2017 HSC STUDENT EXPERIENCE REPORT

ueasu | students transforming

CONTENTS

INTRODUCTION

1.   In UEA Students' Union's strategic plan (2015-16) it is recognised that Health Sciences students, across the majority of non-medical health courses but particularly those studying Nursing (demonstrated throughout our data), at UEA face a very specific set of circumstances, and sometimes challenges, in relation to their student experience. This is owed to a number of factors, including the specific demography of the cohorts, unique funding structures, and external influences that impact upon the curriculum such as professional governing bodies and national Organisations.

2.   These challenges are particularly reflected in the participation statistics for Health Sciences students within SU activity.

3.   In response to this, our strategy sets out actions relating specifically to a provision for the representation of Health Sciences students and the opportunities available to them through UEA Students' Union. This has been achieved through the employment of a jointly-funded (SU and UEA School of Health Sciences) full time staff member, based within the Students' Union. This report also discusses Organisation and Management as this is seen consistently low scores in a wide range of data sets across the majority of Nursing programmes. This also applied to the 2015/16 NSS scores for the allied health profession programmes, particularly Occupational Therapy.

4.   As part of the provision we have carried out a number of research projects, the results of which form the basis of the report.

5.   The following draws on these, as well as the National Student Survey 2015-16 dataset for the School of Health Sciences, and the 2016 Student Experience Report to highlight the most prominent concerns for pre-registration non-medical health students. These are categorised into three key themes:

- Organisation and Management
- Opportunities and Participation
- Representation and Democracy

6.   Within each theme a number of recommendations have been identified for the School to implement in order to work towards improving HSC students' experiences. These are in addition to the recommendations already outlined in the most recent '*Big Conversation*' report for HSC (May, 2016).

CONTEXT

In 2015 a partnership was established between UEA Students' Union and the School of Health Sciences to explore and improve student satisfaction. Students within the School were identified by the SU as facing a very particular set of challenges due to student demographic, professional governing body requirements, and an ever-shifting landscape for non-medical healthcare professionals in the United Kingdom. A full-time joint post was therefore established between the School and SU, under the title 'Representation and Opportunities coordinator (HSC)', which would focus specifically on the academic representation and overall experience of Health Sciences students.[1]

Over the 2016-17 academic year, having established a fantastic working relationship with the School and demonstrating to students the necessity of representation and power of the student voice, our focus shifted to equipping students with the leadership skills necessary to put this into practice more independently. This would aim to improve the feedback loop within the School. We continue to specifically consider Health Sciences students, particularly Nursing cohorts for whom cohorts are larger and timetabling more intensive, when coordinating events, opportunities and student group support through the SU. This has included specific support for Health Sciences' academic societies such as Nursing society, and Allied Health (Therapy) societies, where we have advised on the best approach to engaging with their peers, different student groups, and academic staff members.[2] This is taking place within a wider context of all academic societies, where a number of SU departments are working together to create better support systems for academic societies, and more specific training opportunities.

This year, our research has shown significant improvements to student satisfaction for HSC students in comparison to the previous two years of this project. There are however, still consistent themes in students'

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[1] Please see our 2015-16 report for a more detailed narrative of specific projects that UEA SU has engaged with alongside HSC to date.

[2] More detailed descriptions of our approach to improving the overall student experience are given throughout this report.

dissatisfaction, for which we have made recommendations throughout the report. We would like to thank the School of Health Sciences for their continued support and work in improving the student experience.

METHODOLOGY

During the 2016 – 17 phase of the project we directly engaged with a lower estimate of 923 students, most of whom are pre-registration BSc and MSc Nursing students, but also include Paramedic Science students, Occupational, Speech and Language, and Physiotherapy students, and Midwifery students. Although we have had some engagement with students studying Operating Department Practice, this has been minimal.

Whilst student reps have been elected for the Midwifery cohorts, who are invited to the Student Staff Liaison Committees, we understand that the course leaders provide additional student feedback mechanisms that sit separately from what is outlined in the university's Code of Practice for Representation and the HSC Student Representation Strategy. It is important to note at this point that we have seen lower levels of engagement in our research and project work from Midwifery students than other cohorts in HSC, despite attempts to work directly with their student representatives to encourage participation. Although this means that the following discussion around data collection only has minimal representation of Midwifery students, we would like to focus on these cohorts more specifically in a subsequent report.

Data collection
The data featured in this report is drawn from several primary and secondary sources. These include –

- Happy Nurse/ Sad Nurse comment cards (December 2016) [Qualitative]

- 'Big Conversation' survey completion (January – February 2017) [Qualitative and Quantitative]

- HSC Student Staff Liaison Committee minutes and action logs (2016 – 17) [Qualitative]

- National Student Survey (2015-16) [Qualitative and Quantitative]

- Health Education England Student Survey (2016-17) [Qualitative and Quantitative]

- Membership Services Limited Data (2016-17) [Quantitative]

- Student Experience Report (2016)[3] [Qualitative and Quantitative]

Once data was collected from these sources, we identified that a thematic approach to presenting the report would be most appropriate. Both quantitative and qualitative data sets were coded based on whether responses were positive or negative, and subsequently grouped into themes. Categories emerged from the themes we had identified, which structured each thematic section of the report.

Student cohorts are specified where possible, although during data collection students were given the option to remain anonymous. Secondary research (NSS, Student Experience Report, MSL data and Health Education England Student Survey) had been either previously coded by members of the SU, university, or external Higher Education research bodies.

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[3] For a more detailed explanation of our methodology for each report please contact either Liv Grosvenor our Representation and Opportunities Coordinator or Arunima Himawan our Policy and Research Coordinator.

THEME 1 – ORGANISATION AND MANAGEMENT

'*Little or no understanding of course demands and format so events are badly [timed], poorly advertised and do not fit with [the] timetable'* - Adult Nursing[4]

In the 2016/17 HEE Student Survey students were asked to what extent they agree that 'the programme is well organised and running smoothly' (Q 20.3). Across all four fields of Nursing this question scored an average of 78.3% satisfaction amongst students in their first year of study. Whilst this falls below Speech and Language Therapy (which scored 100% satisfaction), Physiotherapy (96%) and Occupational Therapy (79%), the majority of these scores are in line with the regional average for East of England (78% - average across all four fields). In contrast, the same question scored an average of 58% across all four fields Nursing in the 2015-16 National Student Survey, conducted amongst final year students. As this question is a good indication of Organisation and Management overall, it could suggest that it has generally improved and that changes implemented across Nursing programme(s) have had a positive impact on student experience. However, it might also be that students have a better overall experience in their first year of study in comparison with subsequent years. The 2016 Student Experience contains more detailed statistics and analysis on the theme of Organisation and Management in HSC, and situates it within the wider context of UEA student satisfaction. Please refer to this on our website for further information[5].

