

3RD EDITION

GETTING INTO NURSING

A complete guide to applications,
interviews and what it takes to
be a nurse

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Chapter 1 What is nursing today?

Karen Elcock

Chapter aims

The aim of this chapter is to clarify the role of the nurse and how different people view nursing. By the end of this chapter, you will be able to:

- describe the role of the nurse;
- describe the different fields of practice in which nurses work;
- explore the wide variety of places where nursing takes place;
- demonstrate insight into the varied career pathways nurses can follow.

Introduction

One of the most popular questions likely to be posed at interview for a place on a nursing course is: 'What do you think the role of the nurse is?' While you would expect someone applying for a nursing programme to have a very clear idea of what a nurse is and what nurses do, it is surprising how many applicants struggle to answer this question well. Common answers tend to be along the lines of 'caring for patients', 'giving drugs' and 'helping patients get better'. While each of these is true, nursing is so much more than this. This chapter explores the role of the nurse, introduces you to the nursing associate role and helps you to gain a clearer picture of what nurses and nursing associates do and the many career opportunities open to you once you qualify.

Activity 1.1 What is the role of the nurse?

The NHS has an excellent health careers website that has a range of resources including videos about nursing, which will give you some interesting insights. A good place to start is *Roles in Nursing* (www.healthcareers.nhs.uk/explore-roles/nursing/roles-nursing).

- Before you look at the website, jot down what you know about the different nursing roles that you could apply for and then what you know about the different roles you could go on to apply for once qualified.
- Now use the website to identify how many different nursing roles there are.
- Having read about these different roles, which ones interest you most and why?

What is nursing?

You would think this would be an easy question to answer but, believe it or not, even nurses themselves struggle to describe exactly what their role is, partly because the role is so varied, but also because so much of their role is hidden and difficult to quantify.

If you ask the public, you will find there are many different views, and it is likely that when you have told people that you are applying for nursing you will have received responses that reflect these views. Cleary et al. (2018) offers four views:

1. *nurses as women*
2. *nursing as a vocation not a career*
3. *nurses as angels*
4. *the doctor's handmaiden.*

Many of these views of nurses have been influenced by the media. Television programmes such as *No Angels* promoted the naughty-nurse image and this is further promoted in the tabloid press and with the availability of fancy-dress nursing uniforms, which are invariably skimpy. Television series such as *House*, *Grey's Anatomy* and *ER* perpetuate the myth that nurses are just there to serve doctors – a myth some doctors still believe, although programmes such as *Casualty* and *Holby City* have gone some way to correct this. The nurse as ministering angel, typified by the image of Florence Nightingale and the lamp, is also a popular one and promoted in the press. However, the public view of nurses changed significantly in 2020–21 during the Covid-19 pandemic. The pandemic resulted in an increased awareness by the public of what nurses actually do and nurses became labelled as heroes (Morin and Baptiste, 2020). An annual survey by Ipsos MORI (2020) on trusted professions found nursing to be the most trusted of all professions, with 93% of British adults trusting nurses to tell the truth.

You may have noticed that the stereotypes listed above are all female oriented and reflect the fact that the majority of nurses are female with men making up approximately 11% of all nurses and 12.7% of nursing associates on the Nursing and Midwifery Council's register.

Lecturer tip

If you know anyone who is a nurse then talk to them about their role and what nursing is like. What you see on television is not always accurate and talking to real nurses can really help you to decide if this is the career for you.

The definition of nursing most commonly cited was written by Virginia Henderson in the 1960s, but is still widely used today, although note the assumption that a nurse is female!

Definition of nursing

[T]o assist the individual, sick or well, in the performance of those activities contributing to health or its recovery (or to peaceful death) that he would perform unaided if he had the necessary strength, will, or knowledge. And to do this in such a way as to help him gain independence as rapidly as possible. This aspect of her work, this part of her function, she initiates and controls; of this she is master. In addition she helps the patient to carry out the therapeutic plan as initiated by the physician. She also, as a member of a team, helps others as they in turn help her, to plan and carry out the total programme whether it be for the improvement of health, or recovery from illness, or support in death.

(Henderson, 1966, p15)

Henderson's definition is important as not only does it highlight that nursing isn't just about helping people to get better, but also describes the nurse as someone who works with the patient (rather than just 'doing to'), is a team player and certainly isn't just someone who does what he or she is told. This was a fairly advanced view in the 1960s. More importantly, though, today nurses will often be deciding what the therapeutic plans are, not the doctor, and will be organising and working with other healthcare professionals to implement these plans.

The most recent definition is by the International Council of Nurses (2002):

Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles.

This definition identifies a far wider role of the nurse. But, nurses today are also leaders and coordinators of care, often leading multidisciplinary teams. They also need to be able to think critically and have advanced problem-solving skills to provide care that is based on sound evidence.

