Learning in Practice: What are the Perceptions of Undergraduate Pre-Registration Nursing Students and Mentors?

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Executive Summary

The introduction of new standards for pre-registration nursing programmes by the Nursing and Midwifery Council (NMC) heralds a change in how students are supervised and assessed in the practice learning environment (NMC 2018a, NMC 2018b, NMC 2018c). This project was undertaken to explore the literature regarding pre-registration (undergraduate) nursing students' perceptions of learning in this environment. This literature review also explored mentors' perceptions of facilitating learning for pre-registration (undergraduate) nursing students in the practice learning environment. Cognisance was then taken of undergraduate qualitative and quantitative survey data gathered by NHS Education for Scotland (NES) to ascertain any emergent key themes. These key themes were then aligned with the literature reviewed to address the over-arching project aim and objectives.

It became apparent that pre-registration (undergraduate) nursing students and mentors considered practice learning, and the support of practice learning, in a particular way depending on extrinsic and intrinsic factors, represented by the key themes which emerged as part of this project. These key emergent themes included; the important of a supportive student and mentor relationship; students’ sense of belonging; time for mentors to undertake the mentoring role; the need for mentor preparation and continuing professional development to support effective engagement with the mentoring role. It also became clear that key mentor attributes were imperative if wishing to enhance the efficacy of the mentor-student relationship and motivate students to learn, question, challenge and problem solve in the practice environment. These mentor attributes included; the ability to foster a sense of belonging when supporting students; being able to encourage students to view themselves as part of the team; competence in both practice and mentoring and enthusiasm and commitment for the mentor role.

Taking account of the evidence generated, recommendations from this project include:

1. NMC (2018c) continue to highlight the need for preparation for practice supervisor and assessor roles. To this end national guidelines for preparation to undertake these roles is recommended to ensure consistency across practice learning environments.
2. A key finding is the importance of time to support and assess students. Strategic workforce planning, currently ongoing, must incorporate consideration of the time required for meaningful supervision, feedback and assessment in the practice learning environment.
3. The learning culture must foster a sense of belonging to maximise learning and student support.
4. The implementation of new roles as part of NMC (2018c) introduces new opportunities to increase the objectivity, and potentially the robustness, of practice learning assessment. However, it similarly introduces the risk of a more fragmented approach to supervision and assessment. To this end it is imperative that clear national guidance is provided to support collaborative working across all practice learning supervision and assessment roles.
5. Taking account of the risk of fragmentation, and the importance attributed to the student and mentor relationship, any national guidance relating to practice learning supervision and assessment roles, must take cognisance of potential risks to this relationship.
6. As ‘time to mentor’ is a recurrent theme across all data, it is recommended that those undertaking supervision and assessment in practice are afforded protected time to undertake this role
7. Future research is required following the introduction of these new roles to ascertain the perspectives of both students and those responsible for supervision and assessment in practice.
Section 1: Introduction

1.1 – Background

This is a time of change for nursing education, mainly as a consequence of the ongoing work by the Nursing and Midwifery Council (NMC) to review and revise the future of undergraduate and post-graduate nursing education in the United Kingdom (UK) with the publication of new standards (NMC 2018a, NMC 2018b, NMC 2018c). A key part of nursing education is recognised to be the supervision, support and assessment of learners in the practice learning environment. As a consequence, gaining a greater understanding of how pre-registration (undergraduate) nursing students learn in the practice learning environment can potentially contribute to the development of new pre-registration nursing programmes and supervision and assessment nationally.

1.2 – Project Plan

This literature review, which will also incorporate a review of pre-registration undergraduate survey data gathered by NHS Education for Scotland (NES), will build on the national work of projects, both of which were previously undertaken on behalf of NES. These provide a starting point for the exploration of how pre-registration (undergraduate) nursing students learn, and are supported to learn, in the practice learning environment from the perspectives of these stakeholders (McGuiness and Ward 2015; Pollock et al. 2016).

1.3 Project Aim and Objectives

Project Aim: Learning in Practice - What are the perceptions of undergraduate pre-registration nursing students and mentors?

Project Objectives

1. Undertake a review of literature exploring pre-registration (undergraduate) nursing students’ perceptions of learning in the practice learning environment.

2. Undertake a review of literature exploring mentors’ perceptions of facilitating learning for pre-registration (undergraduate) nursing students in the practice learning environment.
3. Review national statistical data, gathered by NES, which reports on the pre-registration (undergraduate) student and mentor experiences of supporting learning in the practice learning environment.

4. Synthesise all data gathered to create a contemporary, context-specific evidence based account of how pre-registration (undergraduate) nursing student learning takes place in the practice learning environment, from the perspectives of both students and mentors.

5. Generate recommendations for the facilitation/support of pre-registration (undergraduate) nursing student learning in the practice learning environment, pre-registration programme development and future research.

1.4 Methods and Project Outcomes

A critical review of existing literature was undertaken. This was then combined with consideration of national data gathered by NES as part of the annual pre-registration programme performance management review process. Thematic analysis to identify key themes and inclusion of qualitative student and mentor narrative also took place.

This literature review, combined with consideration of statistical survey data has helped to identify the foundations for a piece of future empirical work to examine the opportunities and limitations for students learning in the practice learning environment. This is pertinent as much emphasis is placed on the quality of the learning environment in the new NMC (2018c) Standards.

An examination from the perspective of students, and mentors, about what facilitates and inhibits student learning within the Scottish context can help shape mentor (practice supervisor/assessor) and institution support for enhanced learning opportunities within the practice learning environment. This literature review enables the gaps in knowledge to be identified and will support future development of an empirical study research question, design and methods. The outcomes of this project are detailed below:

1. Synthesise all data gathered to create a contemporary, context-specific evidence based account of how pre-registration (undergraduate) nursing students learn in the practice learning environment, from the perspectives of both students and mentors.
2. Generate recommendations for the facilitation and support of pre-registration (undergraduate) nursing student learning in the practice learning environment and for future research.

3. This work also has the potential to inform the pre-registration work of the Future Nurse & Midwife Programme Board
Section 2: Sourcing the Literature

2.1 Search Strategy

Sourcing appropriate literature was planned to reflect a focus on practice learning, mentorship and nursing students, in line with the project aim and objectives. This primarily involved a search for professional literature using the recognised electronic professional database systems including CINAHL and MEDLINE as part of EBSCO Host. These sources were selected as they are recognised as having credibility as a repository for professional literature (Machi & McEvoy 2016). Employing the key search terms of practice learning, mentoring, nursing and students, combined with appropriate Boolean operators, and the application of limiters, led to generation of 172 abstracts aligned with these key words. It was recognised that this was a crucial part of the search strategy as, a robust approach to this via the advanced search option, can reduce the risk of missing key literature (Machi & McEvoy 2016).

