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"Supporting Nursing and Midwifery Students: Restorative Supervision"

Summary (100 words).

In the current climate of healthcare, the retention and support of nursing and midwifery professionals are critical concerns. The NHS National Staff Survey (2023)¹ highlighted alarming levels of burnout among midwives and nurses, emphasising the urgent need for interventions to bolster their emotional wellbeing. The PMA and PNA roles deliver the A-EQUIP model, which prioritises civility, collaboration, and empathy in healthcare, supporting the holistic development of students and registered professionals alike. Through RS, the healthcare workforce gains resilience, personal growth, and enhanced care quality, positioning it as a beacon of hope for a brighter future in nursing and midwifery education.

The PMA and PNA Programmes.

The NHS workforce is reported to be at crisis point with more staff than ever before leaving the profession two-years post qualifying.² Changing needs of the population and demographics of the workforce make for a combination of challenges. The NHS National Staff Survey (2023)¹ identified 177,121 Nurses and Midwives, 39.7% staff reported feeling burnt out due to their work, with staff morale declining for a second consecutive year. This negatively impacts on the workforce who ensure standards of quality to maintain patient safety and care if the staff are well cared for, so are the patients. The PMA role facilitates RS to support midwives' emotional wellbeing and encourage the development of resilience, which demonstrates a common trait of effective midwives.³

The nurturing and retention of nursing and midwifery professionals stand as paramount concerns.⁴ At the forefront of pioneering the integration of Restorative Supervision (RS) into nursing and midwifery education is the University of Hull, under the guidance of dedicated professionals like Lisa Lachanudis, Jayne Walker, and Lisa Jennison. The inception of the Professional Midwifery Advocate (PMA) Programme in 2017 marked a significant milestone, providing a platform for the implementation of RS tailored to the unique needs of midwifery colleagues across the country. Building on this success, the subsequent delivery of the Professional Nurse Advocate (PNA) Programme in 2021 was introduced by Jayne Walker and Lisa Jennison. The PNA programme delivers training for national nursing colleagues

launching in March 2021, was seen as the start of a point of recovery post pandemic: for patients, services and the workforce. The A-EQUIP model can be applied to any healthcare environment showcasing its adaptability and effectiveness.⁵

Civility in healthcare is fundamental for fostering a positive and effective environment for both patients and the healthcare workforce.⁶ It encompasses respectful and courteous interactions, regardless of hierarchical positions or differences in opinions. Effective communication with a particular focus on active listening while using appropriate language, and considering cultural sensitivities lays at the foundation of a positive workplace culture.⁷ To build trust and rapport, nurses and midwives should demonstrate empathy and compassion towards each other, recognising their emotions and concerns. Teamwork and collaboration among team members is essential for delivering quality care. Civility promotes teamwork, encourages sharing of information, and fosters a supportive environment.⁸

Leaders play a crucial role in fostering a culture of civility within healthcare organisations and acting as positive role models. They should lead by example, promote respectful behaviour, and address any instances of incivility promptly and effectively.⁶

The incorporation of the A-EQUIP Model,⁵ with its emphasis on restorative practice to enhance the quality of care, further solidifies the foundation of RS within nursing and midwifery education. Funded initiatives such as the Nursing Student Advocate Support (NSAS) project by Health Education England (HEE) have enabled the adaptation of this model to support nursing students, underscoring the commitment to holistic student development.⁹

The imperative for such initiatives becomes evident when considering the challenges facing the healthcare workforce. Attrition rates among nursing and midwifery students have long been a challenge,⁴ compounded by the complexities of the modern healthcare environment and the recent upheavals caused by the COVID-19 pandemic. However, amidst these challenges, a solution emerges in the form of the A-EQUIP model⁵ and both the PMA and the PNA role. Restorative Supervision is a key element of the A-EQUIP model and the support framework has shown success in nurturing resilience, personal development, and overall wellbeing. The restorative function of the A-EQUIP Model is most valued when facilitated in an environment where humanistic principles (non-judgement, empathy and trust) are present.¹⁰

Research conducted at the University of Hull has shed light on the multifaceted benefits of RS for healthcare and further corroborates the value of RS in nursing and midwifery education.¹¹ The NSAS Project (2023-2024) further expanded the reach of RS, offering support to pre-registration nursing students and training Higher Education Institutional (HEI) staff across disciplines, including dietetics, radiography, operating department practice, and paramedical science.

