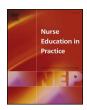
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Midwifery Education in Practice

A qualitative descriptive exploration of the educational and career plans of early career neonatal nurses and midwives: An Irish perspective



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ABSTRACT

The scarcity of appropriately qualified nurses and midwives is a major obstacle in achieving an effective health system. Neonatal nurses and midwives require a high level of skill and education to fulfil their role. It is also an area that sees high staff turnover rates. For this study a descriptive qualitative approach was used to ascertain early career neonatal nurses' and midwives' experiences of further education, their future career plans, and their perceived facilitators and barriers to further education and career progression. After receiving ethical approval, twelve nurses and midwives were recruited across three tertiary level neonatal units in Ireland. Semi structured interviews were carried out and interview transcripts were subsequently analysed using Attride-Stirling's (2001) Thematic Networks to deduce themes from the data. Support and involvement, mentoring, and career progression and retention were the three main themes identified upon analysis of the data. The majority of participants identified definitive career plans but some felt their goals were unachievable in their current workplace. Consequently a large number of participants have plans to leave their employment in neonates and pursue a career in other areas of nursing. Staff appraisals and succession planning programmes may assist early career nurses and midwives in focusing on their individual career goals, leading to a greater uptake of further specialised education and improved retention of neonatal nurses and midwives.

1. Background

Nurses and midwives comprise the largest healthcare professional group in Ireland, therefore shortfalls in numbers can have a substantial impact on health care delivery (Irish Nurses and Midwives Organisation, 2013). In 2016 there were 63, 897 births in the Republic of Ireland (Central Statistics Office, 2016). Approximately 10% of babies born worldwide require admission to the Neonatal Unit for further care (World Health Organisation, 2012). Latest available Irish statistics report a 6% rate of prematurity in Ireland in 2010 (The Economic and Social Research Institute (ESRI) 2012), and with the limits of viability being pushed, alongside advances in technology and medical care, there are no signs of a slowing down in the speciality of Neonatology (Drife, 2011).

Workforce planning seeks to balance the supply and demand for nursing and midwifery staff, to ensure that sufficient numbers of suitably skilled personnel are available to meet the demands of the service (Drake, 2013). In 2008 KPMG, a firm of independent financial auditors in Ireland, carried out an independent review of maternity and gynaecology services in the greater Dublin area. It was recommended that

workforce requirements be considered within a long-term plan to develop the service, and the roles and skills required. In 2006 the WHO devoted their World Health Report to the negative impact that human resources shortages was having on global healthcare. They concluded that the shortage crisis has the potential to worsen over the coming years whilst demand for healthcare services will escalate markedly in all countries; rich and poor. Effective workforce planning is therefore essential to ensure a sufficiently trained staff to meet to respond to changing health care needs (Ono et al., 2013). Technological advances will also see an increased demand for a more specialised workforce (Healy and Fallon, 2014).

Within the context of Irelands ever evolving maternal health service and in particular neonatal nursing, this paper reports on research which examined the current educational and career needs and plans of early career neonatal staff nurses and midwives, assessing their future goals, career plans and perceived barriers and facilitators to same. These areas were focused on as career progression and educational opportunities are known to enhance nurses' and midwives' job satisfaction and organisational commitment, leading to greater retention of staff (Duffield et al., 2014) and ensuring an educated workforce ready to meet future

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Glossary of terms:

ANP Advanced Nurse Practitioner
CNM Clinical Nurse Manager
CMM Clinical Midwife Manager
CNS Clinical Nurse Specialist
CSF Clinical Skills Facilitator
KPMG Independent Financial Auditors

QIS Qualified in Speciality

needs of the service. Early career staff were chosen as the sample for this study as this cohort represents the future projected neonatal nursing workforce.

2. Method

A descriptive qualitative research approach was used to assess the experiences of neonatal nurses and midwives with regard to education and career progression. According to Sandelowski (2000) descriptive qualitative studies have as their goal a comprehensive exploration of a particular set of events in the everyday language of those experiencing those events, allowing for the development of data unique to what each participant talked about (Doody and Noonan, 2013).

