

RCN podcast episode 8 - Becoming a Nursing Associate

Episode Summary

In this episode of the RCN Fertility Nurse Forum podcast, Anne is joined by Paige, a nursing associate working in fertility care, and Sarah, her clinic and nursing director.

Together, they explore Paige's journey from healthcare assistant (HCA) to qualified nursing associate, discussing what motivated her to progress, how she accessed the nursing associate apprenticeship and what it was like balancing employment, university study and clinical placements.

Paige shares some of the challenges she encountered during training, particularly moving between unfamiliar clinical placements, returning to academic study and developing confidence outside her usual fertility setting. Sarah offers a manager's perspective, discussing the importance of communication, flexibility, protected study time and working closely with the university to support an employee through training.

The conversation also explores how Paige's responsibilities have developed since qualifying and the contribution nursing associates can make within fertility services. Paige reflects on her increased confidence, accountability and ability to provide greater continuity and support for patients, as well as her ambition to continue her training and eventually become a registered nurse.

This episode provides practical insight for healthcare assistants considering career progression, as well as managers and fertility services interested in developing nursing associate roles within their teams.

Learning Outcomes

By the end of this podcast, listeners should be able to:

1. **Describe the nursing associate pathway** and how an apprenticeship route can provide an opportunity for healthcare assistants to progress while continuing to work within clinical practice.
 2. **Identify ways employers and managers can support staff undertaking nursing associate training**, including protected study time, flexibility, good communication, access to varied clinical experience and collaboration with university teams.
 3. **Recognise the potential contribution of nursing associates within fertility care**, including increased patient support, greater clinical responsibility, professional accountability and opportunities for further career progression.
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Accessible Podcast Transcript

Anne:

Welcome to our RCN Fertility Nurse Forum podcast. Today we're talking about the transition from healthcare assistant to nursing associate in fertility care. I have two fantastic guests with me today. Sarah and Paige, would you like to introduce yourselves?

Paige:

My name is Paige. I qualified as a nursing associate recently and I've now been in the role for about a year. I work at a fertility clinic.

Sarah:

I'm Sarah, the clinic and nursing director. I work with Paige and supported her as her manager while she was undertaking her training.

Anne:

Thank you both for taking the time to join us. Paige, can you take us back to before you became a nursing associate? What did your role look like day to day, and at what point did you start thinking that you wanted to do more?

Paige:

I've been at the clinic for just over five years. I originally joined as a healthcare assistant. My role included pre-assessments, taking bloods, chaperoning patients and supporting the doctors and nurses with paperwork and other clinical tasks.

I'd worked in healthcare before joining the clinic and always knew that I wanted to progress further. I'm someone who wants to do everything I can within my role to the best of my ability, and then I start thinking, "What's next?"

Once I'd achieved everything I could as a healthcare assistant, I approached Sarah about progressing further and undertaking additional training.

Anne:

Did you find the nursing associate course yourself, or did Sarah suggest it? How did it come about?

Paige:

I'd heard about the nursing associate role elsewhere and knew there was an apprenticeship route. That appealed to me because it meant I could continue working while training, rather than having to leave work completely to go to university.

I did my research and then took what I'd found to Sarah. We looked at it together to see whether it was something we could make work.

Sarah:

That sums up Paige's character! She did all the hard work and research. I really just had to look at it and see whether we could make it work. It was completely motivated by Paige.

Anne:

That's an important point for anyone currently working as a healthcare assistant and considering progression. Doing the research yourself and then taking that information to your manager can be a really positive first step.

Moving on to the reality of the course, how did you find balancing work, study and life in general?

Paige:

I managed it quite well because I'm quite an organised and structured person. I planned my time carefully, although there were occasions when I struggled.

The placements were probably the most difficult part because they could sometimes be arranged at quite short notice. Otherwise, I managed balancing work, life and study quite well by allocating time to everything.

Sarah also supported me by allocating a study day, which gave me time to catch up with assignments or prepare for exams.