The difference between a registered nurse and a nursing associate

The discussions so far all relate to registered nurses; but a new role, the nursing associate, was introduced in England in 2017. We will look at this in more detail in Chapter 2, and how the programme and role differs from a registered nurse, but a quick summary is useful here. Registered nurses will have undertaken a degree or postgraduate degree and will have registered with the Nursing and Midwifery Council (NMC) as a registered nurse in a specific field of practice. Nursing associates undertake a two-year foundation degree and are also registered with the NMC but only to work in England. Their programme is generic and they have been prepared to work across all fields of practice.

Student tip

If you want a career in nursing but don't think you can achieve the required entry requirements, the nursing associate route is a really good choice as it is only two years and you get an opportunity to experience all four fields of nursing. You can also use it to 'top up' to become a registered nurse later if you wish.

The Nursing and Midwifery Council (NMC) and your nursing career

It is important for your future career in nursing, and to prepare for your selection day, that you appreciate the role of the NMC. The NMC is the nursing and midwifery regulator for England, Wales, Scotland, Northern Ireland and the islands. The NMC identifies its responsibilities as follows:

1. *We maintain the register of nurses and midwives who meet the requirements for registration in the UK, and nursing associates who meet the requirements for registration in England.*
2. *We set the requirements of the professional education that supports people to develop the knowledge, skills and behaviours required for entry to, or annotation on, our register.*
3. *We shape the practice of the professionals on our register by developing and promoting standards including our Code, and we promote lifelong learning through revalidation.*
4. *Where serious concerns are raised about a nurse, midwife or nursing associate's fitness to practise, we can investigate and, if needed, take action.*

(www.nmc-uk.org)

If you are successful, at the end of your pre-registration nursing programme you will be eligible to be added to the register of nurses and midwives held by the NMC and become a registrant. You can then call yourself a 'registered nurse' or registered nursing associate depending on the programme you undertook. Each registrant has a unique personal identification number, or PIN, and this is required for you to work as a nurse/nursing associate or midwife in the UK. Registrants with the NMC renew their registration every three years and are required to have kept their knowledge and skills up to date. In order to renew their registration, registrants have to assure the NMC that they have worked as a nurse/nursing associate (as appropriate) for a required number of hours over the previous three years and undertaken a specified amount of study relevant to their practice. The aim is to ensure that all practising registrants keep up to date in both theory and practice. So, becoming a registered nurse/nursing associate is not just about getting the qualification – it is a commitment to lifetime learning.

The registered nurse qualification is recognised in the UK and throughout the European Union and has a good reputation overseas. Many nurses will tell you that it is a huge privilege and honour to become a nurse and that there is a range of career opportunities

available to you once you have become a registered nurse, in the UK and abroad, and in the NHS, private and voluntary sectors of healthcare. The world is your oyster!

All registrants must work in line with *The Code* (Nursing and Midwifery Council, 2018a). This code lays down the professional standards of practice and behaviour for nurses, midwives and nursing associates. A word of caution here: as well as being added to the register, nurses can also be removed from it if their ‘fitness to practise’ as a nurse is questioned and then proved to be unacceptable. You will find that we will keep coming back to the importance of professionalism throughout this book because entering nursing is not like entering most other jobs: people’s lives will depend on you and if you are to engender their trust then the way you behave both at work and in your personal life has to be in a way that fosters that trust.

The fields of nursing

You may be wondering what a ‘field’ has to do with nursing, or why there should be lots of fields with nurses in them. The NMC, which sets the standards for nursing education programmes, uses the term to describe the four main areas in which registered nurses specialise:

- adult nursing: the care of people aged 18 or over;
- children’s nursing: the care of children and young people from birth to 18 years;
- learning disabilities nursing: the care and support of people of all ages who have learning disabilities including their family and carers;
- mental health nursing: to promote and support the recovery of people of all ages who use mental health services.

If you want to undertake a pre-registration nursing course you will need to decide which field of practice you wish to specialise in before you even start the application process, as you will be applying to follow a programme that leads to registration as a nurse in one of those fields. Some universities offer joint qualifications, enabling you to register in two fields of practice at the end of the programme, e.g. registered nurse (adult) and registered nurse (child), but these programmes are longer to enable you to gain the practice experience and theory input to meet the proficiencies in both fields of practice.

Chapter 7 has more detailed information about the different fields and is worth reading before you make your final decision.

Where does nursing take place?

