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INNOVATION IN VALUES BASED PUBLIC HEALTH NURSING STUDENT SELECTION: A QUALITATIVE EVALUATION OF CANDIDATE AND SELECTION PANEL PERSPECTIVES

Running Head: Innovation in values based student selection

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**Innovation in values based public health nursing student selection: a qualitative
evaluation of candidate and selection panel member perspectives**

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Abstract

Values based recruitment emerges from the premise that a high degree of value congruence, or the extent to which an individual's values are similar to those of the health organisation in which they work, leads to organisational effectiveness.

Objectives: The aim of this evaluation was to explore how candidates and selection panel members experienced and perceived innovative methods of values based public health nursing student selection.

Intervention: The use of photo elicitation interviews and situational judgement questions in the context of selection to a university run public health nursing educational programme was explored.

Design: The evaluation was framed by a qualitative exploratory design involving semi-structured interviews and a group exercise. Data were thematically analysed.

Sample: Eight semi-structured interviews were conducted with selection panel members. Twenty-two successful candidates took part in a group exercise.

Results: Whilst candidates were ambivalent about the use of photo elicitation interviews, with some misunderstanding the task, selection panel members saw the benefits for improving candidate expression and reducing gaming and deception. Situational interview questions were endorsed by candidates and selection panel members due to their fidelity to real life problems and the ability of panel members to discern value congruence from candidates' responses.

Conclusions: Both techniques offered innovative solutions to candidate selection for entry to the public health nursing education programme.

Key Words: Public Health Nursing, Compassion, Values based recruitment, Personnel selection

Background

The need to recruit appropriate individuals to the healthcare workforce is an international imperative (Global Healthcare Workforce Alliance, 2013). This was brought into acute focus in England with the publication of the public inquiry into events at the Mid Staffordshire NHS Foundation Trust, which highlighted a decline in compassionate care and recognised the centrality of personal and professional values to practice (Francis, 2013). Staff values were identified as having a significant effect on behaviour and the quality of care delivered.

Values can be defined as the beliefs that an individual holds about what is desirable or good. They are generally enduring, influenced by immersion in culture and social interaction, constructed during adolescence and then stable in adulthood (Schwartz, 2012). Values as preferences are related to the environment that an individual prefers (Ravlin and Meglino, 1987). Values as principles guide the individual in terms of how they should behave (Schwartz, 1992). Patterson et al. (2016) identified that while values relate to what people think they ought to do, personality relates to what people naturally tend to do. Values are related to the goals people choose to pursue and personality is related to the effort they put in to achieving those goals.

Values based recruitment (VBR) emerges from the premise that a high degree of value congruence, the extent to which a person's values are similar to those of the organisation in which they work, leads to organisational effectiveness. Conversely value incongruence may lead to poor job satisfaction and increased turnover of staff (Sekiguchi and Huber, 2011).

In England, exploration of values has been adopted into the process of selection of healthcare trainees and employees (Health Education England (HEE), 2014), with the principles of the NHS Constitution (Department of Health, 2015) as core selection criteria. Traditionally, Higher Education Institutes (HEIs) have relied on assessment of academic ability to select students but evidence suggests that this alone may not be an adequate proxy for identifying effective clinicians of the future (Prideaux et al., 2011). Values based recruitment uses methods that assess people's values with a view to congruence. Measurement tools are diverse, including different forms of interviews, personality testing, and interactive exercises. There is consensus that no single tool is sufficient and that traditional interviews in particular perform poorly, are subject to bias and unsuitable for assessing values (Patterson et al., 2016). However, further evaluation of VBR tools is required to determine their effectiveness regarding reliability, validity and stakeholder acceptability (HEE, 2014).

This paper contributes to the existing knowledge base by evaluating two VBR tools used in the selection of nursing and midwifery students for a public health nursing education programme at a HEI in London. This is a post-registration programme leading to qualification as a district nurse, health visitor or school nurse. Candidates for selection have a first level nursing or midwifery registration and are likely to have had experience in hospital or community roles prior to application. These roles demand high levels of skilled communication, emotional intelligence and the ability to rapidly build relationships with patients or clients. Key characteristics of the programme are summarised in Box 1.