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[4] 'Happy Nurse Sad nurse' Research
[5] https://issuu.com/uea_su/docs/student_experience_report

HSC Courses	Overall Organisation and Management (NSS 2016 Q13 - 15) Score*
Adult Nursing (Jan intake)	52
Children's Nursing	53
Adult Nursing (Sept intake)	67
Learning and Disability Nursing	69
Mental Health Nursing	69
Occupational Therapy	71
Operating Department Practice	71
Midwifery	74
Physiotherapy	93
Speech and Language Therapy	95

*UEA Average 82% (for comparison)

One important finding around Organisation and Management which came from the comments section of NSS (2015-16), and discussed in the Student Experience Report (2016), was that many students were upset about the hub move from Edith Cavell. Whilst we take this into account as a genuine concern amongst the 2013/14 Nursing cohorts, we understand that the move to the ZICER hub for Nursing cohorts is of lesser concern to more recent cohorts. We predict this is due to more time spent on central campus, and more frequency in online submission of work. Location of Hub services has not been a common theme in more recent qualitative data from Nursing, or other HSC cohorts, particularly in the feedback from the Big Conversation survey (from which the tables in this report are drawn), and in conversations and meetings with the Representation and Opportunities coordinator for the School of Health Sciences. Nor has it been raised in School meetings around student satisfaction or learning and teaching.

Organisation and Management was a theme that was revisited in feedback from Nursing students in the September 2016 cohort, from across each of the fields, when we asked them to comment on their experience of the first seven weeks of their course. This was as part of a casual feedback opportunity we offered students, branded as '#happynurse #sadnurse'. The opportunity was offered to Nursing students as a trial, and then put out to student reps from other cohorts, however there was no further uptake outside of Nursing.

Overall, we found that responses relating to this theme had improved. Where students have commented on organisation they have predominantly focused on inaccessibility of events and extra-curricular activities. We

understand that heavy timetabling is owed to external factors and therefore appreciate that in many cases this is outside the control of the School. Several September 2016 cohort Nursing students, from across all fields, commented that '*lectures/ classes [are] well organised*'[6], and were positive about the organisation of Blackboard and E-Vision, as well as commenting positively on the organisation of support mechanisms.

Negative feedback around Organisation and Management, however, includes comments on the late notice of timetable changes and updates, and lack of communication between departments. One student commented that

'*It's impossible trying to sort things when internal departments don't talk to each other*' Adult Nursing

Placement arrangements and allocations

A perception of a lack of communication has the potential to impact on how students perceive the reliability of internal processes and systems. Similarly, many of our conversations with HSC students, from across a number of Nursing and Allied Health Profession programmes, have raised concerns around the Organisation and Management of placement allocation, scheduling, and balance between placement hours and academic workload.

During our SU feedback sessions with HSC student reps which focused on a number of themes around placement learning, one Nursing student commented that:

'*In my experience of Community placement it is very difficult to complete the theory components of the course to the standard required. 37.5 hour placement weeks combined with travelling sometimes four hours a day there and back (two hours there, two hours back) to the placement area means there is little time to complete the empowerment assignment as well as get appropriate rest between shifts.*'

Considering that the Organisation and Management of placement sits partially under the control of the university the following section focuses on this however we appreciate that placement coordination and overall

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[6] Representative of a number of comments

experience is dependent on a number of external factors which will be explored in more depth in a following piece of work.

Students from across both the Nursing and Allied Health Professional courses frequently comment on two key themes – travel and accommodation (including the costs associated with this) and balance between academic workload and placement hours. The former has been raised at both sub-SSLC groups7, meetings which take place between the whole-School Student Staff Liaison Committees to ensure that issues affecting similar professions but not necessarily across the whole School, can be dealt with more efficiently (this is revisited in Theme 3). The issue that has been raised by students studying pre-registration Nursing, and pre-registration Physio, Occupational and Speech and Language Therapies, is that they do not understand the placement allocation process, and that students are often placed on placements of up to 12-weeks in geographical areas that are difficult to access.

While the School communicates early on in the admissions process that they may be required to travel outside of the immediate area to access placement providers, feedback from students suggests that the extent of distance, limited local public transport, and cost of accommodation where travel is not feasible, is not sufficiently communicated to students before beginning the course. This is something that School staff are now aware of, and we recommend that this continues to be addressed by the admissions team in HSC.

Further, students from across both Nursing programmes and Physio, Occupational and Speech and Language Therapies have raised that there is some confusion around consideration of extenuating circumstances for placement arrangements. There is currently a process by which students are asked if there are any extenuating circumstances that should be taken into consideration by the Learning and Teaching Services' placement administration team when allocating placements. Students have raised that they feel this process is redundant as they perceive it as making little difference to which placement area they are allocated.

Whilst we understand from conversations with the Practice Education team within HSC that the placement allocation process is complex and that there is little leeway for 'swapping' placements, feedback from students via the Student Staff Liaison Committee (both whole-School and the sub-SSLC

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7 Unfortunately at the time of writing this report official minutes were not taken for the sub-group SSLCs as they were initially intended as a more informal system. As their success has grown we have recommended a secretary attends these sub=group meetings as well as the whole-School SSLC.

meetings) suggests that the reason for this is not communicated to them sufficiently. Students from across the School have raised concerns that there is little awareness overall of how the placement allocation process works, and that a more thorough understanding would help to settle anxieties and frustrations around why students are placed in particular areas, especially when these are perceived as more difficult to access.

Part of our overall work this year has been to encourage students to put forward solutions to the issues that they raise within the School. With regards to the above issue, student representatives from pre-registration undergraduate Physio, Occupational and Speech and Language Therapies programmes proposed a potential method of 'swapping' placements between students based on efficiency of geographical location. This would involve an early 'soft' release of placement allocations to be sent to student reps for the aforementioned therapy programmes, which would then be communicated to their cohorts. This was raised with Course Directors, and perceived as a feasible approach due to the comparatively small cohort sizes for these cohorts. The proposal was put forward to the senior placement team in HSC and feedback suggested that the idea had been considered as feasible, and that as a pilot, students would receive the allocation list from Learning and Teaching Services in advance of finalising allocations. Student representatives fed this back to their cohorts, however there appeared to be a lack of communication amongst staff members. This lead to allocation lists being released without notifying student reps, therefore the pilot did not go ahead. This led to backlash against student reps from cohorts, for which students did receive an apology from staff members. Despite this, feedback in a following sub-SSLC meeting (8th March 2017) suggested that sufficient explanation as to why the proposal was confirmed but then did not go ahead, was not given.

Although we are pleased to hear that the School is encouraging students to find solutions to issues and taking recommendations from reps on board, we feel this is an example of what students might perceive as poor Organisation and Management, and further lack of communication between departments. We believe mechanisms of communication both between staff and students on the one hand and amongst all staff members on the other need improvement. This will be a crucial step in increasing overall satisfaction across all programmes, and in maintaining students' understanding that their feedback is listened to and acted upon. Further discussion around this will take place in the '*Representation and Democracy*' section of the report. Whilst there are still improvements to be made

around Organisation and Management, we are happy to see that issues associated with this theme appear to have decreased since May 2015.

Recommendations: Organisation and Management

1. UEA Students' Union to improve the promotion of events and activities specific to HSC students via student representatives and academic societies.

2. UEA Students' Union to work with Course Directors to raise profile of accessible events and activities.

3. HSC must work to increase student awareness of course-specific placement coordinators for an improved knowledge of who to contact with placement queries.

