome
- Multi-professional working opportunities
- Length of placements
- Supportive mentors
- Each team member plays a role
- Supportive networks

Q2 – What makes a good mentor?

- Supportive
- Welcoming
- Explaining things
- Taking you under their wing
- Allows use of initiative
- Use of 'debriefing' and regular supervision
- Builds self confidence
- Allows autonomy
- Questions and challenges
- Monitors progress properly
- Variety of approaches eg 'hands on' or 'hands off' – both work in different ways

Q3 – How does your mentor influence your learning?

- If they are engaged, then I am more engaged with my own learning
- If they are pro-active, this helps me to stay motivated
- They encourage me to explore things
- It enhances my clinical knowledge
- They help me to learn how to effectively negotiate
- It encourages individually led learning
- It has helped to develop my assertiveness

Q4 – What makes a bad mentor?

- ‘Old school’ approach
- Lack of knowledge
- Lack of boundaries
- Not interested or engaged
- Not making me feel welcome
- Saying things like “I wasn’t expecting you”
- Micromanaging
- Only allowing observation not action!
- Appears to not care
- Makes hurtful comments
- Instill’s fear or dread
- Not being around much (ie always on night shifts)
- It is also very challenging when Mentors change at the last minute or even mid placement

Q5 – What other issues impact on the clinical areas?

- Staff/resourcing is the biggest problem and it has a direct impact on our learning/experience
- Key Performance Indicators
- Pressures of the expected workload
- The risk averse nature of the working environment
- Placements being changed last minute, making preparation difficult
- Supernumerary status not being respected/kept to
- Being asked to undertake HCA tasks

Q5 cont. – What other issues impact on the clinical areas of learning?

- Lack of communication between placement areas and the University
- Lack of set time with your mentor or difficulty fitting this into the schedule
- University's lack of understanding about issues that occur in practice
- Long placements sometimes mean lack of variety of experience
- Assigned spokes can sometimes be placements that are not relevant
- The Field specific placement in Year 1 can limit your understanding of other areas
- The one size fits all approach does not always work
- The allocation model sometimes means that the variety of experiences isn't as good as it could be

Q6 – How do we integrate theory and practice more?

- There should be a clearer relationship between learning outcomes for the two
- Use of third sector placements would help to widen the variety of experiences that can be more widely linked to the theoretical learning
- Looking at how we can 'add value' in these two settings and be encouraged to use our initiative more
- Make sure that the placements are more geared towards students and being learning environments
- Make sure that the wards have some knowledge of the students before they arrive
- Encourage the placements to undertake more forward planning - students could contribute to this to get things set up – handbooks, posters, information sheets etc and staff should be up to date that these things exist

Q7 – What are some of the things we should be considering/actions we can take to improve things

- Community placements, especially in CMHT should not be done in the first year as these can be extremely challenging
- Bespoke approaches as much as possible will always offer better outcomes
- Stage appropriate placements that consider what people are ready for and will get the most out of
- The widest variety of placement experiences as possible to help us be clear about our areas of interest and specific skills
- How we can encourage more close working with Mentors
- How we can get more multi-disciplinary team experiences

Q7 cont. – What are some of the things we should be considering/actions we can take to improve things?

- Ways that communication can be improved between the University and placements
- Some better contingency planning and again, improving communication when things go wrong
- Addressing the issues on some placements around access/swipe cards as this can be very problematic eg wasted time waiting to be let in, not able to go to the toilet, limiting the tasks you can efficiently complete – a deposit scheme might work?
- A bank of information for students for them to look through on arrival at the placement (as mentioned, developed with student involvement and ensuring all mentors know it exists)

Q7 cont. – What are some of the things we should be considering/actions we can take to improve things?

- Consider a system for monitoring mentors – including a system for acting on negative feedback about mentors – how this is dealt with, what the process is, times it might need to be formal and times it might need to be informal but always with some support available for the student if appropriate
- Making sure that the above system is communicated with placements and students so it is transparent
- Ensure that students and staff know about the Hardship Fund so that they can avoid getting into trouble