Innovative values based recruitment tools

Photo elicitation interviews are an established approach to data collection in anthropological and sociological research (Collier, 1986). The technique involves asking research participants to comment on images such as photographs and paintings. It is suggested that visual representation allows the brain to interpret information differently than it would the verbal form, which promotes self-expression and elicits more in-depth and personally constructed detail than conventional interview questions (Harper, 2002). In relation to personnel selection, PEI is not well documented but one notable exception is provided by Hughes (2015) who evaluated its use in the selection of candidates for first registration nursing programmes at a HEI in England. The findings suggested candidates felt better able to demonstrate their strengths, whilst interviewers felt they were able to both measure values and confirm subtle differences and similarities between candidates.

Situational interview questions are composed of a hypothetical scenario depicting a challenging work-related situation where candidates are asked to indicate how they would respond. Situational interview questions are different to situational judgement tests as interviewers are able to probe responses whereas situational judgement tests use similar scenarios but have pre-determined fixed response choices. Both have a long history in the personnel selection literature (Lievens et al., 2008) and have been shown to be reliable and valid selection methods to identify a range of professional, non-academic attributes in healthcare professionals (Cleland et al., 2014).

These techniques were incorporated into the existing panel interview schedule for public health candidates. In relation to PEI, candidates were asked to bring one photograph to the panel interview at the selection day (either in hard or electronic copy) and informed that they would be asked to talk for approximately five minutes about how it demonstrated the

values and attributes they felt they would bring to the profession. A scoring rubric awarded marks for the narration of the meaning of the photograph and the extent to which it helped the candidate demonstrate emotional intelligence, compassion and warmth.

For the SIQ, scenarios that candidates were likely to encounter in their future role were co-created with service users. Each service user was filmed narrating a significant event experienced during their episode of care together with asking a related question on video camera. Three videos were chosen for use in selection of students: one for district nursing candidates, one for health visiting candidates and one for school nursing candidates. The scenarios and accompanying questions are presented in Box 2. A scoring rubric awarded marks for reference to the key elements of patient-centred care, such as respect, active listening and putting the service user at ease. Selection days took place between April and July 2016.

The aim of the evaluation was to explore how candidates and selection panel members experienced and perceived the use of PEI and SIQ in the context of selection to the public health nursing programme. The objectives were to establish whether the tools: were acceptable to candidates and selection panel members; measured the attitudes and values of candidates against those identified in the NHS Constitution, and; adequately sampled the desire of candidates to provide compassionate care, and did so more effectively than other measures.

Evaluation methods

Design

The evaluation was framed by a qualitative exploratory design involving semi-structured interviews and a group exercise. Given the principal investigators (CM and JB) were part of the programme team, an independent researcher (SA) was engaged to recruit participants, collect the data and lead the analysis. Ethical approval was obtained from the School of Health Science Research Ethics Committee.

Sampling and recruitment

Selection panel members were eligible to take part in a one-to-one interviews. Panels were comprised of nurse lecturers from the public health education programme and mentors from the placement areas where successful students would complete the practice component of the programme. The potential sample included seven lecturers and 19 mentors. Panel members were invited by email to participate in the evaluation. The independent researcher then selected participants from the respondents in order to obtain variation in perspectives and capture the opinions and experiences of both lecturers and mentors.

Successful candidates who subsequently enrolled on the programme were invited to take part in a group exercise by the independent researcher. The potential sample included 22 students. The group exercise was not part of the academic programme and candidates were reassured that they were under no obligation to attend.

Informed voluntary consent, which included permission to use anonymous quotes in research reports and publications was obtained prior to the interviews and group exercise.

Data collection and measures

Interviews were conducted face-to-face or by telephone using a topic guide which was designed to be used in a flexible manner, allowing some areas to be discussed in greater depth than others, depending on the relevance for the participant. Three overarching questions framed the guide:

- How did the tools support candidates to express their values and beliefs?
- How did the tools support candidates to demonstrate organisational fit?
- What value did the tools add to the selection process?

Eight interviews were conducted with selection panel members. Participants included three lecturers and five mentors. Four interviews were conducted face-to-face and four by telephone. Data were collected between September and December 2016. Interviews lasted approximately 20 minutes and were audio recorded and transcribed by an independent transcriptionist. Interviews were continued until no new concepts or ideas were offered and data saturation was reached.

The perspectives of successful candidates (n =22) were sought by way of a group exercise. The group exercise was held during the programme induction week. All those invited volunteered to take part. Students were divided into small groups and given five minutes to discuss and record on flipcharts what they liked and disliked about each of the tools. The facilitator then led an audio-recorded whole-group feedback session to capture the main themes generated by the small groups, and to give all students a chance to respond to what each other had said. On a separate table, sticky notes were provided for anyone who felt that their views were not adequately represented in the discussions. The facilitator listened to the audio record and made notes, which were combined with the flipcharts and sticky notes for the analysis.