Traditionally nursing has been seen as taking place primarily in hospitals, but nursing in fact takes place wherever people live, work, play or are educated. Table 1.1 lists some of the places where nurses deliver care. It is crudely divided between hospital/

inpatient-based settings and community settings, but in reality, many nurses work across the inpatient–community boundary. In addition, many nurses work in the forces in the UK and abroad. The British Army, Royal Navy and Royal Airforce will fund a number of students each year who are interested in a career in the forces. It should also be noted that many of these settings are as likely to be part of a private or independent organisation as they are to be part of the NHS. The NHS has seen significant changes in the demographics of the people who require its services in recent years. People are living longer so there is not only an increase in the number of older people requiring care, but also a concurrent increase in the number of people with dementia and long-term conditions. As a consequence, more care will be delivered in the community and in people’s homes in the future and many newly qualified nurses are therefore going into the community for their first posts.

Careers in nursing

Nursing as a career choice endows these professionals with a range of skills that can enhance all facets of their life. Nurses with compassion and humanity bring these attributes into many other areas such as family, friends and social life. The enhanced communication skills required make nurses at ease in any social situation and able to converse with people from all backgrounds and walks of life. The skills and knowledge gained in their working life are entirely portable, allowing nurses to practise in very different settings and with many different patient groups. Career choices, such as research, education or management along with clinical practice, allow career progression and specialist interests rarely afforded in other professions. The diversity of practice environments are vast and provide an interesting, rewarding and stimulating career that lasts a lifetime.

(Elizabeth Robb, OBE, former Chief Executive, The Florence Nightingale Foundation)

Adult	Child	Learning disabilities	Mental health
Hospital/inpatient-based and in the military			
Medical/surgical units/wards	Medical/surgical wards	Treatment and wards	Inpatient assessment units
Operating theatre departments	Operating theatre departments	Forensic services	Rehabilitation wards
Outpatient departments	Outpatient departments	Dual disability inpatient services	Forensic units
Accident and emergency departments	Accident and emergency departments	Prisons	Accident and emergency departments
Critical care units	Critical care units	Neurodisability units	Psychiatric intensive care units
Prisons	Day care units		Prisons
Day care units			Deaf services

Adult	Child	Learning disabilities	Mental health
Community-based			
At home	At home	At home	At home
GP/health centres	GP/health centres	Community learning disabilities teams	Community mental health teams
Schools	Schools	Schools	Day units
Urgent care/walk-in centres	Urgent care/walk-in centres	Special schools	Substance misuse services
NHS 111/NHS 24 NHS direct Wales	NHS 111/NHS 24 NHS direct Wales	Supported living schemes	Nursing homes
Occupational health departments	Children and adolescent mental health services	Children and adolescent mental health services	Children and adolescent mental health services
Nursing homes	Hospice	GP practices	GP practices
Hospice		Residential homes	Therapeutic day services
		Day services	

Table 1.1 Where nursing takes place

Once qualified, nursing offers a wide range of career pathways. While you do not have to decide before you start your course where you want your career to go, you may be asked at interview where you see yourself in five years' time or how you see your career progressing, so having some idea will help you to answer those questions if they arise. In reality, many students change their minds as they progress through their course and have different practice experiences.

Activity 1.2 Nursing careers

- The Royal College of Nursing has developed a resource to help nurses plan their careers available at: www.rcn.org.uk/professional-development/nursing-careers-resource. Look at this website, which also provides links across the four countries of the UK and then consider the following questions:
- What career path are you considering once qualified?
- Has it changed your views about possible careers in nursing?
- What would your answer now be if asked where you saw your career in five years' time?

Make a note of it in preparation for your interview.

Table 1.2 offers examples of career pathways in nursing and provides an insight into a very small number of options available to you once you qualify.

Many nurses will move between care settings, for example, working in an acute inpatient ward and then moving into a role in the community supporting people with long-term physical or mental health conditions.

<i>Clinical Roles</i>	<i>Adult</i>	<i>Child</i>	<i>Learning Disabilities (LD)</i>	<i>Mental Health (MH)</i>
<i>Support Workers</i>	<i>Healthcare Assistant or Senior Healthcare Assistant Found across inpatient and community settings in healthcare (see Table 1.1)</i>			
<i>Assistant Practitioners</i>	<i>Associate Practitioner, Nursing Associate Found across inpatient and community settings in healthcare (see Table 1.1)</i>			
Practitioners	Staff Nurse Found across inpatient and community settings in the healthcare (see Table 1.1)			
Senior Practitioners/ Specialist Practitioners	Roles such as: senior staff nurse/junior sister, health visitor chemotherapy nurse, practice nurse, specialist nurse – infection prevention and control/respiratory/transplant nurse, practice education facilitator.	Roles such as: senior staff nurse/junior sister, paediatric pre-assessment nurse, school nurse, deputy ward manager, practice education facilitator.	Roles such as: deputy ward manager, community LD nurse, assessor continuing healthcare, prisons, LD acute liaison nurse, practice education facilitator.	Roles such as: lead nurse community MH team, Senior mental health practitioner, clinical team leader, practice education facilitator.
Advanced Practitioners	Roles such as: advanced clinical practitioner trauma and orthopaedics, senior nurse walk-in/urgent care centre, advanced nurse practitioner – acute clinical team, advanced nurse practitioner – General Practice.	Roles such as: advanced practitioner – children and young people's services.	Roles such as: learning disabilities adult safeguarding nurse/practitioner.	Roles such as: advanced primary MH practitioner.
Consultant Practitioners	Roles such as: consultant nurse – respiratory care, modern matron.	Roles such as: named nurse child protection, modern matron.	Roles such as: LD consultant nurse – specialised, secure and CAMHS services.	Roles such as: consultant nurse MH liaison.
More Senior Practitioners	Roles such as: Director of Nursing, Chief Nurse.			