Following retrieval, the 172 abstracts were then screened. Firstly, duplicates were removed and, thereafter, the remaining 151 abstracts were screened for applicability and relevance in terms of the student and mentor experience of practice learning – and support for this. A broad review of these abstracts led to the exclusion of 64; this process involved a review of the abstracts electronically to identify literature of potential interest in advance of full text download. This is referred to by Machi & McEvoy (2016; p71) as “skimming” and is an accepted search technique. The remaining 87 results were subject to full text download to support a more in-depth review. The PRISMA flow diagram, detailed as part of table 1, outlines the complete process which was undertaken as part of this search to delineate relevant literature for inclusion.

It is important to note that additional professional, regulatory and governmental literature, deemed to be of relevance, was also sourced electronically to complete this search and to ensure compilation of appropriate documentary evidence to support the generation of this report.
Table 1 – PRISMA Flow Representation of the Search Strategy

- Records identified through database searching (n=172)
  - Additional records identified through other sources (n=0)
  - Records after duplicates removed (n=151)
  - Records screened (n=151)
    - Records excluded (n=64)
      - Full-text articles excluded (n=55)
        - Reasons:
          - Limited focus on student and/or mentor experience (n=18)
          - Not transferable/aligned sufficiently with UK context (n=20)
          - ExTRANsion to requirements (n=17)
  - Full-text articles assessed for eligibility (n=87)
    - Studies included in the review (n=32)
3.1 Defining the Mentor Role

The term mentor is widely recognised as stemming from Greek mythology and the relatively well known mythological tale of support and protection in the absence of parental guidance (Fields 1991, Colley 2002, Ragins & Kram 2007, Vance & Nickitas 2014). More contemporary literature discusses mentorship as being grounded in the development of a supportive bond between two or more people, where the aim lies with the provision of guidance and learning as part of this relationship (Gibbons 2016). Mentoring is now most often discussed in the context of the workplace; there is recognition from many authors, including nursing’s professional regulatory body, that the nature of the mentor and student relationship is crucial if wishing to influence learning in this context (NMC 2004, NMC 2008, Billings 2008, NMC 2010, Vance & Nickitas 2014, Royal College of Nursing (RCN) 2015a, Clutterbuck 2016).

It is clear that there is a focus on the importance of the provision of guidance and learning as central to the mentor relationship, therefore this review of the literature focusses on both the student and mentors’ perceptions of learning in practice. This is particularly pertinent in light of the publication of the Nursing and Midwifery Councils (NMC) Standards Framework for Nursing and Midwifery Education (NMC 2018a).

The NMC (2008; p45) define a mentor as someone who “facilitates learning and supervises and assesses students in a practice setting”. Clutterbuck (2016/7), a leading authority on mentorship and coaching in the workplace, contextualises the role of a mentor more broadly when stating “Mentoring involves primarily listening with empathy, sharing experience (usually mutually), professional friendship, developing insight through reflection, being a sounding board and encouraging”. It is therefore clear that the role is established to enable the provision of support, teaching and guidance, most often in the workplace. Mentorship and mentoring is not always defined in a positive way however; during the 1980s Dr Lu Ann Darling engaged in commentary around the role of mentors, highlighting that not all who engage with the role do so in a positive way however; during the 1980s Dr Lu Ann Darling engaged in commentary around the role of mentors, highlighting that not all who engage with the role do so in a positive way (Darling 1986a, 1986b, 1986c). Darling (1986a; p29) identified and labelled approaches to mentoring which she described as being more negative than positive including; “avoiders, dumpers, blockers and destroyers”, traits which are not reflective of the positive definitions of mentorship previously referred to. This propensity for less than desirable approaches to mentorship lends weight to existing approaches to mentor preparation, advocated in nursing, as a consequence of NMC (2008) Standards to Support Learning and Assessment in Practice (SLAIP), where the aim is to prepare registered nurse to engage more effectively and positively with this role.
Historically, mentorship preparation varied greatly from one Higher Education Institution (HEI) to another. Prior to the transition to higher education, preparation to mentor was fragmented, frequently being delivered less formally via ad hoc study days. The publication of SLAIP (NMC 2006/2008) takes cognisance of these previous, somewhat fragmented, approaches to mentorship preparation and stipulates a contemporary approach to the provision of education and preparation for the mentor role. This significantly revised approach was fully implemented from September 2008. In the Scottish context, NHS Education for Scotland (NES) developed supplementary guidance in the form of the National Approach to Mentor Preparation for Nurses and Midwives: Core Curriculum Framework (NES 2007); a 2nd edition was subsequently published (NES 2013).

This educational framework is closely aligned to SLAIP (NMC 2006/2008) and, not only reflects these standards, but provides a national core educational curriculum for the preparation of mentors in Scotland. Stipulated within both NMC and NES documentation is the provision of the following opportunities for those learning to mentor including; five protected study days; the option of a further 5 unprotected study days; relevant learning in both academic and practice settings; the opportunity to mentor a student under the supervision of a supervising mentor and the provision of support to critically reflect on these learning experiences (NMC 2006/2008). It is the requirement to mentor a student under supervision when learning the role which led to the delineation of the supervising mentor role as different from that of any other outlined as part of the NMC (2008) SLAIP developmental framework. Consequently, this role was labelled accordingly and the term ‘supervising mentor’ was established in Scotland by NES (2007, 2013) to reflect the supervisory capacity of this role.
Ensuring students are fit for practice is the foundation upon which implementation of the mentor role in undergraduate nursing education is based (NMC 2006/2008, Stuart 2008, NMC 2010, NES 2013, and RCN 2016b). Andrews et al (2010) consider implementation of NMC (2008) SLAIP when conducting a narrative review of the development of the mentor role in the UK from a historical perspective. They highlight that more formal mentorship in nursing began in 1986 as a result of a directive from the English National Board (ENB). Andrews et al (2010; p252) discuss the way in which ENBs instruction that “qualified nurses working in the UK should be available in clinical areas to be teachers, mentors or supervisors for student nurses”, not only led to the implementation of more formal practice support for students, but also led to adoption of the term mentor nationally. Foster et al (2015) similarly link a more formal step-change to mentoring students in practice with the implementation of Project 2000, stating that registered nurses were expected to accept mentorship responsibility for students as part of moves to higher education. It is worth noting however that, at this time, and until the implementation of NMC (2006) SLAIP, approaches to mentor preparation were inconsistent nationally. This emphasises the transformation which took place whereby refreshed NMC (2008) SLAIP not only provided a new educational framework for the development of mentors, but also outlined, for the first time, the way registered nurses could progress to become practice teachers and teachers.