Analytic Strategy

The data from both the interviews and group exercise were synthesised using a thematic approach to qualitative data analysis (Braun and Clarke, 2006). The analysis looked for emerging themes as well as those already implicit in the topic guide. The analysis was carried out by one author and corroborated by the others. Data from both candidates and selection panel members were initially analysed separately but then compared and contrasted in order to consider overlapping themes.

Results and discussion

Three key themes emerged from the data: the quality of candidates' answers, candidates' understanding of the task, and comparison with more conventional interview questions.

Quality of answers

Photo elicitation interview

Successful candidates generally felt that there was plenty to talk about using the photograph that they had selected to bring to the interview. The visual prompt enabled them to remember the points they wished to make and talk about themselves in detail:

'Very personal for me because I had to tell my story - coming [to England] as an asylum seeker. Looking back, I wasn't able to speak English. Talking about myself reminded me that I was resilient person; I've faced a lot of challenges and that motivated me to go on the course which will be another challenging step in my life.' (Candidate)

One candidate joked:

'It helped me so much, I could have gone on the whole day!' (Candidate)

Another described how the opportunity to reflect on her attributes increased her confidence and the way she performed for the remainder of the interview:

'[It] gave me a boost for the next question and the next and the next.' (Candidate)

Selection panel members reported that at least some candidates made good answers. Good answers were those that disclosed more of the person, their emotions, life experiences and capacity for compassion:

'[Candidates] were able to really describe ... the picture that was in front of them. And you can really see their emotions coming through, and their passion for nursing.' (Mentor 4)

'[The candidate is] sponsoring a child in Africa, and there would be a photograph of [the child], and their beliefs about opportunities etc., and so for me, there were really great ones.'
(Lecturer 1)

These extracts indicate that for some candidates the use of photographs supported dialogue and enabled them to speak in a more open and informative way. The views of the selection panel members and candidates concur with research by Affleck et al. (2012), who suggest photographic methods allow participants to discuss emotional experiences more easily, and that visual cues enhance knowledge transfer and understanding between the interviewer and the speaker.

Notwithstanding the relatively positive experiences of successful candidates, the findings suggested the approach did not benefit all candidates and selection panel members recalled occasions when prospective students did not use their photographs to their best advantage:

'I don't think [the candidates] all articulated... how that photo demonstrated their values and how their values would be important in the role that they were applying to train [for]... One girl climbed Kilimanjaro or something, so that was a real achievement, and how she had used determination... but I am not sure whether she translated that into how that would make her better at her job.' (Lecturer 3)

These candidates did not reveal any undesirable values (such as any kind of prejudice) but their responses, unlike the responses of successful candidates, left the selection panel unable to make an assessment of the degree of fit between them and the organisation.

Situational interview question

From the perspective of many successful candidates, one of the key benefits of the SIQ was that watching the video gave them a short break from the intensity of direct questioning, which helped them manage themselves:

'It provided a change of gear and pace – more informal, made me feel more relaxed.'
(Candidate)

'You relax a bit while watching the video, it takes you out of the nervousness that you have had since you came into the interview.' (Candidate)

It is in the selection panel's interest to help ensure candidates are at ease because high levels of anxiety can bias the predictive validity of job interviews. For example, very anxious candidates may perform more poorly in an interview situation than less anxious candidates despite potentially superior clinical performance. In addition, if HEIs or health organisations are viewed through a lens of anxiety they may be perceived by candidates as unattractive, which could influence their decision to accept a job offer (McCarthy and Goffin, 2004). The combined impact is a loss of qualified candidates recruited to the public health workforce, which is particularly significant in the current context of workforce depletion.