Table 1.2 Nursing career pathways

(Adapted from NHS Careers (2014))

In addition to the career pathways described in Table 1.2, nurses in all four fields can also develop careers in research such as: a clinical research staff nurse, clinical trials nurse, research assistant or research fellow. Many staff nurses have an educational component in their role as a practice supervisor or practice assessor supporting students in practice, and some nurses will decide to move into education and become a lecturer/practitioner, lecturer or senior lecturer later in their career. All nurses will require leadership and management skills with these becoming a greater part of their role as they progress up the career ladder. The case study below gives an example of this transition across these different roles.

Case study: Karen

Karen Chandler, Divisional Lead and Associate Professor, MSc Interprofessional Health, MSc Education, Registered Nurse (Adult & Child) says:

As a young person I was what could be described as reluctant to conform to ‘normal’ expectations of secondary education, in other words I did not achieve as expected at an all girls’ grammar school and left school with one O level in Latin and a handful of CSEs. Determined not to let that detract me from my ambition to be a nurse I enrolled on the two-year enrolled nurse course, which has some similarities to today’s nursing associate programme. While I thoroughly enjoyed the clinical element of the course, I soon found on qualifying that I had ambitions to improve nursing that could not be achieved in my role. I therefore undertook what was then called a conversion course (today referred to as a top up) which qualified me to be a registered nurse and staff nurse. I spent the next ten years working in areas of accident and emergency and intensive care before training to be a children’s nurse. I was promoted to senior positions in neonatal children’s intensive care before embarking into a career involving the education of nurses.

Entering nurse education 20 years ago to deliver a children’s intensive care course I soon started to look at pre-registration nursing education and have since worked at four universities designing and delivering programmes to ensure the workforce has the necessary knowledge and skills to provide nursing in the fast-changing climate of healthcare. I am currently about to complete a Professional Doctorate in Education exploring the consistency in processes for managing student misconduct, known professionally as Fitness to Practise. Lastly, I remain a nurse and continue to practise in my area of speciality, the acute care of children and more recently, during the Covid-19 pandemic, I returned to adult emergency care. I consider myself fortunate to have had such a diverse career, and not allowed my non-conforming attitudes to hinder me but only to challenge practices and consider how we can do things differently and hopefully better.

Chapter summary

Out of all the career options available to you, nursing possibly provides the greatest range of opportunities. Once qualified, you can work in a large hospital, in the community, in teams or alone, remain clinically focused or move into management, research or education, stay in the UK or work abroad. It is not, however, a career for everyone and the next chapter will help you determine whether you have the skills and attributes required to join what is one of the most rewarding jobs available.

Further reading

Commissioning Board Chief Nursing Officer and DH Chief Nursing Adviser (2012) *Compassion in Practice: Nursing, Midwifery and Care Staff – Our Vision and Strategy*. Available from: www.england.nhs.uk/wp-content/uploads/2012/12/compassion-in-practice.pdf

This is the vision and strategy for nursing and midwifery published in 2012 to ensure delivery of high-quality compassionate care. Includes information on the 6Cs and, while old, is often talked about at interviews.

Watson, C. (2019) *The Language of Kindness: A Nurse's Story*. London: Chatto & Windus.

A personal insight into the life of a nurse.

Useful websites

www.healthcareers.nhs.uk/we-are-the-nhs/nursing-careers

NHS nursing careers website that contains really useful information about nursing, with excellent video stories and other resources.

www.healthcareers.nhs.uk/explore-roles/nursing/roles-nursing/nursing-associate

NHS Careers website that explains the role of the nursing associate.

www.nursingandmidwiferycareersni.hscni.net/
www.careers.nhs.scot/
www.weds.wales.nhs.uk/nursing

These are country specific nursing careers websites for Northern Ireland, Scotland and Wales.

www.nmc.org.uk/education/becoming-a-nurse-midwife-nursing-associate/

Nursing and Midwifery Council website, with guidance on becoming a nurse or nursing associate.