The NMC SLAIP standards have now been in existence since 2006 and in 2018 the NMC published new standards for the supervision and assessment of students in practice learning. These will supersede the SLAIP and be applicable to all NMC approved programmes going forward. The term mentor and practice teacher will cease to exist and be replaced with practice supervisor, practice assessor and academic assessor (NMC 2018a, NMC 2018b, NMC 2018c).

Taking account of the literature, and the history of the mentor role in the context of nursing, it is clear that contemporary evidence places more emphasis on the role of all registered nurses in supporting the learning, teaching and assessment of the undergraduate pre-registration student population in practice. Duffy et al (2016) considered this stance as part of their debate paper, entitled ‘Mentors in Waiting’. Published in 2016 as work to develop the new standards for pre-registration nursing was taking place, this paper considered NMC (2008) SLAIP and the mentor role. In particular, Duffy et al (2016) reviewed the stage 1 mentor role whereby all nurses, prior to undertaking mentorship preparation were, and still are, expected to support the learning of others in practice. To enlighten this discussion Duffy et al (2016) conducted a mapping exercise between NMC (2010) Standards to support pre-registration nursing.
education and NMC (2008) SLAIP, clearly demonstrating that those who exited pre-registration nursing programmes at that time did in fact learn how to support the learning of others as part of their undergraduate pre-registration education programme. This debate, combined with the requirements of The Code (NMC 2018d), serves to confirm therefore that all registered nurses should indeed be ready to support others to learn at the point of registration. Going forward, it could also be argued that NMC (2018c) Standards for student supervision and assessment actually reflect this stance with the introduction of separate practice supervisor and assessor roles.

3.3 Learning in Practice – Students and Mentors

The development of mentorship as a core element of undergraduate pre-registration nursing education, and expectations of the role generally, has been well documented over the years, confirming the pivotal nature of the role in the context of nursing and the support of students in practice (NMC 2004, NMC 2006/2008, NMC 2010, Andrews et al 2010).

The findings of a qualitative study conducted by Nettleton & Bray (2008) suggest that mentors feel; most valued by students; effectiveness in the mentor role is reliant on its delivery in practice by each mentor; having enthusiasm for the role is key; mentors should be selected taking account of their enthusiasm for the role. However, this study also highlighted that having time for the role is not always possible. A key finding from students who participated in this study was that, similar to mentors, they felt being a mentor should be a choice rather than an expectation. Nettleton & Bray (2008) concluded that existing approaches to mentorship required revision to maximise mentor role impact in practice. It is perhaps interesting that presentation of these findings, calling for change, coincided with the implementation of a new approach to mentorship in the form of NMC (2008) SLAIP. Interestingly, with the introduction of the new NMC (2018c) standards for supervision and assessment, the NMC have clearly identified that all staff should be involved in the supervision and assessment process and that this is an expectation rather than a choice.

More contemporary research confirms the central role of mentorship in nursing education. McIntosh et al (2014) conducted a mixed methods study to investigate mentors’ perceptions and experiences of supporting students in practice. Adopting a descriptive exploratory design, and accessing a convenience sample of mentors from one NHS trust in England, McIntosh et al (2014) distributed questionnaires and conducted 2 focus groups with a selection of the questionnaire respondents (focus group participation n=13). Although it could be argued that there are limitations in terms of generalisability when conducting small single site studies, it is
worthy of note that McIntosh et al (2014) achieved a 47% questionnaire response rate (n=61) and then sought to augment this data with focus groups. The most prevalent findings from this mixed method study were; mentors’ perceptions of the importance of supporting students to attain clinical skills and mentors’ recognition of their role in supporting students to develop a sense of belonging when working with the clinical team.

Developing a sense of belonging and the importance of a supportive environment is articulated in several studies as an important aspect of the students’ experience in practice learning. Jack et al. (2018) undertook a mixed methods approach combining both qualitative data from interviews and a large quantitative survey of 1425 student nurses. Of the 1425 students who undertook the survey, 22 participated through narrative telephone interviews designed to explore their perceptions and learning experiences. Although students had a generally positive perception of their practice learning experience, the data that was extrapolated describes a range of experiences overall. Jack et al. (2018) focus on the data pertinent to the practice learning environment in which the thematic analysis of the data highlighted four dominant themes: being used as a pair of hands; feeling ignored and unsupported; importance of an effective mentor; and oppressive nursing cultural practices. The data suggests that an effective mentor, who is supportive and allows students to feel valued and respected for their contribution, is central to students having a positive experience in practice learning environment.

Results from the work undertaken by Thomson et al. (2017) regarding students’ experiences of the mentor role in the final placement also made reference to the importance of feeling supported and experiencing a sense of belonging. They undertook a phenomenological study to explore the ‘lived experience’ of students’ in practice learning utilising unstructured interviews to fully capture the student’s experiences and perceptions of mentorship. Although a small sample (n=7) results from the data analysis highlighted five main themes of which support and belongingness were two. In addition, their conclusions align with earlier work where similar findings were cited (O’Luanaigh 2015).

The importance of an effective mentor, a theme identified from the work of Jack et al. (2018), aligns with previous studies conducted by Huybrecht et al (2011; p274) who conducted a mixed methods study designed to explore “the role, characteristics and self-perceptions of mentors”. The research design focused primarily on the distribution of a validated questionnaire to 181 Belgian mentors, leading to a 62% (n=112) response rate. Although Huybrecht et al (2011) state that follow-up semi-structured interviews took place, a limitation when reporting this research is the absence of information relating to how many interviews
actually took place. Furthermore, there is little information provided to explain the analysis of this qualitative and quantitative data and the focus of the interviews is also relatively unclear. Huybrecht et al (2011) only state that mentors were able to express opinions about mentoring. Despite these limitations, the findings from this Belgian study highlight issues which, it could be argued, are transferable to, or have historical resonance within the UK context.