Despite the video presentation providing a few moments respite from the scrutiny of the selection panel, candidates did not underestimate the importance of the activity:

'[It was the] bit I wanted to get right as it was what we were going to do'. (Candidate)

Such candidates recognised there was an opportunity to describe to the selection panel how they would deliver patient-centred care. The selection panel agreed that SIQ elicited glimpses of what candidates were capable of when responding to service users. These glimpses were communicated both verbally and non-verbally and some candidates made a positive impression:

'[The candidates] talked more about values and attitudes, and how they would approach the person and be non-judgemental and helpful ... I think that it is a useful thing...' (Lecturer

‘Some [candidates] replied to [the service user] [by] name and [the candidate] seemed to take on board the things that were important to that [service user]. They... showed a sort of... an empathy, an understanding of where that person came from.’ (Mentor 3)

These candidates appeared to be actively listening to service users and trying to understand what the speaker wanted to communicate rather than what as listeners they might have wanted to understand. They also demonstrated acceptance of what was being conveyed. Whilst some candidates created a positive impression, others did not and rather than address the question posed by the service user, imagined a question that they either deemed more aligned to service priorities or felt better able to answer:

‘They were tearing away from what we actually felt that the service user was asking about... they deviated from what the question was asking them and [were instead] talking about other things that weren’t relevant to the question... they did not answer [the] question.’ (Lecturer 1)

Given the importance of patient-centred care, such a response was potentially evidence of value incongruence and poor fit between the candidate and the organisation. In contrast, candidates who actively listened to the service user demonstrated high value congruence. Pitt et al. (2014) reinforced the importance of assessing values as part of the selection process by demonstrating that nursing students’ personal qualities did not change over the period of the three year nurse education programme. The enduring nature of these characteristics, make it essential to assess for value congruence at the outset.

One challenge to the effectiveness of VBR is the subjective nature of values assessment by panel members. In this context all candidates were registered nurses or midwives and already socialised in to the values of the NHS constitution. Hollup (2012) argues that candidates may be attracted to a specific role by personal circumstances or extrinsic rewards. They may not personally relate to the NHS values but will be aware of the 'right' words to say to demonstrate congruence (Patterson, 2016). Conversely, panel members may make an assessment of value congruence based on their personal value set, rather than those of the NHS. As values are entrenched in culture and social interaction, it is essential for ethical process that panel members represent a diversity of perspective to mitigate bias but also important that panel members are clear about the set of values they are assessing against.

Candidates' understanding of the task

Photo elicitation interview

As reported earlier, some candidates reportedly gave relatively weak responses; responses that were deemed by the selection panel to be superficial or incomplete. This type of answer was in part attributed to some candidates not understanding the task. This lack of understanding manifested at two levels. The first was an inability to conceptualise what might be required. For example, one panel member said:

'Some [candidates] did need prompting to understand what was required – one asked, what did [we] want her to say, what's the idea?' (Mentor 5)

The second level was where the purpose of the exercise was mistaken for something it was not:

'Some [candidates] used it to talk about themselves and selling themselves.... But I am not sure whether that is quite the same as "values".' (Lecturer 2)

Successful candidates' perceptions of the clarity of the activity were mixed. Some clearly understood the task, recognising it in part as a type of exploration of their personality:

'It was an easy way to highlight your strengths and weaknesses'. (Candidate)

However, others recalled having experienced some difficulty understanding the task at a conceptual level:

'What do they want?' 'What did they want me to express?' (Candidate)

'[I] struggled about what the picture relates to.' (Candidate)

Most successful candidates worked through these difficulties prior to interview. For example, they started to interpret the meaning of the word values and distinguishing values as preferences and values as principles. They also thought about how personal the picture should be and how important it was not to portray themselves in too frivolous or light:

'Worried about the panel's judgement about pictures; for example, a picture of someone on a beach might make the panel think you were not a serious candidate. [In the end] I brought one of a family member and talked about [my] personal life.' (Candidate)

Some candidates concluded this process more successfully than others, with the latter expressing a desire for greater guidance or additional prompts:

'A clearer question would have been helpful – could you bring any picture, or did it have to be of yourself?' (Candidate)

'It would have been better to have stock photos that represent values.'
(Candidate)

Heightened levels of anxiety often manifest as requests for additional guidance (McCarthy and Goffin, 2004). Anxiety can lead to both difficulty interpreting a task and the misinterpretation of a task. Furthermore, candidates can perceive inequity in status between them and the panel members, which can lead to them feeling out of control, ultimately impacting on their ability to communicate effectively. Affleck et al. (2012) argue that the use of PEI has the potential to return some control by giving candidates choice and time to prepare. Similarly, Balmer et al. (2015) state that using photographs chosen by candidates allows them to opt in or out of personal association, regulate what is seen and take control over the direction of the discussion. This was reflected in a comment from one of the panel members:

'I feel that bringing their personal photo is actually giving them that ownership... And also it helps them with the confidence...' (Mentor 2)

Candidates who desired clearer instruction may reflect not only heightened anxiety but also personality traits (such as helplessness or dependency) that may in themselves be of interest to interviewers as potential evidence of poor fit between the individual and the organisation. Alternatively, whilst the term values is common currency in academic and human resource discussions, it may not have been familiar to candidates. A more facilitative approach might allow the panel to better make an assessment of value congruence with candidates who otherwise might not understand the task, and ensure that potentially suitable candidates are neither rejected nor lost in the selection process.

