

Higher education institutions must recruit nursing students with the right values. One university is using multiple mini-interviews to assess compassion and empathy

Putting the 6Cs at the heart of nurse education

In this article...

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An innovative selection process based on the 6Cs has been introduced at the University of Worcester. The selection process involves multiple mini-interviews to assess applicants' compassion, cultural sensitivity, teamwork, empathy, reliability and communication skills. Service users are involved in conducting role play with applicants and providing feedback about them. An initial evaluation shows that both candidates and interviewers view the process as a fair and beneficial tool for selection.

At the University of Worcester, our recruitment strategy for pre-registration nurses has been rewritten to ensure we are recruiting students with the right values, including compassion (Department of Health, 2012). We are committed to producing graduates who work with compassion that stems from confidence in their own competence (University of Worcester, 2014). To ensure we recruit the right people, we now use a recruitment strategy based on the 6Cs of nursing practice – care, compassion, competence, communication, courage and commitment (DH, 2012). The process includes multiple mini-interviews (MMIs) and service-user involvement.

Designing the new process

We were aware of the use of MMIs at Kingston University (Dray, 2013) and held

workshops to explore the development of values-based MMIs. These workshops were attended by the university's service-user and carer team, clinicians from a range of settings, practice facilitators, members of academic staff and current students. MMIs were designed and mapped against the 6Cs to form the framework for the assessment. The assessment was then piloted using current students, clinicians, service users, carers and academic staff, before being launched in November 2013.

Exploring values before application

The university already uses the Values Exchange software package designed by healthcare ethicist Professor David Seedhouse. This gives applicants the chance to investigate their potential for a career in nursing mapped to their value system and is accessed via the nursing page on the university website.

A scenario involving an ethical dilemma is described, then prospective candidates are invited to express their views. They are invited to navigate a series of interactive screens that help them to structure their reasoning and response to the presented case. This gives them the opportunity to evaluate their own ethical response to the scenario. The software then allows them to see their responses through a range of reports and feedback.

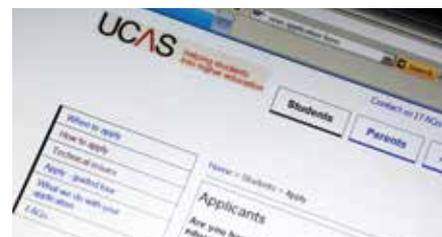
Since its introduction in January, at least 140 prospective students have used the tool before applying to the university.

Shortlisting candidates

Lyon et al (2013) found that recruitment of nurses placed an emphasis on qualifications rather than on those whose personality and values were in line with the 6Cs.

5 key points

- 1 Multiple mini-interviews are used in other professions and may help to assess values and compassion in nursing
- 2 The content of mini-interviews for applicants to the University of Worcester has been aligned with the 6Cs
- 3 As consumers of healthcare, service users are well placed to discuss nurses' skills and qualities
- 4 Role play helps to demonstrate how applicants behave when they are unable to prepare for a specific situation
- 5 More follow-up is needed to show whether values-based recruitment results in better quality care



Nurses are assessed for compassion skills before submitting their application



Potential nurses should be able to demonstrate their capacity for compassion

Playle and Bee (2009) found patients value personal attitudes and compassion as well as technical competence.

The admissions tutor felt that all academic staff should be involved in short-listing prospective candidates to ensure the university was recruiting for values. All members of staff are responsible for ensuring that selected candidates exhibit values in line with the mandate from the DH to Health Education England (DH, 2013a).

In the aftermath of care failings at Mid Staffordshire Foundation Trust, the DH identified the need to recruit nursing applicants with appropriate values and attitudes (DH, 2013a). Health Education England is in the process of developing a values-based recruitment strategy that will provide guidance for all NHS professionals (HEE, 2013).

From September 2013 all applications were made online so a system was devised to enable all staff members to shortlist against set criteria. Particular significance is given to the personal statement, which gives candidates the opportunity to demonstrate their values and beliefs as well as their experience and ability to undertake the course. Any queries regarding an application are passed back to the admissions tutor. Candidates are given guidance on writing personal statements at taster events, discovery days and university open days.

The selection process

Saldanha (2006) found that higher education institutions in the UK use a variety of approaches in the selection of pre-registration nursing students, including one-to-one and group interviews. Although not

specifically indicating how, institutions claimed in this study that they would look for evidence of applicants' empathetic and compassionate nature.

Compassion in Practice (DH, 2012) requires values-based recruitment to be included in the national standard contract for pre-registration education programmes. MMIs have been used in other disciplines (Dray 2013; Humphrey et al, 2008) and we felt it was appropriate to adopt this approach. Our applicants are marked on a series of activities that are mapped to the 6Cs, testing their potential to learn and develop the necessary values and behaviour.

MMIs consist of a series of short, structured stations that are used to assess compassion, cultural sensitivity, teamwork, empathy, reliability and communication skills. Evidence from UK medical schools shows that student performance can be predicted through the use of MMIs (Husband and Dowell, 2013).

The selection process has six stations lasting between five and 20 minutes, each addressing three of the 6Cs. The selection process has been devised with the assistance of an occupational psychologist at the university with particular expertise in recruitment. Three stations are written and three are interactive. The written stations include prioritisation, response to ethical dilemmas and numeracy. The interactive stations are:

- » A group exercise, in which the candidate is asked to act as an advocate;
- » An individual interview;
- » A short role play with a service user.