Although there was limited information regarding the role and characteristics from the work of Huybrecht et al. (2011), key attributes associated with ‘good’ mentoring are discussed in several research studies from both the student and mentor perspective. Gidman et al. (2011) conducted a mixed methods study using both a questionnaire and follow up focus groups to explore students’ perceptions and experiences regarding support in practice learning. The sample consisted of adult undergraduate pre-registration nursing students at both the beginning of their programme, referred to as starters, (n=174) and finisher students, those in the final three months of their programme (n=98). The qualitative themes from the questionnaire informed the development of the interview schedule for the focus groups. Six recurrent themes emerged from the focus groups with students clearly expecting their mentors to help them learn and develop throughout their practice learning experience. The importance of mentors’ key attributes was evident as having a major impact on the quality of the mentorship experienced. The importance of enthusiasm and commitment to supporting students was paramount however, students also recognised that time was a major constraint for mentors and lack of time had an unfavourable effect on the quality of the mentorship.

Jansson and Ene (2016) further allude to the key attributes required to undertake the mentor role, referred to as a preceptor in this study as it was undertaken in Sweden. They undertook a cross sectional design study from a sample of 269 student evaluations. These evaluations generated both quantitative and qualitative data from nursing students on their practice learning experience over a year long period. From the analysis of the qualitative data student comments regarding their learning in practice alluded to four categories: continuity of learning; independence and responsibility; time and competence and attitudes of the staff. Behaviours of preceptors to facilitate the learning process were seen as central to an effective preceptor/student relationship. This concurs with work from other studies where the establishment of a trusting relationship between student and supervisor supports and motivates students to learn, question, challenge and problem solve (Huybrecht et al. 2011; Andersson and Edberg, 2012; Henderson and Eaton, 2013; Rylance et al. 2017; Elliot 2017; Adamson et al. 2018).
Time to be a supportive mentor and for students to learn is a consistent theme eluded to in the literature by both mentors and students and was a key theme in the studies undertaken by a number of authors (Gidman et al. 2011; Jansson and Ene, 2016; RCN 2016b; Rylance et al. 2017). Having the opportunity to learn without the pressure of time was alluded to by students in the study by Jansson and Ene (2016) where students felt that there was little time for questions due to the time constraints their preceptors were under. Rylance et al. (2017) concur that time was a major source of tension in the role of mentor. This related to the responsibilities of the role, and finding time for this, including completing student assessment paperwork, or teaching and supervising students.

Aligning with previous approaches to mentoring in the UK, Huybrecht et al (2011) identified that although less than half of those participating had been prepared to mentor (n=51), almost all (98%) recognised the importance of the mentoring role. Huybrecht et al’s (2011) study also highlighted additional facts from the perspective of those undertaking the mentor role including; mentors’ perception of the importance giving feedback to students, and the impact this has on student learning. Mentors also recognised that undertaking the role contributed to their continuing professional development (CPD), emphasising the reciprocal learning which can stem from the mentor role.

Although geographically positioned in Australia, the research of Halcomb et al (2012) clearly aligns with the work of Huybrecht et al (2011). Adopting a qualitative approach, Halcomb et al (2012) recruited 12 practice nurses with experience of mentoring undergraduate pre-registration nursing students, the aim being to explore their experiences of the mentor role. A key finding which stemmed from this research was the recognition that reciprocal benefits emerged from engagement with the mentor role. Indeed, Halcomb et al (2012; p527) state that participants ‘acknowledged the opportunity to further their own professional development through the mentoring of undergraduate students’ and that ‘they appreciated that students’ knowledge may be more contemporary than their own…’.

Given their role at the forefront of student support and learning, it is unsurprising that mentors are also integral to ensuring that students are fit for practice, both as they progress through nursing education and at the point of registration. It is worth considering that recognition of the complex nature of contemporary mentorship practice in the UK context spurred the RCN (2016a) to commission the RCN Mentorship Project 2015– From Today’s Support in Practice to Tomorrow’s Vision for Excellence. This rapid review of the evidence, undertaken to investigate the value attributed to mentorship, and also to ascertain how mentorship can continue to be supported and enhanced as part of undergraduate pre-registration nursing
education, led to the publication of a follow-up findings report (RCN 2016b). Conclusions include; an acknowledgement of the crucial nature of “good mentorship” (RCN 2016b; p5), the importance of investing in the mentor role, recognition of the context within which mentorship takes place and also that there are varied approaches to the provision of mentorship.

It is also worthy of note that RCN (2016b) stipulate that, as a profession, nursing has a collective responsibility to safeguard fitness to practice and public safety. They link this to mentorship when stating “As a profession, nurses must accept responsibility for assuring the competence of its workforce to protect public safety, and the mentor plays a central role as gatekeeper in this process” (RCN 2016b; p5). The term “gatekeeper” is perhaps most telling, emphasising that mentors are, in many ways, the last line of defence in ensuring the competence of students and, effectively, the future nursing workforce. This serves to confirm that the way in which registrants are prepared for the role of gatekeeper (mentor) must be afforded appropriate scrutiny. It could therefore be argued that engaging in regular review and evaluation of mentorship, and the programmes and support mechanisms in place as part of this preparation, is pivotal to ensuring the effectiveness of these gatekeepers of the nursing workforce.

Again, research conducted previously by Halcomb et al (2012), recognises the role of mentors in the protection and development of the nursing profession. Participants in this study, consisting of practice teachers undertaking the mentor role, highlighted that patience and reassurance were required when supporting pre-registration nursing students in practice. Indeed, Halcomb et al (2012) also highlighted as part of their findings that the mentor role helped these registrants to convey the importance and relevance of the practice teacher role, effectively supporting the development of appropriate knowledge and skills in students.

The importance of the mentor role, and mentors’ perspectives of this, has also been explored as part of international research conducted by Jokelainen et al (2013). Underpinned by a phenomenological methodology this study, involving Finnish (n=22) and British (n=17) mentors explored Finnish and British mentors’ perceptions of mentoring undergraduate pre-registration nursing students whilst in practice. Analysis of focus group data let to the creation of key themes which focused on setting goals for learning, supporting and encouraging students and providing feedback as the learning journey progressed. However, this study also highlighted mentors’ perception of the importance of preparation for the mentor role. Indeed, this particular finding was potentially most significant as, in Finland, preparation for the mentor role at the time of the research was optional however, in the UK, NMC (2008) SLAIP had been implemented and preparation to mentor was, by then, compulsory. Now, in light of the
publication of the raft of revised NMC standards in 2018, in particular NMC (2018c) Standards for supervision and assessment in practice, it is perhaps interesting to note that a less process driven approach to preparation is being advocated. Indeed, although NMC (2018c) state that HEIs must be able to demonstrate that those who supervise and assess students are appropriately prepared for this role, they no longer provide an educational framework as guidance for this preparation.