4. HSC must include student representation at course- and school- level meetings where possible and appropriate, particularly course director team meetings. We recommend that this is a student in a named position, such as an elected course representative.

5. HSC should review, where possible, assessment schedules and placement periods to allow specific time for assessment completion.

6. Information offered to students at all stages of the admission process around extent of course costs and travel requirements must be reviewed to ensure clarity and transparency.

7. HSC and uea|su should work together to produce brief guide to placement organisation and management, including explanation around why 'swapping' placements is logistically difficult, for HSC students to view on Blackboard. This should also include a brief summary of the processes of placement allocation to help students better understand how decisions are met.

THEME 2 – OPPORTUNITIES AND PARTICIPATION

Within this section we discuss the notable difference in extra-curricular participation between Nursing, Midwifery, and Paramedic Science cohorts; and Occupational, Physio and Speech and Language therapy cohorts based on MSL data. Engagement levels of the latter are consistently higher than the former, and we aim to explore this within the theme. Two of the questions in the Big Conversation survey were around co- and extra-curricular opportunities for students on Health Sciences programmes, including social networking and social learning. These are specifically about access to and promotion of opportunities but qualitative comments have provided us with a wide range of feedback on students' perceptions of their wider student experience.
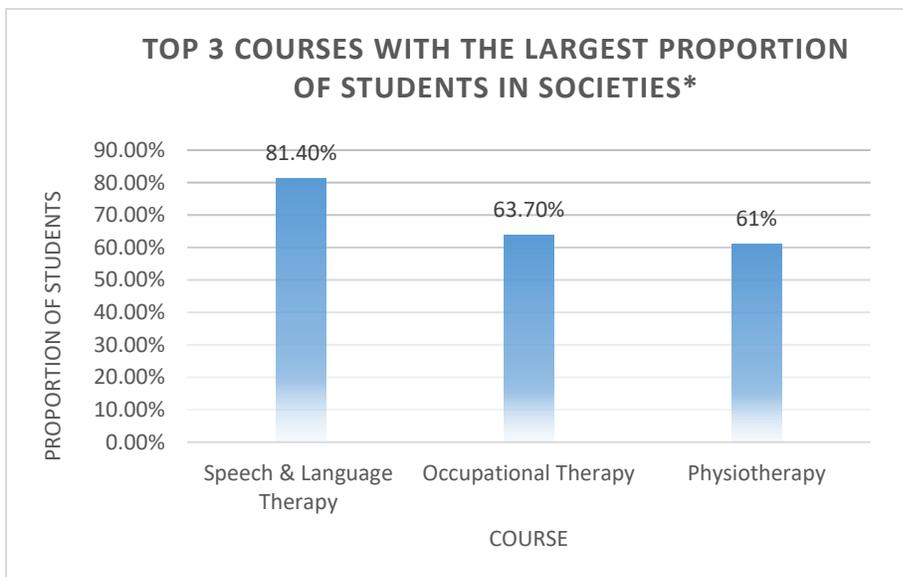
Clubs and Societies

Getting involved with Clubs and Societies is a great way for students to enrich their university experience. We understand that the professional nature of the courses in the School of Health Sciences means that they provide employability skills throughout, and so the employability benefits of clubs and societies are arguably less relevant. However, self-development, wellbeing and extra-curricular achievement are all essential parts of the wider university experience. We believe this is particularly prevalent in the lead up to the funding changes for non-medical health courses brought by the Comprehensive Spending Review (2016), and predict there will be a higher demand from students to be able to participate in extra-curricular activity when are fee-paying. UEA also holds its extra-curricular opportunities in high stead, evidenced by information on the website for prospective students on Open Days, which specifically highlights sporting and social opportunities amongst reasons to study at UEA.

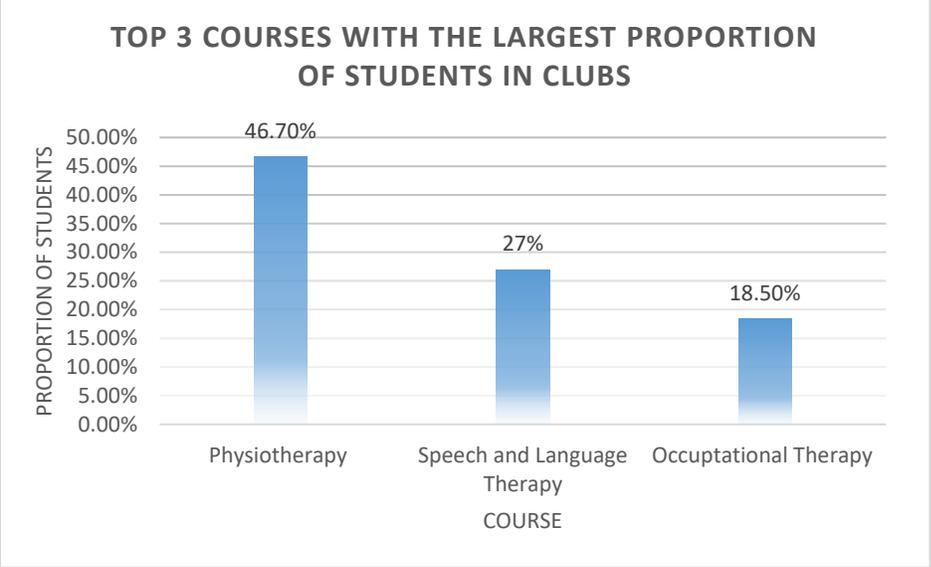A sound body of literature has established a strong correlation between increased student engagement in clubs and societies and positive outcomes in academic achievement (Trawler, 2010). For these reasons mentioned, it is important to understand to what extent students are participating in these types of opportunities. One easy way to gauge whether students are engaging with clubs and societies is by looking at participation rates.

HSC has 371 students who are members of union-led societies and 189 who are members of sport clubs. HSC ranks 7th out of the **23** UEA Schools in total society memberships and ranks 8th in total club memberships. Among HSC students, there are almost double the number of society memberships than there are club memberships however, this finding is prevalent across all   schools.

The four graphs below show that when looking at individual courses, students from Speech and Language therapy, Occupational Therapy and Physiotherapy programmes are the most engaged with clubs and societies. These numbers are particularly impressive when taking into account the total number of students enrolled in each course.