3. Sampling

A purposive sample was used to gain understanding, experience and meaning from the most appropriate sample (Ritchie et al., 2014). Three tertiary maternity hospitals within the Republic of Ireland were identified as sites to the sample. The sample was sought from the neonatal unit in each of the three participating hospitals. Ethical approval was sought and approved from each hospital prior to recruitment. The study was advertised via a poster displayed in a staff area of each unit with details of the study and contact details of the researcher. Participation was entirely voluntary with those wishing to participate contacting the researcher directly and in confidence. Due to the multi-site nature of this study a gatekeeper was enlisted at each site to aid recruitment. The inclusion criteria for this study were that participants were:

- 1 Registered nurses and midwives at staff nurse/midwife level
- 2 Practicing five years or less in a neonatal unit
- 3 Working within one of the three selected tertiary maternity hospitals

This method of recruiting participants was successful and sufficient participants per site were recruited to meet data saturation. Twelve participants were recruited in total.

4. Data collection

Semi-structured interviews were used as this allowed the flexibility to probe and seek clarification within each interview (Parahoo, 2014). Interviews were audio recorded and transcribed for analysis. Table 1 shows the interview schedule, developed after a substantive review of the literature, which was used in each interview. Probing questions were also asked and these differed from interview to interview. Two types of probing question were used, these were elaboration and clarification probes. Elaboration probes involved asking participants to be more explicit about something, whilst clarification probes involved asking participants to clarify something they had said.

5. Data analysis

Thematic networks were used to analyse the data. This is an analytical tool used for qualitative research devised by (Attride-Stirling,

2001), and involves the reduction and categorisation of interview data into a more meaningful form and in a way that makes sense of what multiple participants talked about. (see Tables 2and 3).

6. Results

6.1. Demographics

All twelve participants were neonatal nurses or midwives currently working in one of the three Irish tertiary neonatal units with five years or less experience in the area. All participants were female with an age range of 25–33. The backgrounds of the participants varied however as displayed in the Tables 2 and 3.

6.2. Theme 1: support and involvement

Support for career advancement was identified as both a facilitating and inhibiting factor to education and career progression. Availability of funding was identified throughout the interviews as a major barrier to the uptake of educational opportunities. This included funding for short informal study days, as well as for formal academic courses. Only some participants were in the position to self-fund their education, it would appear that motivation to complete a self-funded study is an important factor in people deciding to self-fund, for example,

"courses are expensive. It is expensive to go to study days ... I am selffunding my Masters, which you know, is really something you had to consider before taking it on board. It is something I wanted to do, so I made the commitment to fund that myself." Interview 11

Other participants described how they would be turned off pursuing further education as they felt that they did not have enough money to self-fund. The lack of available funding was linked to the current economic crisis, a period during which pay cuts were imposed on all public sector workers in Ireland, with the resultant outcome that disposable income for something such as course funding was much reduced if not eradicated altogether. A number of participants stating that they did not have the same opportunities as were available in previous times outside of the financial crisis two participants said,

"personally if you didn't have the money or if you had to pay for a lot of these courses it might turn you off a bit ... we don't make that much money." Interview 9

"I suppose in recent times with the financial cutbacks ... people haven't had the chances that they had previously" Interview 6

With or without the availability of funds for study, receiving ring fenced time was talked about. Availability of study leave, and having time to attend courses, conferences and formal educational programmes, was identified as an influencing factor across interviews. Provision of study leave was viewed positively by some, particularly in regards to leave for formal education.

Table 1
Interview schedule.

Welcome and Introductions

What attracted you to Neonatal Nursing?

Tell me about your neonatal experience to date?

What sorts of opportunities for personal and professional development have been available to you since commencing in Neonatal Nursing?

Do you plan on staying in the area?

If no - why not? Is there anything that would make you stay?

What are your future career plans and what do you feel can help you get there? Do you feel additional education will assist, or is necessary, in the progression of your career?

What barriers are there to pursuing further education and career progression? Do you feel any aspects of a Succession Planning programme would be beneficial to your career progression? (i.e. mentoring)

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