Although historical in nature, it remains relevant to consider the work of Spouse in the context of contemporary developments in supervision and assessment in practice. Incorporating a phenomenological approach, Spouse (1996) observed 86 students learning in practice and conducted unstructured interviews with each to explore their experiences of learning in practice with the support of a mentor who, on occasion, were also present for these interviews. The credibility of the research was enhanced as Spouse (1996) provided each participant (and, where applicable, their mentor) with a copy of the transcript to confirm accuracy of interpretation when transcribing audio recordings. The findings of this study identified five aspects of the mentor role in practice including; befriending, planning, collaborating, coaching and sense-making. When considering the new standards, it could be argued that to effectively engage in these activities, those undertaking any supervisory or assessment role in practice must have a desire to engage effectively with the role to provide the optimum student experience.

Shakespeare & Webb (2008) conducted a qualitative exploratory study to explore what informs mentors decision making when assessing student competence, pertinent in light of the new NMC standards (NMC 2018c) which require collaborative decision making on the part of practice assessors/ supervisors and academic assessors. Utilising a conversational analysis approach, outlined by the authors as a way of describing the processes participants use when engaging in social circumstances, Shakespeare & Webb (2008) interviewed both final year nursing students (n=9) and mentors (n=15). A strength of this study design was the intention to sample mentors across the experiential scale; experienced mentors were classified as having mentored three or more students whilst inexperienced mentors were classified as still learning about the role or having mentored two or fewer students. However, as a consequence of convenience sampling, twice as many experienced mentors were recruited (n=10) than inexperienced, detracting from the balance initially sought.

The findings of Shakespeare & Webb’s (2008) study identify that communication between student and mentor supports the development of professional identity. Shakespeare & Webb (2008) not only consider these conversations to be crucial for this, but also identify that these
conversations help to inform mentors decisions about student competence and fitness to practice as a registered nurse. In contemporary mentorship practice it is worth considering the capability of mentors in initiating these conversations, and also their decision-making capability based on interactions with students. To this end the study conducted by O’Luanaigh (2015) is perhaps of interest from a contemporary stance. Focusing on the practice learning experience, O’Luanaigh (2015) purposively sampled 5 final year undergraduate pre-registration nursing students and also conducted a focus group with registered nurses with experience of the mentor role. Adopting a case study approach, O’Luanaigh (2015) sought to understand in what way registered nurses influence the learning of students. A key theme which emerged from this research was that of ‘influencing professional identity development’ (O’Luanaigh 2015; p453). Indeed, O’Luanaigh (2015), much in keeping with the findings of Shakespeare and Webb (2008) highlight the importance of supporting the development of professional identify in students. This, combined with recognition of the importance of conveying a professional image of the nursing profession to students, emphasises the importance of the mentor role in the development of student professionalism generally.

From a more contemporary, but equally valid, perspective, Foster et al (2015) conducted a mixed method single site study, in an English university, to investigate final year students’ perspectives of mentorship. Convenience sampling supported a two-stage research design. Initially, students (n=12) were invited to participate in a focus group to gather preliminary data about their views of mentorship and lecturer support in practice. Stemming from this preliminary data, a questionnaire was developed and disseminated via Survey Monkey to all students in the cohort (n=129). With a response rate of 45%, this questionnaire aimed to investigate student expectations and experiences of mentorship. Questions designed to investigate the way in which the university could enhance mentorship were also included, again pertinent in light of the new NMC standards (NMC 2018a, NMC 2018b, NMC 2018c).

The findings, although not necessarily providing new knowledge of mentorship and student’s expectations of the role, do serve to reaffirm the findings of previous research and contemporary thinking around mentorship. Most students participating in the study (98%) indicated that they felt mentors must be good role models and act in a professional manner. This aligns with the underpinning principles of NMC SLAIP (2008; p16) and the requirement that mentors must “have developed their own knowledge, skills and competency beyond that of registration through continuing professional development”. This study also found that students identified support and encouragement as most important, above assessment and feedback on their practice. It is clear that Clutterbuck’s (2016) definition of a mentor aligns with students’ perspectives in this particular study.
Recognition of the importance attributed to assessment and feedback by students also leads to consideration of potential assessment challenges. To this end research designed to explore challenging assessment situations (Cassidy et al. 2017), support for the failing student (Elliot 2017) and the importance of practice learning assessment and feedback (Thomson et al. 2017) continues to emerge. Previously, the doctoral work of Duffy (2003) has perhaps been recognised nationally as seminal work in the development of the professions’ understanding of the very real risk of failing to fail students who are not fit for practice. As part of more contemporary literature, Adamson et al (2018) undertook an action research project with the aim of enhancing students’ experience of feedback in the practice learning environment. Adopting a purposive approach to sampling across 3 designated sites, Adamson et al (2018) gathered data via interview and focus groups with students, mentors, practice education facilitators (PEFs) and link lecturers. Findings were collated into 3 key themes of; shared responsibility, enablers to feedback and project impact. Perhaps of most interest was the finding that there is a shared responsibility for feedback. Those giving feedback must encourage dialogue with students and provide feedback which is understandable and can be built upon. Conversely, students have a duty to seek feedback on their performance and, furthermore, also must act on the feedback received.

More practical aspects of mentors’ influence on student learning in practice have also been explored in the literature, determining that mentors can influence both student learning and acclimatisation to the practice environment. One such study was conducted by Saarikoski & Leino-Kilpi (2002) and, although more than 15 years old, and based in Finland, this study continues to be of interest for a number of reasons. In particular, the generalisability of this quantitative study was enhanced as a consequence of both the number of participants (n=416) and the multi-site recruitment of students from 4 Finnish nursing colleges. Saarikoski & Leino-Kilpi (2002) determined the presence of a direct correlation between expressing satisfaction with the practice learning experience and students’ perception of a successful student-mentor relationship. Conversely, students who indicated a poor student-mentor relationship were the least satisfied with their practice learning experience. This reaffirms the importance of the student and mentor relationship when supporting learning and assessment in practice. Going forward, it is therefore reasonable to argue that this must be considered in light of the new NMC standards whereby 3 roles have been delineated for the purpose of student support and assessment in practice (NMC 2018a, NMC 2018b, NMC 2018c).