Within these six activities, candidates also demonstrate their numeracy and literacy skills.

Service-user involvement

There is an increasing evidence supporting the inclusion of lay people and service users in pre-registration nursing programmes (O'Boyle-Duggan et al, 2012). Hurley (2008) argued that all higher education institutions should recognise the difference between the role of the service user and that of the academic in the selection process.

The Royal College of Nursing sees service user feedback as invaluable in the selection of prospective nursing students (RCN, 2007). Service users are therefore an integral part of our selection and recruitment strategy, and play an active role in the process, not just within role play but also in the assessment of group work and written scenarios.

As consumers of healthcare with a commitment to patient wellbeing, service users are in an ideal position to discuss what they find most acceptable and helpful in a nurse's qualities and skills. Within the selection process they can:

- » Offer a view on the quality of communication;
- » Help explore attitudes and values;
- » Monitor equality and diversity;
- » Help uncover motivation and commitment to nursing as a career (Happell and Roper, 2009).

Service users have a particular remit to assess for equality and diversity and to "red flag" any behaviour that might be deemed unsuitable for a career in nursing.

Use of role play

Eva et al (2004) introduced the concept of role play into the MMI interview selection process, while Durham and Alden (2008) claimed that it can be used to ensure compassionate and empathetic nurses are recruited. In our process, service users are given a short script that they adapt according to the branch of nursing for which they are assessing potential students. Candidates are given a few minutes to study the scenario, then have to engage with the service user in a short role play. They must respond spontaneously to the situation and are observed by an assessor; the service user and assessor provide feedback independently.

The scenario is designed to measure care, compassion and communication.

Service-user and assessor evaluation

Service users and assessors are involved in the assessment process. The marking criteria include equality and diversity markers, as well as feedback on interaction, which is supplied by the service users.



Once a candidate has completed all six stations, their mean average score is calculated. After the selection process, candidates who have met the required criteria – including those on literacy and numeracy – are offered a place on the course.

Should any “red flags” be identified, applicants are rejected.

We respond with humanity and kindness to each person’s pain, distress, anxiety or need. We search for the things we can do, however small, to give comfort and relieve suffering... We do not wait to be asked because we care”

Department of Health (2013b)

Candidate and assessor feedback

All candidates and assessors have had the opportunity to give anonymous feedback on the MMIs, using a process designed by the occupational psychologist. Using a four-point Likert scale, candidates were asked to score statements on:

- » Staff professionalism and courteousness;
- » Sufficient opportunity to demonstrate skills;
- » Content of the exercises;
- » Whether they had had a positive experience.

We undertook an initial evaluation of this feedback, using feedback from a random sample from 60 students and eight assessors.

Results of the evaluation

Key themes from the candidates’ feedback included that staff were friendly and put the candidates at ease, the patient interaction exercise was excellent, and that there was an enjoyable variety of interactive activities. Suggested improvements centred on the length of the interview, that the group work should be related to nursing, and on more structure for the patient interaction. Some candidates felt rushed.

Evaluation of feedback from the assessors revealed positive comments relating to the organisation of the day and also some suggestions for improvements. These included concerns that some candidates scored higher at some stations and lower at others, with assessors wondering if this was a true reflection of the candidates’ suitability. There was a suggestion that more information should be given to the candidates before the patient interaction; in addition, there was a desire for more space so confidentiality could be guaranteed during the individual interview, as some candidates were revealing significant personal information.

Discussion of initial results

Initial feedback indicates that both candidates and interviewers view the MMI values-based process as a fair and beneficial selection tool. As the process is fairly new in pre-registration nursing programmes, acceptability is an important issue (Humphrey et al, 2008). The exploratory evalua-

tion supports the introduction of the process in recruiting nursing students for their personal attributes, with the 6Cs providing a foundation for structured and explicit criteria. Use of the process is also an opportunity for institutions to meet the recommendations of the Mid Staffordshire inquiry (Francis, 2013) and the DH mandate to HEE (DH, 2013), for high-quality, effective, compassionate care, delivered by the right people with the right skills and values.

The MMIs need more human resources than traditional methods (Eva et al, 2004), so it is important that assessors are willing to actively participate. Successful implementation of the strategy is dependent on the support of clinical and academic colleagues along with the IMPACT team (service users and carers employed by the Institute of Health and Society to engage with the recruitment process as well as teaching commitments on the various courses).

Higher education institutions want to attract the highest-quality candidates and avoid deterring potential candidates from applying because of a unique admissions process. The positive feedback received in the evaluation suggests that the MMI system has not deterred applicants, but we are working on further pre-selection day instructions so applicants are more aware of the process. A rigorous evaluation is therefore planned for the end of the 2014 recruitment cycle.

A longitudinal study is also being conducted in collaboration with occupational psychology colleagues to assess the effectiveness of this strategy over a four-year period. Applicants will be tracked across the three years of their degree course and a year after registration to evaluate their professional values.

The potential to transform

The MMI values-based method has the potential to transform the recruitment

process for pre-registration nursing throughout the UK, and could prove extremely important in addressing compassionate care in nursing. Our longitudinal study will provide more data on its predictive validity. Compassionate and competent practitioners are fundamental to high-quality nursing care. If this method facilitates the recruitment of such practitioners, the benefits to practice will be considerable. **NT**

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