TOP 3 COURSES WITH THE LARGEST PROPORTION OF STUDENTS IN SOCIETIES*

Speech & Language Therapy: 81.40%
Occupational Therapy: 63.70%
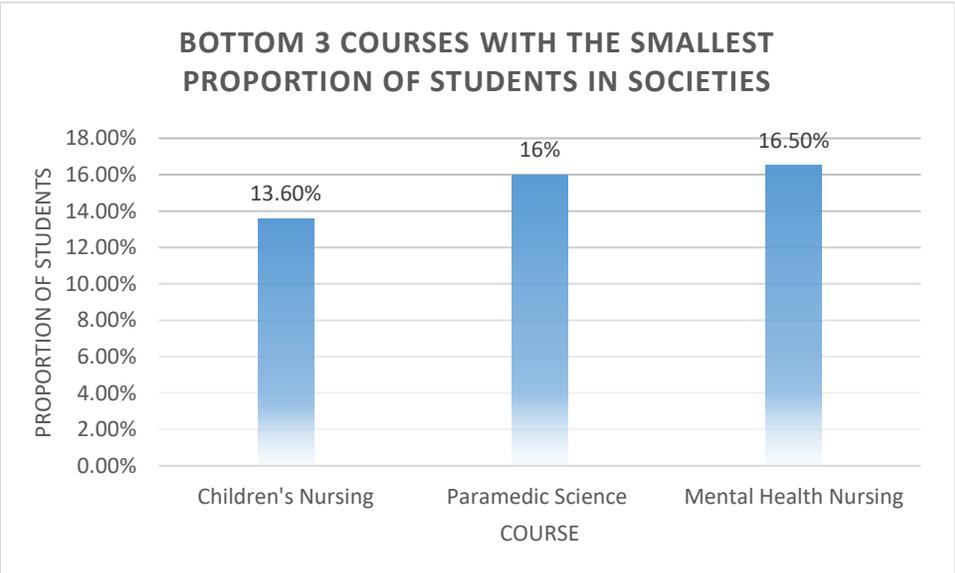Physiotherapy: 61%

PROPORTION OF STUDENTS

COURSE

*proportions are used instead of number of individual memberships because these numbers give a less accurate representation of student engagement.

TOP 3 COURSES WITH THE LARGEST PROPORTION OF STUDENTS IN CLUBS

Proportion of students by course:
- Physiotherapy: 46.70%
- Speech and Language Therapy: 27%
- Occupational Therapy: 18.50%

(Y-axis: PROPORTION OF STUDENTS, X-axis: COURSE)

Course	Total number of students enrolled in course
Speech and Language Therapy	70
Occupational Therapy	113
Physiotherapy	77

The least engaged students in societies and clubs come from Children's Nursing, Paramedic Science, Mental Health Nursing, Midwifery and Learning Disability Nursing:

BOTTOM 3 COURSES WITH THE SMALLEST PROPORTION OF STUDENTS IN SOCIETIES

Proportion of students by course:
- Children's Nursing: 13.60%
- Paramedic Science: 16%
- Mental Health Nursing: 16.50%

(Y-axis: PROPORTION OF STUDENTS, X-axis: COURSE)

Course	Total number of students enrolled in course
Children's Nursing	73
Paramedic Science	100
Mental Health Nursing	91

BOTTOM 3 COURSES WITH THE SMALLEST PROPORTION OF STUDENTS IN CLUBS
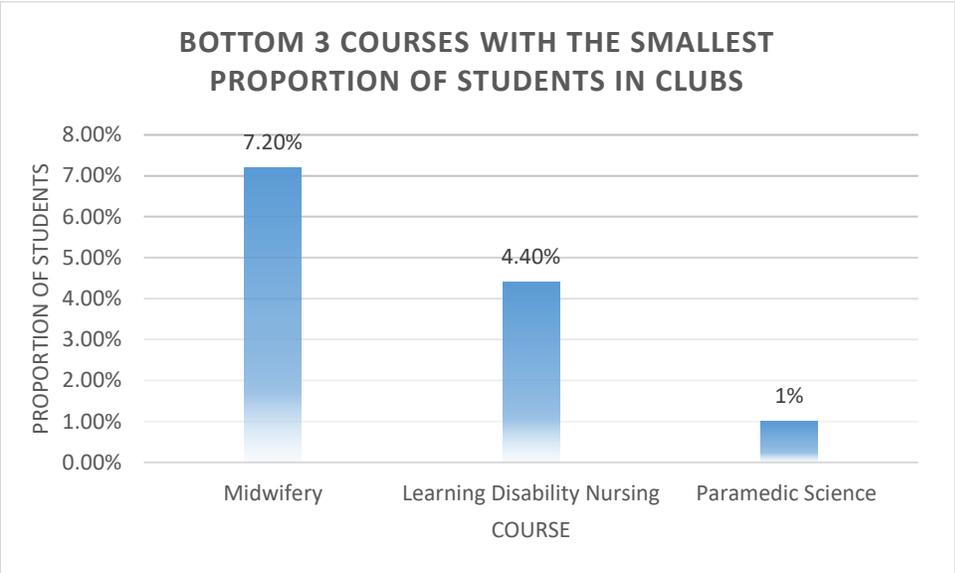
Course	Total number of students enrolled in course
Midwifery	83
Learning Disability Nursing	45
Paramedic Science	100

One important finding is that while Adult Nursing (Jan and Sept intake), have the largest number of individual memberships, the proportion of students who are members is actually not that high. This is because there are a lot more students enrolled onto the programme. There is also a significant difference in the number of memberships between the September and January cohort intake for both clubs and societies.

Cohort Intake	Clubs	Societies
September	43	87
January	13	9
Total number of students (Sept & Jan) enrolled in course*	755	

*Based on the data provided, it is impossible to know the total number of students which belong to each intake separately and therefore cannot provide percentages.

The fact that the total number of students enrolled in each intake as well as the month in which a student begins their studies might explain the differences that emerge between intakes. For example, students who are starting at the beginning of the standard academic calendar may benefit from the full promotion of opportunities and overall engagement the University and Students' Union does for all students irrespective of course during 'fresher's week' and the first few weeks of the academic year. Those starting in January will not benefit from the same level of engagement, and as result might not be aware of the various opportunities available to them. Based on some comments from our Big Conversation survey this year, Adult Nursing students from the from January cohort, feel this is true:

> *"Jan starters at a disadvantage."* Adult Nursing, 3rd year

> *"As January intake of adult nursing we can be left out (Not a lot of stuff available/ Freshers when we begin)."* Adult Nursing, 3rd year

> *"There isn't much time to take part in sport and it isn't promoted for January students."* Adult Nursing, 3rd year

> *"My course is a January intake we seem to miss a lot of opportunities and most lectures are in ECN away from all the activity going on."* Adult Nursing, 2nd year

Support in participation

The Big Conversation asked students two questions around this -

To what extent do you agree with the following statement:

Q1. The University/School and/or SU defines and promotes a range of opportunities for students to engage in extra and co-curricular activities like sport, societies, trips, etc that are appropriate to our course

Q2. The University/School and/or SU ensures that opportunities and facilities exist for social networking, social learning and social leisure activity appropriate to this type of study

The table below shows the combined scores of those that said they either 'somewhat' and 'definitely' agree.

