



## Developing a national computerised absence monitoring and management system to reduce nursing student attrition: Evaluation of staff and student perspectives



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### SUMMARY

**Background:** Reducing avoidable nursing student attrition is an international challenge. A pattern of falling attendance is recognised as a frequent precursor to withdrawal from nursing programmes. To address concerns regarding nursing student attrition, the Scottish Government implemented a pilot project for a centralised Computerised Absence Management and Monitoring System (CAMMS). The CAMMS adopted an 'assertive outreach' approach, contacting students every two weeks via colour coded letters to tell them whether their attendance was 'excellent', 'good, but potentially causing concern'; or 'warning; attendance concerns/contact academic staff for support'. This article reports key findings from an evaluation of CAMMS.

**Objectives:** To explore the perceived impact of CAMMS on student support and attrition, from the perspectives of academic and administrative staff and students.

**Design:** Mixed methods evaluation design.

**Settings:** Three large geographically dispersed Schools of Nursing in Scotland.

**Participants:** 83 students; 20 academic staff; and 3 lead administrators.

**Methods:** On-line cohort survey of academic staff and students; structured interviews with lead administrators.

**Results:** Findings reflected a spectrum of negative and positive views of CAMMS. Students who are attending regularly seem pleased that their commitment is recognised. Lecturers who teach larger groups report greater difficulty getting to know students individually and acknowledge the benefit of identifying potential attendance concerns at an early stage. Conversely, some students who received a 'warning' letter were frequently annoyed or irritated, rather than feeling supported. Increased staff workload resulted in negative perceptions and a consequent reluctance to use CAMMS. However, students who were causing concern reported subsequent improvement in attendance.

**Conclusions:** CAMMS has the potential to identify 'at-risk' students at an early stage; however, the system should have flexibility to tailor automatically generated letters in response to individual circumstances, to avoid student frustration. Further research on the longer term impact of CAMMS on attrition rates is warranted.

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### Introduction

Given the growing worldwide shortage of nurses and demographic changes, including an ageing workforce, the need to recruit and importantly, retain suitable candidates for nursing education programmes is clear. The reasons for programme non-completion, or attrition, are multifactorial (Glossop, 2002; O'Donnell, 2011; Pryjmachuk et al., 2009; Rice et al., 2013) and beyond the scope of this article; in a recent integrative review Urwin et al. (2010) highlights the complexity of causative factors for attrition, whilst acknowledging that some attrition is inevitable to maintain professional standards by withdrawing students who cannot achieve required academic or performance levels or who believe they have made the wrong career choice.

Although attrition is an international concern, there are reported inconsistencies in defining and therefore measuring this phenomenon in both the United Kingdom (UK) (Urwin et al., 2010) and the United States of America (USA) (Assessment Technologies Institute, 2013), making comparison of attrition statistics and patterns complex. The same issue of variability influences reporting of attrition across academic disciplines and institutions, for example the UK Higher Education Statistics Agency (2013) reports 'non-continuation following year of entry', rather than completion of degree programme. Recent research from the USA highlights a trend towards increases in nursing attrition rates with Assessment Technologies Institute (ATI) reporting a rate of 28% in 2011 (ATI, 2013). Given the lack of nationally collated data, Urwin et al. (2010) report claims from the Royal College of Nursing in 2006, indicating an average attrition rate of 25% with a disparate spread of 3–65% depending on the institution and method of reporting; the reliability of this figure is, however, questionable. Despite the limited

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availability and comparability of attrition statistics, international figures suggest an average nursing attrition rate of 25–30%, which does not appear to have improved significantly over the last decade. Agreement over a 'good' or 'acceptable' attrition rate is not evident in international literature or policy documents and whilst attrition of other university students may also be problematic, nursing student attrition is costly in terms of financial resources for funders, workforce planning for health care providers, reputational loss for education providers, and emotional cost for students (Department of Health, 2006; Quality Assurance Agency, 2010, 2011; O'Donnell, 2009; Rice et al., 2013); thus considerable attention has been paid by funding bodies and education providers to developing effective approaches to promote retention and reduce attrition, with associated debate around the most effective mechanisms to achieve these goals. This paper will focus on two possible strategies, student support and attendance monitoring, whilst acknowledging that other factors, such as recruitment of appropriate candidates (McCallum et al., 2006; Donaldson et al., 2010) and programme structure (Rice et al., 2013), are also influential.

### *Support Mechanisms to Reduce Attrition*

A significant body of evidence indicates the need for effective support mechanisms to prevent avoidable attrition. Based on their literature review to identify successful interventions to promote student success, DiBartolo and Seldomridge (2005) recommend that support should be available and accessible to all, with all students considered 'at risk', thus no students feel singled out and potentially stigmatised. The importance of support was also highlighted by Young et al. (2007), who, in a mixed methods study, interviewed and surveyed academic staff and students who had withdrawn, comparing views on the reasons for attrition. Findings indicated that whilst staff tended to 'problematize students', students themselves tended to blame withdrawal on their experiences of the university, including insufficient support.