NMC (2008) SLAIP, and the practicalities of adhering to these in practice, have been reviewed and researched by those directly impacted since implementation in 2008 (Andrews et al. 2010,
Walsh 2011, Durham et al 2012, Veeramah 2012, Gray & Brown 2016). Perhaps the most wide ranging work however was undertaken by Robinson et al (2012) on behalf of Kings College London’s National Nursing Research Unit. One of four projects commissioned by NHS London, this study aimed to explore capacity, resource implications and sustainability from the perspective of mentorship in the practice learning environment. Two universities based in London were identified for participation based on both their diverse locations and also the fact that they had post holders with a specific mentorship remit. This study was particularly rigorous as; participants were drawn from across the NHS trusts linked to both HEIs and a variety of care settings were accessed, including in-hospital and primary care. Adding to this, representation from all four fields of nursing practice; adult, child, mental health and learning disability, increased the transferability of findings.

As a consequence of the focus on mentorship capacity, resources and sustainability, the semi-structured interview participants included; senior educationalists, senior nurse managers and placement administrators (n=37). It is reasonable to suggest that a limitation of this study could be the absence of mentors as participants however, in light of the strategic aims of the project it is perhaps unsurprising that mentors were not invited to take part. Findings from this project were wide ranging and included; recognition that delivery of a high standard of mentorship is dependent on the provision of robust educational preparation; establishing links between HEIs and the practice learning environment is key to the successful delivery of mentorship; student evaluation of mentor performance is crucial in determining the quality of mentorship and resourcing mentorship requires commitment and expertise from registered nurses, and those allocating mentors to students. This latter finding was found to be most testing as, frequently since implementation, adhering to NMC (2008) SLAIP has been recognised as challenging on a number of fronts including; ensuring time for the mentor role and balancing this with clinical commitments and priorities which are often at the forefront for those in strategic roles.

Incorporated in the discussion of these findings is consideration of a question frequently asked as part of the contemporary nursing debate; should all nurses be mentors? Robinson et al (2012) suggest that two clear viewpoints exist; movement away from indiscriminate selection of those meeting the broad NMC (2008) criteria of twelve months’ post-registration experience or, alternatively, a sea-change to mentorship as a specialist role. Reasons put forward for this debate include the desire to enhance the quality of mentorship delivery and improving the support for student learning in practice. It is perhaps again pertinent at this juncture however to consider the NMC (2018c) Part 2 Standards for supervision and assessment. These clearly indicate the expectation that all registered nurses will be involved in the supervision of learning which will, in turn, contribute to the overall assessment of the student’s performance in practice.
More recently, and following on from the work of Robinson et al (2012), Duffy et al (2016) published a debate paper exploring the role of registrants and their potential for early involvement with the mentor role at “stage 1”, or registrant status, on the developmental framework (NMC 2008). Entitled ‘Mentors in Waiting’, Duffy et al (2016) propose that registrants be afforded recognition of their ability to contribute to student learning in practice. They suggest that these registrants are in fact an untapped resource, despite the fact that, at stage 1, they are precluded from participation in student assessment until they achieve stage 2 on the developmental framework (NMC 2008). Duffy et al (2016) suggest that adopting this approach would help to demonstrate adherence to both NMC (2008) SLAIP and The Code (NMC 2015), now NMC (2018). In addition, and in keeping with the capacity concerns raised by Robinson et al (2012), Duffy et al (2016) highlight that this approach could ease the burden on existing mentors and better prepare registrants to engage more effectively with mentor preparation when the time comes. Again, this is relevant when considered in the context of the new NMC 2018a, NMC 2018b and NMC 2018c standards as the drive here is to ensure that all registered nurses contribute to student learning, as practice supervisors, and also collaborate with practice and academic assessors to ensure robust assessment for students.

Consideration of this broad range of literature, some of which has been highlighted as seminal, has served to demonstrate the pivotal nature of mentorship in nursing. It is clear that this is multi-faceted and is driven by the desire to, not only protect the public, but also to support and enhance student learning in the practice learning environment. This drive for public safety and student learning ultimately influences the discharge of the mentor role, helping to ensure that the nursing workforce is competent and fit for practice at the point of registration (NMC 2008, 2010, RCN 2016b, NMC 2018a, NMC 2018b, NMC 2018c). Those engaging in the supervision and assessment of students in the practice setting, irrespective of the label attached to this role, must therefore be capable of, and have the desire to, nurture students and support their learning and development culminating in a robust assessment of student performance. It is this process which will help to both quality assure the student experience and ensure public protection.
Section 4: National Practice Learning Data

4.1 Introduction

The nursing workforce is a significant contributor to supporting the NHS in Scotland to meet the ‘Nursing 2030 Vision’ (Scottish Government 2017). Previously, Scottish Government set out the ‘Everyone Matters: 2020 Workforce Vision’ (Scottish Government 2013), which provided a plan for all people in Scotland to be able to live long, healthy lives and to be supported to stay in their own home. Consequently, ‘Setting the Direction for Nursing and Midwifery Education in Scotland’ (Scottish Government 2015), set out a plan for priorities to support HEIs and employers to meet the workforce requirements. This plan aligned with the strategic direction outlined as part of the ‘Nursing 2030 Vision’ (Scottish Government 2017) and the current drivers for health care delivery in Scotland.

NES have, as part of their remit, a responsibility to support education and training of the healthcare workforce in Scotland. This includes undertaking performance management of Scottish Government funded nursing and midwifery programmes, delivered by HEIs nationally. Part of the NES performance management process is the annual distribution of a national final year student, mentor and charge nurse survey. This survey is designed to collect information, specific to the practice learning environment, from the perspectives of each of the aforementioned groups. This online survey is available for a 3-month period and collates both qualitative and quantitative data.