Recent study (in press) examining the impact of RS on HEI staff has revealed positive outcomes, paving the way for its integration into various healthcare

programmes, this is further supported by research that evidences the positive effects from RS on the workplace culture.¹²

Nursing and Midwifery Student Retention.

Applying this approach to student nurses and midwives seems the natural transition and can demonstrate increased awareness of interpersonal, professional and communication skills.¹³ RS in pre-registration nursing and midwifery education supports student resilience, personal and professional development.¹⁴

Research underscores the efficacy of RS in addressing the multifaceted needs of nursing and midwifery students.¹¹ Studies have shown that RS promotes deep learning, self-awareness, and professional growth, equipping students with essential skills such as reflection, problem-solving, and effective communication.¹¹ Moreover, RS fosters an environment characterised by humanistic principles of non-judgment, empathy, and trust, facilitating meaningful engagement between students and their Practice Assessors, Supervisors and Educators.^{10,6}

Approximately 12% of nursing students in England fail to complete degrees and 18% of nurses have left NHS hospital and community settings within two years.¹⁶ Broad range of complicated factors impact on student attrition¹⁵ some of which may be represented in Figure 1.

The suitability of RS for students stems from its holistic approach to addressing the complex factors influencing attrition. The qualitative findings from the NSAS project highlight prevalent student themes, including anxiety related to placement allocation, workload management, communication issues, employment prospects, and family commitments.⁹ RS emerges as a vital support mechanism in addressing these concerns, offering students a safe space for reflection, guidance, and emotional support.

Figure 1: NSAS Project findings:

Restorative Supervision, underpinned by the A-EQUIP model,⁵ emphasises restorative practices to enhance the quality of care. Its application in supporting nursing and midwifery students has shown promising results, with evidence indicating improved student progression and reduced attrition rates.⁹ This is especially crucial in light of the challenges facing the healthcare workforce, as highlighted by the NHS National Staff Survey (2023).¹

The RS approach aligns with the recommendations set forth by the Department of Health and Social Care (DHSC) Report (2022),¹⁶ aiming to increase the number of nurses in the NHS by 50,000 and train an additional 68,000 to 75,000 nurses in England by 2024. With attrition rates among nursing students at approximately 33%, and a significant proportion of nurses leaving NHS settings within two years of qualification, there is an urgent need for targeted support mechanisms.

Using RS to support students before they become registered professionals has been proven to support student's progression and reduce attrition rates with their academic studies. One particular model is the A-EQUIP ⁵ which has a particular focus on a restorative practice to enhance quality of care. Group supervision in pre-registration nursing education supports student resilience, personal and professional development.¹⁴ RS promotes deep learning, personal self-awareness, professional growth, respect and trust. Building skills of reflection, problem-solving and communication.¹⁴

The DHSC Report (2022)¹⁶ recommendation should be achieved via; nursing degrees, apprenticeships, conversion courses and return to practice. The Government reports to be on track to achieve targets to attract extra nurses to help with the COVID-19 backlog and replace people leaving the NHS.

There is limited research on specific support needs of nursing students. RS could provide one approach, whilst enhancing student experience.

Through group supervision, students not only gain support from academic staff but also learn from their peers, fostering a sense of community and collaboration.

Conclusion.

As RS and the A-EQUIP model continues to support the national healthcare workforce, the approach implemented by the University of Hull sets a precedent for other institutions seeking innovative strategies to support their nursing and midwifery students. By nurturing a culture of care, resilience, and professional development, RS not only enhances the student experience but also strengthens the foundation of the healthcare workforce for generations to come. In the journey towards a healthier, more sustainable healthcare system, RS and the A-EQUIP model stands as a beacon of hope, illuminating the path towards a brighter future for nursing and midwifery education.

The adoption of the RS model in healthcare education represents a significant step towards addressing the challenges faced by students and the broader workforce. By prioritising student wellbeing and professional development, we are not only nurturing the next generation of healthcare professionals but also contributing to the resilience and sustainability of the healthcare system as a whole.

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