Situational interview question

Successful candidates did not report any difficulties conceptualising what was required in this activity. Nor did panel members report that candidates mistook the activity for something it was not. However, some candidates did express a desire for more guidance on auxiliary matters:

'Need to make it okay to ask for a replay' (Candidate)

As with PEI, seeking further instruction rather than problem solving may reflect personality traits that are incongruent with the culture of the organisation and the level of facilitation required in order to avoid losing suitable candidates must be considered.

Comparison with more conventional interview questions

Photo elicitation interviewing

Successful candidates did not compare PEI with alternative selection methods. When asked at the end of the group feedback session whether PEI was a method they might employ themselves, they were largely ambivalent. Such ambiguity perhaps reiterates the need for more varied forms of selection as expectations about the process may have become entrenched. In contrast, panel members saw benefits over traditional questions. The first benefit was that it broadened engagement:

‘It is a chance to talk about something personal and familiar, so it has value as an icebreaker... Interviews are stressful, and anything that broadens engagement and facilitates responses is to be welcomed. Helping candidates to relax is particularly important... in roles... that don’t necessarily attract people who are good at selling themselves. Some find it difficult to promote themselves, so this method really helped’ (Mentor 5)

‘Anything... other than straight interview questions. I think the more different ways you can think of things and the more you can... offer an alternative, allows you to see a wider side to people and how they will be in the role.’ (Mentor 3)

The second benefit was that it appeared to reduce opportunities for gaming or deception:

‘When they are trying to answer a question, they are trying to read our minds, and think: “What should I be answering?”... Whereas with this, they can’t read our minds.’ (Mentor 3)

'It provided variety... So, it is not... I was going to say, not so predictable, that sounds as though I am out to catch them out, but it wasn't the standard question and you can learn the answers and... I think people were actually thinking as they were going along... And it was different and creative...' (Lecturer 2)

For interviewers and candidates alike, interviews are a high stake process. The concept of deceptive impression management is one explored in the personnel selection literature. It is defined as 'conscious distortions of answers to the interview questions in order to create favourable impressions' (Levashina and Campion 2007: P1639). It is critical that the information gathered at interview is accurate and that the approaches used adequately sample the desire of candidates to provide compassionate care rather than their desire to secure a job or a place on a training programme. Consequently, as Patterson et al (2016) suggest, the focus should not be on a single assessment method, rather on which methods are best suited to assessing relevant values in a specific context, taking a multi-faceted approach.

Situational interview questions

Generally, the SIQ method was endorsed by candidates and panel members; particularly the video presentation by the service user. The appeal of the video was related to candidate learning preferences and high levels of stimulus fidelity. Scenarios can be presented in text or video format or read to the candidate by the interviewer. The former are held to have low stimulus fidelity, meaning they are not consistent with how the situation is encountered in the workplace (Lievens et al., 2008). Conversely, video-based scenarios allow the context to be richly portrayed, thereby increasing stimulus fidelity.

One candidate compared video format with text based formats and argued videos were less anxiety provoking:

'Reading a vignette is pressurising, you have to read, understand and prepare your answer while the interviewers are watching you, that makes you nervous, inhibited, and you talk rubbish.' (Candidate)

This was particularly true for candidates with a preference for a visual style of learning:

'Videos [are] better because I'm a visual person, I like things visually.' (Candidate)

Candidates and panel members confirmed the job-relatedness and realism of the scenarios. In relation to stimulus fidelity, they also agreed that the video presentation allowed the intimacy of the client encounter to be more richly portrayed:

'I think that [in a video] you can portray body language, and you can convey the message a little bit more articulately... Because then you can pick up on the cues of that service user. As opposed to reading it on paper, where you may want to ask questions.' (Mentor 1)

'Life-like – more real and therefore encourages you to show the skills you've got.'
(Candidate)

Lievens and Sackett (2006) explored whether written or video situational judgement tests are better predictors of job performance. On one hand video based tests were found to have higher fidelity because the information presented is richer and more detailed. However, as cognitive ability is an important predictor of job performance, video stimulations may be less valid because they are less cognitively loaded.