	2017	2016	2015
Question 1	67.58%	60%	13.6%
Question 2	69.45%	66.5%	30.5%

From these numbers, there is more than significant improvement between 2015 and 2017, where the biggest improvements have been from 2015 to 2016. While this should not go unnoticed, one interesting statistic is that there has actually been an *increase* in the number of students who were definitely dissatisfied with Q1 between 2016 (8.4%) and 2017 (15.86%). Students identified that one problem they faced was having a busy course schedule:

"It is hard to participate in extra curricular activities because there is little time" Adult Nursing, 1st year

"Not sure - the nature of the course/ 37.5 hours a week doesn't leave much time" Adult Nursing, 3rd year

"Possibly due to the nature of the course, but it is difficult to find a balance between social aspects of the uni, keeping on top of work and placement, and 'burning out'. Whilst it is nice to be able to join some of the activities, it is hard to maintain them." Adult Nursing

"How are we supposed to fit social time around nursing?" Adult Nursing, 1st year

Important to note, is that the vast majority of students stating that the demands of their course prevented them from participating were from Adult Nursing. While these comments make the point that the course as a whole (class, placement, study time) make it difficult to engage. Some Adult Nursing students specifically remarked about their timetable conflicting with co- and extra-curricular activities:

"Meet-ups are not at appropriate times" Adult Nursing, 3rd year

"Timetable prevents full access to wider social engagement" Adult Nursing, 1st year

"It's harder for nurses to join due to conflicting schedule" Adult Nursing, 3rd year

Nursing students finally also commented on the difficulty of engagement when on placement:

> " *Variety of sports and societies available at uni however sometimes not able to attend them due to demands of nursing course and placements"*
> Learning and Disabilities Nursing, 3rd year

> " *Obviously our nursing degree is time intense…the jobs fair this year was spectacularly mismanaged and the majority of the cohort who needed it the most were unable to attend"* Adult Nursing, 3rd year

What is quite telling about the last two comments above (and what is quite a common frustration expressed by HSC students), is that they are aware of all the co- and extra-curricular activities available to students but are unable to attend/participate.

Comments from other HSC courses are quite limited, however one issue brought up was specifically in relation to a heavy class timetable and the impact it has on their ability to engage:

> *"Student Union shuts down even when HSC students are still on campus = feel neglected"* Speech and Language Therapy, 2nd year

> *In [lectures] til 9 - 5 so forced to pay peak Sportspark prices. NO CHOICE! £1 Swim is a good scheme, could this be extended to the gym?* Paramedic Science, 2nd year

> *"Social timings don't fit in with university (eg off peak times at the sportspark)"* Paramedic Science, 2nd year

The point here is not so much that other commitments such as studying prevents them from engaging, but rather in the first instance, the university does not accommodate for students with heavier class schedules, and in the second and third instance the added costs associated due to their heavy timetable. The Sportspark allows UEA students to access gym and swimming facilities for a reduced cost, however if these timings are inaccessible then we can work with UEA Sport, and potentially the School of Health Sciences, to look at coordinating a similar scheme to the £1 HSC Swim Cards.

There have been some significant steps taken to address the difference in extra-curricular engagement between students studying Allied Health Professions and Nursing students specifically (and further improving engagement with January cohort Nursing students). These include identifying accessible club and society activity timings (after 5pm and on Wednesday afternoons), and recognising where Nursing students are already involved in clubs and societies and encouraging their peers to participate, and funding £1 off-peak swim cards specifically for HSC students to use at the UEA Sportspark, which have proved popular. We have also included information on intense timetabling and placement hours during our standard sports club and society committee training.

Academic societies

Many courses in the School of Health Sciences have student-led academic societies that are run through and supported by the SU. Alongside the additional opportunities that are organised for students by the Opportunities and Representation coordinator and wider body of full time SU support staff, academic societies allow for the coordination of extra- and co-curricular opportunities that are relevant to their field of study, or facilitate interaction and support between students from different levels of study on the same course.

Engagement with academic societies within the School is varied and assessing the percentage of students engaging with the academic society associated with their course is difficult. This is because any student is able to join any society, therefore it might be the case that not all academic society members are enrolled on the course associated with that society. This appears to be the case for Occupational Therapy society, where society membership data indicates that there are 164 members of the society, but that a number of these members are from non-Occupational Therapy courses. Despite this Occupational Therapy society still has a higher membership count than any other academic society in HSC. Our most recent dataset indicates that Physiotherapy society has 64 members and Speech and Language Therapy society has 57. Assuming the majority of these memberships are held by students enrolled on the relevant courses, and taking into consideration their modest cohort sizes[8], we would consider these societies to be recruiting members effectively. Our close work with

[8]Occupational Therapy: 172 pre-registration students (BSc and MSc), Physiotherapy: 113 pre-registration students (BSc and MSc), Speech and Language Therapy: 70 pre-registration students (BSc)

the School has allowed us to understand that this is partially due to a good level of support for these societies from academics, and a close relationship between committee members and key staff members within the School. We would like to commend the course teams for this, and thank them for their continued support.

In contrast to the student engagement numbers for academic societies amongst the Allied Health Professions, numbers of Nursing students engaging with the UEA Nursing society is proportionately lower. Of 988 students across the five undergraduate cohorts of Nursing (all levels of study) and the MSc Adult Nursing cohorts, Nursing society has only 102 members. Despite continued support from the SU and election of a dedicated committee, who we have worked closely with, engagement from Nursing students with their academic society remain low. There could be a number of reasons for this, including time commitment difficulties for committee members (owed to placement requirements and workload), but we will continue to work closely with the 2017-18 committee upon their election to improve engagement levels from cohorts.

Regardless of the comparatively low membership figures, we are nonetheless very impressed with the effort that the 2016-17 Nursing Society have put into improving the society and engaging with their members. We are particularly pleased to hear that the society have worked closely with academics in order to organise a course-specific trip to the 2017 Royal College of Nursing Congress Event, and are confident that the profile of the society will continue to improve. Recommendations for the School to support the development of the society further are set out at the end of this section.

Further progress

In the 2016/17 academic year we were pleased to see that the start date of incoming September Nursing cohorts had been moved in line with the standard academic calendar. This meant that for the first time during our work with HSC, the first year Nursing cohorts were able to participate in our standard programme of events for welcoming new students. We took particular care in recognising the specificities of this cohort, and the widening participation status of many students, when creating and scheduling events. This allowed for more Nursing students to partake in 'Freshers' Week' than ever before.

UEA Students' Union organise an annual programme of events in January for returning students, which we often brand as 'Refreshers'. This year in order to be inclusive of those who start their course in January, but more specifically the January 2017 Adult Nursing cohort, we organised a specific Welcome/Fresher's Week for students beginning their course prior to the start of the standard Spring Semester. Any returning January Adult Nursing cohorts were also welcome to the events that were offered. These included a 'Welcome Pizza Social' (Tuesday 10th January), bespoke clubs and societies fayre, and a pub quiz. Events attracted an average of 40 students each, and we received positive feedback for each of them. We were particularly happy with the fayre, for which we had 17 clubs and societies in attendance to showcase extra-curricular to the new cohort of students in the Edith Cavell Building.

We worked particularly closely with the School of Health Sciences on this and would like to thank the Nursing academics and local support staff for their help in promoting and facilitating our plans. We hope that initiatives such as this help to improve the overall student experience of January cohort students and create a better relationship between HSC students, the School itself and the UEA Students' Union.

Recommendations: Opportunities and Participation

1. Course Directors to work directly with and actively promote relevant academic societies, including regular meetings and updates at appropriate school meetings.

2. Course Directors and other appropriate staff members in HSC to make academic societies aware of national profession-specific campaigns, projects and events where possible, to get involved with, and represent the school as a whole. HSC to work with UEA|SU to promote Academic Societies to cohorts and encourage participation

3. HSC to work with UEA|SU to promote other extra-curricular activity offers from within the school, including UEA Sport and other HSC-specific events and opportunities

4. HSC to encourage student UEA Sport-selected Sports Activators to work cross-faculty to include HSC students in sporting activities organised and promoted within MED, as well as HSC.