This data has been identified as a means of providing a national context when considered in conjunction with the previous review of practice learning literature, which focuses primarily on the experiences of students and mentors in the practice learning environment. NES Survey data spanning 2011 – 2015 has therefore been collated to extrapolate key themes for consideration alongside the literature review. In addition, to augment these themes, a sample of qualitative data from a narrower timeline of 2015 and 2016 has also been considered. Given the findings from the qualitative survey data that have been analysed, it could be argued that a limitation presents. This is mainly as it would have been beneficial to see if there continues to be similar key themes identified in subsequent years, or has cognisance been taken of the previous findings which has potentially resulted in different themes emerging. Therefore, in terms of this work, each theme from the 2011 – 2015 survey data will be explained and, thereafter, contextualised with reference to student and mentor survey narrative and the qualitative literature sourced as part of this literature review.
4.2 Quantitative Data Themes: NES Surveys 2011 - 2015

NES 2011 – 2015 survey quantitative data theming served to highlight specific aspects of the practice learning experience which were considered in a positive way by students. These included:

- Timely allocation of mentor
- Academic/clinical staff linking theory with practice
- Being supported to meet practice learning outcomes
- Objective assessments from mentors
- Good support generally from other team members
- Very good standard of holistic/ethical care
- Opportunities to work with other professionals
- Opportunities to use a range of communication skills

Conversely, students identified specific areas which could be enhanced or further developed to improve the practice learning experience including:

- Effective team management in the practice learning environment
- Ensuring good communication with those who have a reasonable adjustment requirement
- Being supported to care for people from diverse backgrounds
- Support to practice and refine numerical calculations
- Improved support from the University when in the practice learning environment
- Opportunities to discuss learning needs within 48hrs of arrival in the practice learning environment
- Opportunities to access learning resources whilst in practice

4.3 Qualitative Data Themes: NES Surveys 2015 - 2016

Qualitative data theming proved to be insightful as, in some instances, there was correlation with the qualitative evidence generated from the literature review. The key themes generated from the qualitative comments of the NES surveys from students and mentors centred around; the importance of a supportive student and mentor relationship; time to undertake the mentoring role; the need for preparation and continuing professional development to support effective engagement with the mentoring role.
4.4 NES Survey Themes and the Literature

A review of NES quantitative and qualitative survey data, in tandem with the previously undertaken literature review, highlighted that correlations existed across all data. The following themes have therefore been highlighted for discussion as they emerged as the most prevalent as part of this over-arching review.

4.4.1 Supportive Student and Mentor Relationship

Students commented on the benefits of learning in practice and the perceived attitude of mentors towards students. Many commented on the importance of having a mentor who is supportive and can help them to achieve their learning outcomes. However, although most mentors were considered to be supportive, it was suggested as part of the qualitative survey data by one student that some ‘do not seem keen to help support students’. The influence of mentors can therefore be perceived in either a positive or negative way and this seems to have an impact on the learning experience of the pre-registration nursing students.

Although there are various comments about positive and negative practice learning experiences involving mentors, this aspect is not straightforward. There is an implication within the survey data that the student experience relates to the support and effort made by the mentor however, there is no direct mention of the necessary attributes which would enhance the building of this ‘relationship’. Similarly, survey data from mentors suggests that they recognise the importance of being ‘enthusiastic and encouraging’ towards students however, also highlight the need for the student to engage effectively with the practice learning team and to reciprocate these behaviours.

Survey data also indicates that any perceived lack of relationship building and communication can be a barrier to appropriate student learning and effective mentor support. This correlates with the findings from the literature review wherein the importance of a good student mentor relationship, and building a sense of belonging, has been found to be central to the student learning experience in the practice learning environment (Huybrecht et al. 2011; Andersson and Edberg, 2012; Henderson and Eaton, 2013; Rylance et al. 2017; Elliot 2017; Adamson et al. 2018).

The ability for the mentor and student to communicate freely and share feedback regarding experiences is of importance to the assessment process. Pollock et al. (2016), as part of a project exploring how mentors use feedback on student performance to inform practice
assessment, suggest that a *therapeutic alliance* between the student and educator can be a supportive mechanism which can facilitate positive learning conversations. Adamson et al (2018) also link this with creating a shared responsibility for learning.

### 4.4.2 Time to Mentor

Comments within the NES qualitative survey data appear to suggest that mentors are aware of the benefits which can stem from building a supportive relationship with students however, they also comment that this is only possible when mentors have the capacity to spend sufficient time with students; ‘*The ability just to have quality time to spend with the student without the continual need to stop as the needs of the patients in ward area are high due to reduced staffing and pressures.*’

Similarly, student comments are also reflective of this; ‘*staff quite simply do not always have the time to devote to students’ development*’. A number of students also expressed the need for protected time to enhance the practice learning experience. This acknowledgement of a lack of time, and the perceived impact of this on the student learning experience, is supported by evidence generated from the literature review (Gidman et al. 2011; Jansson and Ene, 2016; RCN 2016b; Rylance et al. 2017).

### 4.4.3 Mentor Education

Preparation of mentors to undertake the role emerged from the literature and this correlates with the qualitative comments from the NES survey data. The impact on the quality of mentorship experienced by students in the practice learning environment was clearly aligned to the importance of mentors’ having key attributes and appropriate educational preparation (Huybrecht et al (2011); Jokelainen et al (2013); Foster et al (2015); RCN (2016b)).

The NES qualitative data highlighted the concerns of one student, who highlighted their perception of the need for ‘*vetting*’ of mentors. This student questioned how frequently mentors received skills and knowledge updates, with a particular comment about the effectiveness of teaching in practice when mentors were ‘*not up to date and extremely inhospitable to students*’. The importance of the student-mentor relationship is also perhaps explained in the following student’s feedback when stating; ‘*Ultimately I feel the mentors on placement are the ones who either make it a valuable or wasted learning experience so I feel mentors should be monitored more closely and also should be more aware of what things we learn about in each year of university so they know what we should be capable of.*’ This could be linked with how mentors are taught to give feedback to students. Again, this correlates with
the project by Pollock et al. (2016), whereby it is advocated that the mentor considers the way in which feedback is delivered and the impact of this on the student experience.

Within the reviewed NES survey data, a significant number of students and midwives (n=146) requested that a supervisory framework be used to ensure mentors were adequately educated to improve students’ practice learning experience. This is pertinent as, despite a national approach to mentor preparation, it would seem that students perceive there to be a variation in mentor preparation and subsequent supervision. It is important to consider this in light of the introduction of the new NMC (2018c) *Standards for student supervision and assessment*. Here, it is advocated that all registered nurses will contribute to student learning, meaning that approaches to selection, preparation and monitoring of supervision and assessment in practice will now change. As a consequence, it could be suggested that students may question the ‘vetting’ of those responsible for student supervision and assessment going forward. Interestingly however, Duffy et al (2016) proposed that approaches similar to those advocated as part of the new NMC (2018c) standards should be implemented more effectively as part of the stage 1 mentor role from the previous NMC (2008) Standards to support learning and assessment in practice.