Notwithstanding candidate perceptions, it was acknowledged by the panel members that the use of a video presentation was by no means an alternative to having a service user present:

'I think it has its limitations... having an actual client in the interview process... the gold standard is still that you have a client there.' (Mentor 3)

'It helped us move towards user involvement. I realise that is not the same as having a user there on the panel.' (Lecturer 2)

The approach was thought to represent an important step to the legitimate participation of service users in selection decision making. However, it does not represent what might be considered an ideal state of participation, where public health nurse service users hold a clear majority of seats on the selection panel and ensure decision making is not biased towards performance in the academic elements of the interview regardless of performance in the elements pertaining to understanding and desire to care.

Limitations

The candidate participants in this evaluation were all successfully recruited to the Public Health Nursing Programme. We do not know if the perspectives of unsuccessful candidates differed with regard to the tools used in the selection process, which is a limitation of the evaluation and warrants further exploration. The use of telephone interviews limits the ability of the interviewer to interpret visual cues with a loss of contextual and non-verbal data, which may potentially compromise rapport. Conversely, the distance between researcher and participant may allow the interviewee to relax and share sensitive information more easily (Novik, 2008) so this method was deemed appropriate for the evaluation.

Conclusion

The aim of this evaluation was to explore how nursing and midwifery candidates and panel members experienced and perceived the use of PEI and SIQ in the context of selection to the Public Health Nursing Programme. The findings contribute to the existing body of knowledge by demonstrating that PEI were acceptable to panel members as a means to determine value congruence with the organisation but that a more facilitative approach may have encouraged greater engagement. Those candidates who understood the task were able to demonstrate their preference and motivation to deliver care congruent with the NHS constitution and public health roles. Panel members and candidates found SIQ acceptable and accessible as a means to explore approaches to patient centred care. They also appreciated the inclusion of a service user perspective in the interview process but panel members stressed the importance of moving towards an ideal state where a service user would be present on the panel and take part in selection decisions.

These findings have implications for future practice when selecting students for public health nursing (and potentially other health related) educational programmes, with both PEI and SIQ offering innovative solutions to identifying candidates that fit with the role and the organisation. As the nursing profession recognises the need to prioritise compassionate care there is an imperative to assess not only candidate knowledge but also personal attributes and values. Whilst this evaluation offers clarification of the respective benefits and challenges of the two tools, a multi-faceted approach to selection processes is advocated, with PEI and SIQ being implemented in conjunction with other forms of assessment to give multiple opportunities for candidates to demonstrate their strengths and to challenge traditional and sometimes ineffective methods. In addition, further research to establish the reliability and validity of these tools is required.

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Box 1: Key characteristics of the public health nursing programme

| | |
|-------------------------|---|
| Description | <p>The programme is suitable for qualified nurses or midwives with a commitment to prevention and health promotion and evidence based nursing practice in a community setting. The programme offers three pathways of study, either a district nursing pathway, health visiting pathway or school nursing pathway. The programme is designed to equip students with the evidence to demonstrate eligibility to register for specialist practitioner status with the Nursing and Midwifery Council (NMC).</p> |
| Structure | <p>The programme is available at either graduate or post graduate level. The programme can be taken either full time over one year or part time over two years. The programme comprises 50% practice and 50% theory in line with NMC requirements. In order to successfully complete the programme, students have to pass both academic and practice assessments. The former are assessed by way of academic coursework and the latter by district nurse, health visitor or school nursing mentors in the practice setting.</p> |
| Fees and funding | <p>Places on the programme are currently funded through sponsorship arrangements with local NHS Trusts/NHS Organisations. The NHS Trusts/NHS Organisations pay the tuition fees, meet student salary costs, and provide practice placements.</p> |

Box 2: Service user videos and situational interview questions

| Pathway Video | Scenario | Question |
|----------------------|---|---|
| District Nursing | Patient with a wound who is concerned about the number of different nurses visiting her at home | How would you reassure me that you and your colleagues would do your utmost to ensure I receive continuity of care going forward? |
| Health Visiting | Mother experiencing problems breast feeding | How would you make sure that I did not feel judged as a mother when you do your assessment with me? |
| School Nursing | Father concerned about the national child weight screening programme | If my child was overweight, how would you address this sensitively with me? |