5. HSC to work with SU to allow dedicated time, where possible, for students to attend 2017 Welcome Week activities and actively promote these to students as part of a wider extra-curricular experience.

6. HSC to work with SU to negotiate specific off-peak hours for HSC students to access facilities around placement and timetable.

7. HSC to allow funding for SU to coordinate a subsidized scheme for HSC student use of UEA Sportspark gym facilities, similar to the current £1 Swim Card scheme.

8. HSC, with SU support, to coordinate sessions around importance of balancing work load and personal life/ extra-curricular activities, and guidance on how best to achieve this. We believe this is an important professional skill to develop and would improve student perceptions around not having time to be involved in extra-curricular sessions.

9. SU to produce specific training for societies and clubs on involving hard to reach groups, including students on non-medical health courses.

THEME 3 - REPRESENTATION AND DEMOCRACY

In January, students were asked four questions relating to the theme of representation and democracy in our Big Conversation survey. These were,

To what extent do you agree with the following statement:

Q1. The University/School defines and promotes opportunities for me to feedback about my course/student experience to make it better

Q2. The University/School takes specific steps to make sure that I have the time and space to feedback given the demands on me

Q3. If I was to criticize negatively aspects of the course, placement or wider student experience, the University/School makes sure that I won't be punished or viewed negatively

Q4. Arrangements for the representation of students on my course are effective and the representation is listened to and acted on.

Over the past two years, there has been significant improvement in student satisfaction across all four questions. The following table shows the combined percentage scores of students who either said they 'somewhat agree' or 'definitely agree' to the four questions above.

	2017	2016	2015
Question 1	91.95%	81.5%	48.5%
Question 2	71.43%	65.8%	30.7%
Question 3	78.42%	66.9%	31.9%
Question 4	73.95%	70.7%	19%

These scores show an astounding improvement between 2015 and 2016, and very good improvements between 2016 and 2017. We understand that this is owed to the continued partnership between UEA Students'

Union and the School of Health Sciences, in addition to the School's dedication to improving the student experience. Representation structures exist where they did not before, and work significantly more effectively, despite some potential improvements to be discussed in the relevant section of this report.

We are pleased to see that the vast majority of students responding to this survey agreed that the University/ School defines and promotes opportunities for students to feed back about their course. Satisfaction has almost doubled since 2015, and we have seen from the high percentage of courses with elected student representatives that the School is working hard to make student representation systems a priority.

	Proportion of students who 'definitely agree'	
	2017	2016
Question 1	32.89%	38.2%
Question 2	15.65%	16.1%
Question 3	22.3%	34.4%
Question 4	21.13%	31.2%

It is important to note however, that in all four questions there was a *decrease* in the proportion of students 'definitely agreeing' between this year and last year.

Based on data trends, it looks this year more students are inclined to say they 'somewhat agree' to all four questions. Therefore, the proportion of students who said they either 'definitely agree', and 'somewhat disagree' this year has decreased. While it is a good thing that fewer students are mostly 'disagreeing', it is worth noting that for Q2 and Q4 a larger proportion of students 'definitely disagreed' this year. These results, while mixed, can be partially explained by the fact that now students are much more aware of the ways in which they can feedback due to the promotion by the University and School (Q1). As a result, a greater number of students are providing feedback and this can include setting higher standards in regards to the effectiveness of representation and democracy structures.

Unfortunately, this does not explain why Q2 or Q4 have seen an increase in students 'definitely disagreeing' and further research is needed to explore this in more depth.

Opportunities to feedback – freedom and effectiveness

> *"I feel we have ample opportunity to feed back our experiences."* 3rd year, Adult Nursing,

About 9 out of 10 students agree that the University/School defines and promotes opportunities for me to feedback about my course/student experience to make it better (Q1). In fact, no student commented on being unaware about the opportunities to feedback. The areas that need greater attentions are around having the time and space to feedback[9]; the lack in confidence in the University/School that students will not be punished or viewed negatively if they criticise the University/School; and issues around the effectiveness of student representation with particular focus on whether feedback is listened to and acted on.

It is alarming that over one fifth of students either 'somewhat' or 'definitely' disagree that they will not be punished or viewed negatively if they were to criticize the University/School (Q3). This question reveals another important concern which is that the majority of students (55.78%) only 'somewhat agree' and 14.39% only 'somewhat disagree' to the above statement. For this question, the standard has to be set very high and students should feel fully confident, that they will not be penalised in any way when providing feedback, with only 7.19% feel this way should not be taken lightly.

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[9] Unfortunately, there were no comments relating to this question. Further research is needed to ask students why they feel they do not have the time and space to feedback.

The table below shows percentage of **combined negative (CN)** responses by course and level of study.

	Year 1	Year 2	Year 3	Total % of CN responses
Adult Nursing (BSc - January and September)	10%	3.3%	33.3%	**46.6%**
Mental Health Nursing (BSc)	-	6.6%	-	**6.6%**
Physiotherapy (BSc)	-	6.6%	-	**6.6%**
Paramedic Science (Bsc)	-	6.6%	-	**6.6%**
Midwifery (BSc - Long course)	-	-	3.3%	**3.3%**
MSc Clinical Research (NIHR Pathway)	3.3%	-	-	
Other			6.6%	**6.6%**

Comments around this from our qualitative data include:

"*I have fed back before about university/lecturer issues and get somewhat penalized by the lecturers*" N/A [10]

"*few incidences where students always told they are wrong*" 3rd year, Adult Nursing

"*I raised concern to a link lecturer of my second placement and was not supported through the situation. I felt some staff members knew about the concerns I raised which was unprofessional*" N/A

The first comment is an instance of where the staff members responsible would most likely be aware of their unacceptable behaviour; the second comment suggests that while students may not have been penalised, their feedback was not listened to properly. In this case, where staff members are consistently telling students they're wrong and their feedback invalid, it can foster a sense of distrust, and other students who may have serious complaints may not feedback at all. Student/staff relations are important, and in situations where there is an implied hierarchy, staff must make sure to encourage a supportive, and understanding environment. Even in cases where students may be wrong (which could have been the case in these

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[10] It was not compulsory for students to write down their course or year, so for some comments, this information is not available.

instances described by the student), staff should listen to the feedback and explain to them without abruptly disregarding their views. As illustrated from the discussions that took place in SSLC, the majority of problems arise from a misunderstanding or miscommunication. The final comment could be an instance where the staff member did not fully know the rules around confidentiality, where perhaps unknowingly providing sufficient information to other staff members whereby are able to identify the student who made the comment.

The majority of students commented on issues relating to Question 4, which looks at whether the arrangements for the representation of students on each course are effective and whether the representation was listened to and acted on.