### 4.4.4 HEI and Practice Partnership Working

Aligned with the student-mentor relationship is the crucial nature of HEI communication and support for practice learning colleagues whilst students are in placement. In addition, HEIs must also ensure that students’ have a point of contact at the university to share any concerns or questions they may have whilst in practice. This tripartite arrangement has historically been recognised as a contributory factor in the student practice learning experience. Student narrative from the NES qualitative data reveals the positive light in which university support is viewed by students; ‘I was always supported and made to feel valued. Lecturers were always approachable and understanding…’ and ‘The staff at the university were just so supportive, decent and open to listening to us’.

However, conversely, an alternative viewpoint is presented as part of the NES qualitative survey data. In particular, two students suggest; ‘there is very little support provided through the university whilst on placement’ and ‘the university liaison lecturers and PEFs/CHEFs should come out to visit students in practice, as they say they will and do not’. This viewpoint is also supported by some mentors who state a desire for greater engagement with university staff; ‘Needs to be more joint working between University staff and mentors…… mentors have no indication if there are concerns re any difficulties with the student’s theory or behaviour out with placement’. Quantitatively, this is perhaps emphasised as part of NES survey data,
mentors (n=191) expressed a desire for university staff to provide more support to the practice learning environment when students were on placement.

The need for greater collaborative working between universities and practice learning environments is supported by the findings of the work conducted by Robinson et al (2012) as part of the King’s Fund National Nursing Research Unit Project. This research study articulated the importance of establishing effective HEI-practice learning environment partnership links, confirming that this could positively impact on both mentorship and student learning.

4.4.5 Student Preparation for Practice

HEIs have a responsibility to prepare students for entering the practice learning environment. The literature reviewed as part of this work supports this stipulation however, also highlights that students must also take personal responsibility for their own preparation. This includes ensuring that they are afforded access to timely mentor support when entering the practice learning environment (McIntosh et al, 2014; Jack et al, 2018). Mentors who participated in the NES survey also recognise the role of students when stating the importance of; ‘Students taking time to do some background reading and/or pre-visit to the area prior to attending placement. Having an idea of the type of environment they are entering into and what challenges may be faced in such environments’.

Preparation for practice is also linked to theory provision as part of nursing education. A recurring theme from the NES survey data highlights the potential for theory-practice gap if practice learning is not considered when delivering the theoretical components of programmes. This is emphasised when as part of this student narrative; ‘I personally feel that we did not receive enough anatomy and physiology education during the course and disease/illness theory was given in an illogical fashion’. It was also noted that students felt that mentors were often ill-prepared as, at times, they did not appear to have adequate knowledge of the curriculum. One student stated; ‘It would be beneficial for mentors to have a better understanding about what the course entails’. This again emphasises the importance of preparation of both students and mentors for the practice learning journey (Gidman et al. 2011; Jansson et al. 2016; RCN 2016b).
Section 5: Conclusion and Recommendations

5.1 – Conclusion

This project was undertaken to consider student and mentor experiences of learning and supporting learning and assessment in practice respectively. As part of this, the mentor role has been explored historically and from a reflective and contemporary perspective that is specific to the nursing profession. The role of the mentor, and the contribution of those registered nurses undertaking this role, has been considered. The contribution of mentors in ensuring that students are appropriately supported and assessed whilst learning in the practice environment has been highlighted. The term mentor has been broadly explored; both generically and from a nursing stance. The increasing knowledge and impact of the mentorship role in nursing, and the rationale for the incorporation of mentorship as part of undergraduate pre-registration nursing education, has also been considered. This has been linked to the profession’s ability to prepare registered nurses who are fit for practice at the point of registration through robust support for learning and the provision of timely assessment and feedback.

The combination of a review of the literature, and the collation of themes and narrative from NES survey data as part of the national performance management data, has served to highlight the crucial nature of the student and mentor relationship in the practice learning environment. This relationship is reliant on preparation and the continuing professional development of those charged with the supervision and assessment of students. However, it is similarly recognised, that students also have a responsibility to engage with learning opportunities and to seek the support and feedback necessary to develop the required skills and knowledge for professional registration. This is of importance when considered in tandem with the expectation that the public will be protected as part of care delivery. In particular, whilst the role of the mentor has been acknowledged with regularity as that of gatekeeper capacity of learning and practical skill building, it is clear that students must experience a sense of belonging alongside a culture of support for this to be considered as meaningful by students in the practice learning context.

5.2 – Recommendations

The future of mentorship, and nursing education, has been reviewed culminating in the publication of the new NMC Standards for pre-registration nursing programmes, including new
standards for the supervision and assessment of learning, as part of these programmes, in practice (NMC 2018a, NMC 2018b, NMC 2018c). Whilst these new standards will direct the future of undergraduate pre-registration nursing education, it is imperative to acknowledge the learning which has taken place as a consequence of NMC (2008) SLAIP and the supervision and assessment of students in practice as part of this. Although new roles have been established including, practice supervisor, practice assessor and academic assessor, many aspects of the mentor role remain pertinent to the education and development of registered nurses who will undertake these new roles.

Taking account of the evidence reviewed and discussed as part of this work, recommendations include:

1. NMC (2018c) continue to highlight the need for preparation for practice supervisor and assessor roles. To this end national guidelines for preparation to undertake these roles is recommended to ensure consistency across practice learning environments.
2. A key finding is the importance of time to support and assess students. Strategic workforce planning, currently ongoing, must incorporate consideration of the time required for meaningful supervision, feedback and assessment in the practice learning environment.
3. The learning culture must foster a sense of belonging to maximise learning and student support.
4. The implementation of new roles as part of NMC (2018c) introduces new opportunities to increase the objectivity, and potentially the robustness, of practice learning assessment. However, it similarly introduces the risk of a more fragmented approach to supervision and assessment. To this end it is imperative that clear national guidance is provided to support collaborative working across all practice learning supervision and assessment roles.
5. Taking account of the risk of fragmentation, and the importance attributed to the student and mentor relationship, any national guidance relating to practice learning supervision and assessment roles, must take cognisance of potential risks to this relationship.
6. As ‘time to mentor’ is a recurrent theme across all data, it is recommended that those undertaking supervision and assessment in practice are afforded protected time to undertake this role.
7. Future research is required following the introduction of these new roles to ascertain the perspectives of both students and those responsible for supervision and assessment in practice.
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