Appropriate forms and potential targeting of student support have been explored in the literature. In a retrospective cohort study of factors affecting attrition, Prymachuk et al. (2009) identified a range of personal and organisational contributors. These authors argue that student support mechanisms should be multi-level, including academic support (during both theory and clinical placement) and non-academic support (financial, health, pastoral), taking account of the need for students to balance university life with home/family/private life. Donaldson et al. (2010) conducted a correlational cohort study designed to test predictors of programme success and found that the most reliable predictor was age and that mature students are more likely to complete; the positive influence of older age on completion was also identified by Prymachuk et al. (2009). On that basis, both studies propose that additional support is required for younger students, and that strategies should therefore be targeted towards this group.

The importance of supportive relationships has been highlighted by several authors. In a review of the American literature on retention, Porter (2008) asserts the value of 'belongingness', indicating that when students feel they are learning in a supportive, caring environment they are less likely to leave; collegiate relationships with academic staff and sessions to enable socialisation between academic staff and peer groups are cited as important strategies for successful retention. Endorsing the importance of this relationship-based dimension of support, Pullen et al. (2009) implemented a Web based peer support forum for their students, concluding that support should come not only from lecturers as peer support is also extremely valuable. This view is endorsed by O'Donnell (2011) in his discussion of findings of the mismatch between expectations and reality for nursing students, which also highlights the importance peers can play in supporting struggling students.

Thus whilst the literature points to the need for a range of supportive mechanisms to be available to all students to reduce attrition, a key

recommendation is that student support should be individualised and tailored to the person depending on their circumstances and need (Prymachuk et al., 2009; Donaldson et al., 2010; O'Donnell, 2011).

Overall, the research highlighted above has identified that students, particularly failing students, express a need for greater support and several authors advocate a range of different support mechanisms; however, there is limited evidence on the most effective forms of support, or even whether additional support impacts on attrition, and further robust comparative research is needed.

### *Monitoring Absence to Reduce Attrition*

Whilst the reasons for attrition are multi-factorial, international studies over the last decade suggests that increasing absence is a common precursor to student withdrawal (Doyle et al., 2007; Jeffreys, 2007; Hampton and Hopkins, 2008; Porter, 2008; O'Donnell, 2009). Doyle et al. (2007) sought to evaluate the effectiveness of a new attendance monitoring system in Ireland, surveying 175 students and demonstrating that deliberate one day absence is very common especially on Mondays and Fridays. A variety of reasons was given, including dissatisfaction with the lecturer, travelling long distances, family commitments, dissatisfaction with the course, and stress. Similar findings were reported in the UK by O'Donnell's (2009, 2011) case study involving 15 participants who had voluntarily withdrawn from pre-registration nursing programmes. O'Donnell reports that students who struggle and subsequently fail academically display disengagement behaviour, such as increasing non-attendance, as a coping strategy which leads to a downward spiral of learning experience involving poor results and ultimately withdrawal.

In general, a commonly proposed solution to reduce attrition is to introduce a system of absence monitoring for early identification of 'at risk' students. Based on a retrospective evaluation of nursing student retention and attrition in the USA, Jeffreys (2007) suggests that academic staff should pro-actively seek out students who are demonstrating poorer attendance at the earliest possible stage, as students in this position often do not try to seek help until the situation is too advanced to salvage. Early detection of problems and appropriate intervention are recommended by several other authors as being pivotal to reducing avoidable attrition (DiBartolo and Seldomridge, 2005; Hampton and Hopkins, 2008; Jeffreys, 2007; Porter, 2008; O'Donnell, 2009); all agree that lecturers should be aware of deterioration in patterns of attendance to help identify students who require support. However, Andrew et al. (2008) conducted interviews with 17 Australian nursing students to investigate whether those who leave in the first semester leave for different reasons than those leaving later. On the basis of their findings, they propose that attendance monitoring would be better targeted at first year/second semester students, rather than from course commencement, as students withdrawing earlier generally left due to wrong career choice, those withdrawing later might have been prevented from doing so if appropriate support had been offered.

Conversely, Lipscombe and Snelling (2010) argue against a philosophy of enforced attendance and its consequent monitoring, believing this is contrary to the pedagogic principles of adult education and that more robust evidence to demonstrate the impact of this strategy is required; the link between attendance and learning is complex and sitting in a classroom does not necessarily equate to effective learning as students may access other forms of learning such as on-line resources, and those sitting in class may not internalise teaching content as intended. However, the argument that enforced attendance may not promote learning is currently moot in the UK, where the Nursing and Midwifery Council (2010) stipulates that all nursing students must complete 2300 hours each in theory and in practise for nurse registration. Whilst the pedagogic rationale for this regulation is not evident, indeed student nurses in several other countries do not have this requirement, UK HEIs have a responsibility to implement selective

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