Some students commented on the ineffectiveness of their reps as a result of not engaging with students throughout the year:

> *"We only hear from reps once a year when it's election time. Then no more."*
> Adult Nursing, 3rd year

> *"2 student reps - one is good."* Paramedic Science, 2nd year

> *"The reps for our year group both left and new reps haven't been elected."*
> Adult Nursing, 2nd year

> "We *do not have a student rep at the moment."* Adult Nursing, 2nd year

While not explicitly stated in these comments, the impact from having ineffective students reps means that students may feel unsupported. Given that the 92.81% feel in some way uncomfortable[11] with giving negative feedback to the university for fear of being penalised, student reps provide an invaluable role in the feedback process by providing a more perceived trustworthy link between students and staff, whereby students can voice their concerns in a safe environment without fear of any repercussions.

Another concern brought up by students was that student reps are not representing the student body properly:

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[11] Considering all responses outside of 'Definitely Agree' as containing some uncertainty around given sufficient support when providing negative feedback

"Student rep - not proportionate representatives. Adult student are the largest section of the cohort but still only get 2 reps - I would suggest 4."
Adult Nursing

"Student / Course reps are good ideas but more recently haven't taken some people's views into consideration - one sided considerations to their friends and what they take forward." BSc Physiotherapy, 2nd year

This issue can be addressed in a number of ways. For example, by educating student reps during their SU-led training on the importance of (and how to) provide equal opportunities for all students feedback. Part of this can include emphasising the important role they play in establishing a link between students and staff to feedback, and looking at the student cohort make-up and adjusting representation to reflect the needs of the students. Although this is something we have worked to improve already in our training for reps, next year we are looking to offer additional and more frequent training sessions. We will ensure that these are at accessible timings and that placement commitments are taken into consideration.

An important thing to note is that the election of student reps now sits within the SU. In response to the comments made in this survey we have made changes to student rep numbers meaning that due to their size Adult Nursing cohorts now have four student rep positions per year of study.

While students are aware of and use the various opportunities to feedback they also recognise that a difficulty still exists with acting on the feedback. This was the most frequently cited problem among the qualitative data we gathered, and we are concerned that students do not see value in feeding issues back, for lack of trust that issues will be addressed:

"The reps listen and promote but then the course leaders [do] not" Adult Nursing, 1st year

"Listened to but not acted upon" Speech and Language Therapy, 2nd year

"Feedback is taken but not acted upon" Adult Nursing, 3rd year

"I have heard and seen discussions and been told there will be a difference but then nothing is done afterwards" Adult Nursing, 1st year

"Feedback is not acted on" BSc Paramedic Science, 2nd year

"The student rep meetings give a good opportunity to voice concerns but I'm not entirely sure how much of an impact this has" N/A

"Some negative aspects are ignored by higher departments (eg help with funding and placement)" Paramedic Science, 2nd year

Representation structures in HSC

HSC has put a huge amount of work into designing a specific representation strategy, based on the University's Code of Practice for Representation, allowing students access to feedback methods. Due to large student numbers within the School, and a wide range of pre-registration undergraduate and postgraduate provision with courses governed by two external professional bodies, there are a number of very specific challenges the School has had to address. This has been achieved by implementing feedback methods at multiple levels, including meetings between Course Directors and student representatives, and sub-group Student Staff Liaison Committees. These allow students to choose a 'Queen's Building' -based meeting (predominantly attended by students representatives studying the Allied Health Professions) or an 'Edith Cavell Building' - based meeting (predominantly attended by student representatives studying Nursing and Midwifery, but also Operating Department Practice and Paramedic Science due to the location of the majority of their teaching). These allow issues that are more specific to particular professions, and the nature of course requirements, to be discussed in a more timely fashion, and allow for the whole-School SSLC agenda to contain issues that apply to students across the entirety of HSC's pre-registration provision.

Going forward, there are some suggestions for continued improvement to the student representation system in HSC that we feel might be useful, including how best to maintain high levels of engagement from student reps and ensuring SSLC administration processes are as effective as possible. This year there was somewhat a lack of communication between the Student Partnership Officer and secretary to the SSLC, which we believe may have led to some issues around organisation and general communication with students. These include miscommunication of sub-group meeting dates and some confusion around the divide between responsibilities of the SSLC secretary, Student Partnership Officer and Representation and Opportunities coordinator. We do however note the additional specifics to the HSC representation structure and have discussed solutions to these issues with relevant staff members. We would like to continue to work closely with the School to improve on this for the 2017/18 academic year.

Further, we have noticed some issues with the way in which general information is filtered to students. We understand that due to the complexity of the courses and external influencing factors (such as placement, external speakers, and LTS services) there is often a great deal of information that students need to understand in order to mitigate stress from the overall student experience. For example, it appears that changes to placement timesheet completion processes and assignment submission schedules/ processes, whilst simple, can cause anxiety to students if the information is not explained clearly and in a timely manner. This is particularly true of the Nursing cohorts due to their size.

We are aware that course teams and Learning and Teaching Services do their utmost to achieve this via Blackboard and email systems, particularly for last minute changes. However we believe that the more that can be done to make communication channels as clear as possible and, for less timely issues, use student representatives to their full potential, hopefully the more satisfied the wider student body in HSC will be. We already note that students studying smaller courses within the School, namely Paramedic Science and the Therapy programmes, provide less negative feedback around poor internal communication. Discussion around placement communication for all programmes, particularly involving external bodies, will be discussed in an upcoming placement-specific report.

We would like to give huge thanks for the incredible hard work that has been put into supporting the representation system by the School, particularly by Student Partnership Officer (2015-2017) and Occupational Therapy lecturer Sarah Drake. We welcome Sarah's successor, Nursing lecturer Coral Drane, into her new role as Student Partnership Officer. We are already impressed with Coral's commitment to student representation and are excited to work with her during the 2017/18 academic year.

Recommendations: Representation and Democracy

1. SU to emphasize the importance of Equality and Diversity of students during student rep training, as well as an objective approach to collecting feedback.

2. SU to train students in articulating the representation structure within the school back to cohorts as effectively as possible considering diversity of student groups.

3. Where 'Wicked Problems' exist, Course Directors to communicate clearly the reasons why issues are not always resolvable.

4. Course Directors to communicate to course teams the importance of feedback and allowing students the time and space to feedback wherever possible and appropriate.

5. HSC to improve promotion of positive impact of student representatives and feed this back to cohorts in specific timetabled sessions.

6. SSLC documents to continue to be released to students in a timely manner via Blackboard and email where appropriate.

7. HSC to promote SSLC Blackboard site amongst student representatives to reiterate meeting dates and location of papers.

Support

We would like to include one final, and important finding that we feel warrants discussion due to the impact it can have on students' educational attainment and overall wellbeing. Among the data collected in our Happy Nurse/Sad Nurse research, quite a lot of students commented on having good support.[12]

> *"A lot of support available."* Adult Nursing

> *"So much support available."* Adult Nursing

> *"I feel I'm being challenged yet supported."* Mental Health Nursing

Students commented on the high level of support they received for a number of specific aspects of the course. These include comments about Personal Advisors; link lecturers; Evidence-based Learning; Peer-assisted Learning; as well as more generally, the nursing lecturers and staff:

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[12] Due to the nature of our data collection methods, students were asked to write one positive "and one negative aspect about their course, these comments therefore encompass many areas of support.

My personal advisor is extremely supportive." Adult Nursing

"Support from PA, link lecturers, PAL." Mental Health Nursing

"Plenty of support from peers/ advisers/ lecturers." Adult Nursing

"I like support (PAL/ PA)." Adult Nursing

"Enjoy EBL - lots of support available" Adult Nursing

"The support provided by staff and lecturers outside of study sessions." Mental Health Nursing

"My personal advisor is extremely supportive." Adult Nursing

"My personal advisor is supportive, friendly and always available to me" Adult Nursing

"I really enjoy…support and friendliness of my EBL group." Adult Nursing

"I like how supportive the staff are" Adult Nursing

What is particularly impressive is the large number of students who commented positively about their Personal Advisor. Based on last year's NSS comments, many students were unhappy with their PAs, often commenting on the lack of adequate support received. These comments were made by students studying across different Schools however, it is a good comparison to make given that based on these comments we have received, HSC appears to be doing better than other Schools in regards to support. We understand that this year HSC have worked hard to provide students with Personal Advisors with a background in the profession they are studying, however due to increasing student numbers this is not always possible. Despite the likelihood of some first year Nursing students not being assigned a Personal Advisor with a specific professional background in their course, overall students remain satisfied with the level of support. Of course, these comments, were made by 1st year students, and while we are particularly happy to see that they receive high levels of support, we would be very interested in doing a similar piece of research for 2nd and 3rd year students to see if this high level of support, so clearly evidenced in 1st years, is maintained throughout.

Recommendations: support

1. Continue to encourage students to seek support where necessary.
2. Work with UEA Students' Union to promote SU-Led 'buddy' scheme Buddy|SU.[13]
3. Share best practice amongst Personal Advisors around appropriate and sustainable levels of support for students.

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[13] More information on Buddy|SU can be found at: https://www.uea.su/advice-housing/buddysu/

CONCLUDING THOUGHTS

Demonstrated by the short report summarizing quantitative data from the Big Conversation survey over the last three years, and accompanying student comments for 2017 (Appendix 1), hugely positive steps have been taken within the school to improve upon HSC student representation and opportunities. This is particularly true of the promotion of feedback opportunities. More students than ever before are aware that these opportunities are available, however going forward it is crucial for the school to identify sound processes to allow students time to access these opportunities. This applies to allowing student representatives the time to attend meetings, facilitating opportunities for them to collect feedback, and encouraging cohorts to discuss issues with their reps.

We are also concerned that there are weaknesses in demonstrating that feedback has been acted upon. As mentioned throughout this report, there will be a number of instances where student concerns cannot be feasibly resolved, but communicating the reasons behind this is essential to maintaining high levels of student satisfaction. Where students suggest that they feel feedback is not acted upon, we predict this is often a breakdown in communication, rather than a resistance against feedback. Our Representation and Opportunities coordinator will continue to work with the school to resolve these issues, as well as working to additional extra-curricular provision in place for Health Sciences students.

Again we would like to thank all staff members in HSC for their continued support in our work. We also welcome feedback on this report from academics and support staff so that we can better understand where more work can be done to improve the overall student experience.

SUMMARY OF RECOMMENDATIONS

1. UEA Students' Union to improve the promotion of events and activities specific to HSC students via student representatives and academic societies.

2. UEA Students' Union to work with Course Directors to raise profile of accessible events and activities.

3. HSC to increase student awareness of course-specific placement coordinators for an improved knowledge of who to contact with placement queries.

4. HSC to include student representation at course- and school- level meetings where possible and appropriate, particularly course director team meetings. We recommend that this is a student in a named position, such as an elected course representative.

5. HSC should review, where possible, assessment schedules and placement periods to allow specific time for assessment completion.

6. Information offered to students at all stages of the admission process around extent of course costs and travel requirements must be reviewed to ensure clarity and transparency.

7. HSC and uea|su to produce brief guide to placement organisation and management, including explanation around why 'swapping' placements is logistically difficult, for HSC students to view on Blackboard. This should also include a brief summary of the processes of placement allocation to help students better understand how decisions are met.

8. Course Directors to work directly with and actively promote relevant academic societies, including regular meetings and updates at appropriate school meetings.

10. Course Directors and other appropriate staff members in HSC to make academic societies aware of national profession-specific campaigns, projects and events where possible, to get involved with, and represent the school as a whole. HSC to work with UEA|SU to promote Academic Societies to cohorts and encourage participation.

11. HSC to work with UEA|SU to promote other extra-curricular activity offers from within the school, including UEA Sport and other HSC-specific events

and opportunities.

12. HSC to encourage student UEA Sport-selected Sports Activators to work cross-faculty to include HSC students in sporting activities organised and promoted within MED, as well as HSC.

13. HSC to work with SU to allow dedicated time, where possible, for students to attend 2017 Welcome Week activities and actively promote these to students as part of a wider extra-curricular experience.

14. HSC to work with SU to negotiate specific off-peak hours for HSC students to access facilities around placement and timetable.

15. HSC to allow funding for SU to coordinate a subsidized scheme for HSC student use of UEA Sportspark gym facilities, similar to the current £1 Swim Card scheme.

16. HSC, with SU support, to coordinate sessions around importance of balancing work load and personal life/ extra-curricular activities, and guidance on how best to achieve this. We believe this is an important professional skill to develop and would improve student perceptions around not having time to be involved in extra-curricular sessions.

17. SU to produce specific training for societies and clubs on involving hard to reach groups, including students on non-medical health courses.

18. SU to emphasize the importance of Equality and Diversity of students during student rep training, as well as an objective approach to collecting feedback.

19. SU to train students in articulating the representation structure within the school back to cohorts as effectively as possible considering diversity of student groups.

20. Where 'Wicked Problems' exist, Course Directors to communicate clearly the reasons why issues are not always resolvable.

21. Course Directors to communicate to course teams the importance of feedback and allowing students the time and space to feedback wherever possible and appropriate.

22. HSC to improve promotion of positive impact of student representatives and feed this back to cohorts in specific timetabled sessions.

23. SSLC documents to continue to be released to students in a timely manner via Blackboard and email where appropriate.

24. HSC to promote SSLC Blackboard site amongst student representatives to reiterate meeting dates and location of papers.

25. Continue to encourage students to seek support where necessary.

26. Work with UEA Students' Union to promote SU-Led 'buddy' scheme Buddy|SU.[14]

27. Share best practice amongst Personal Advisors around appropriate and sustainable levels of support for students.

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[14] More information on Buddy|SU can be found at: https://www.uea.su/advice-housing/buddysu/

RESOURCES

Short report produced from 2017 Big Conversation survey results can **viewed at:**

https://ueanorwich.sharepoint.com/sites/uueas_campaignsandpolicy/_layouts/15/guestaccess.aspx?guestaccesstoken=zPhgSq7C0JcPQH5h6ngefOHFx4Bg0OgcAxW1fHWm3T8%3d&docid=2_0a20317a0fc354969a29f5abe84fa2485&rev=1

Please contact Liv Grosvenor (o.grosvenor@uea.ac.uk) for direct access to the report via email.

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For access to, or information about these resources please contact the authors of the report. Please note that due to confidentiality, we are unable to release some of these data.