Sarah:

We sat down at the beginning and worked out that Paige would have one day at university, one study day and three days working in the clinic. We were flexible with that arrangement to support Paige, and equally Paige was flexible with us if we needed her help in the clinic on a study day. There was give and take on both sides.

Anne:

Did you have to undertake placements outside the fertility clinic?

Paige:

Yes. Over the two years, I had six placements. My first placement was at my home base in the fertility clinic, and then I went to other healthcare settings.

That was an adjustment because I was moving into ward settings and different areas of care. A nursing associate can work across different fields, so my placements included paediatrics, community mental health, gastroenterology, surgery and care of older people.

I covered a little bit of everything, but afterwards I definitely knew that fertility was where I wanted to be!

Anne:

What were the biggest challenges or most difficult moments during your training?

Paige:

The placements were probably the biggest challenge. My first placement away from the fertility clinic was particularly difficult. I'd done a small amount of ward work during COVID, but otherwise I hadn't had much experience outside fertility.

It was a shock to the system, particularly adjusting to the hours and night shifts. On some placements, staff weren't always supportive or weren't sure what they should be doing with a nursing associate student.

Sometimes I had to advocate for myself and explain that there were things I needed to do or experience. That could become exhausting and draining.

Starting each placement could also make me anxious because it was almost like starting a new job each time. You didn't know the people or the environment. Eventually you'd become comfortable and then it would be time to leave and start again somewhere else.

That was probably the part I struggled with most, but I got through it and learned a lot from the experience.

Anne:

I think that's something many nurses will recognise from their own training. You spend several weeks getting used to an area and then suddenly you're moving somewhere else. It can be difficult, although you learn an enormous amount from those experiences.

Sarah, from a manager's perspective, what does good support look like when a healthcare assistant is training to become a nursing associate?

Sarah:

I think it's about having a good, open relationship and good communication.

I went into the process not really knowing what to expect or what level of support would be required from me. We had regular online meetings with Paige's university tutor, who explained Paige's objectives and the learning outcomes for each stage of the programme.

We could then look at how those learning objectives related to Paige's work within the fertility clinic and how we could help her achieve them.

For example, some objectives were more appropriate to theatre, where Paige hadn't previously spent much time, so we moved things around within the clinic to give her that experience.

We really went through the process together.

Anne:

It sounds as though there was good organisation and communication from the university as well.

Sarah:

Yes. If I'd had concerns about Paige at any point, I also had a direct line of communication with her university tutor.

There was a point during Paige's first external placement when she was very anxious and didn't feel particularly well supported. I was able to communicate directly with the university about her welfare.

We also had reciprocal students coming into our clinic, so there were benefits in both directions.

Anne:

What would you say to managers who are unsure about supporting someone through this pathway?

Sarah:

Finance can be an issue, and we were fortunate to be supported with that. Not every organisation will necessarily be in the same position.

But from a managerial perspective, it isn't as daunting as it might initially seem.

When you've been in nursing for a long time, it's actually quite nice to take that step back and remember the nurse you were during your own training and why you do the things you do now.

It also makes you reflect on your own practice. I've found the whole experience very positive.

Anne:

Paige, how has your role changed since qualifying?

Paige:

It's changed quite a lot. I'm doing much more now than I did as a healthcare assistant.

I've started taking telephone calls, including welfare calls and pregnancy calls, giving pregnancy test results and supporting patients with concerns relating to their pregnancies.

I see patients following scans, provide injection teaching and check medications. I'm involved in treatment information, talking through consent forms and treatment planning sessions.

I still undertake some of the things I did previously, such as chaperoning and pre-assessments, alongside all of these newer responsibilities.

I'm now very multi-skilled and can work across different areas depending on where I'm needed.

Anne:

And the big question: do you enjoy it?

Paige:

Yes, I love it. I particularly love that I can give patients more now and feel that I can help them more.

I feel more involved in their treatment, and that's something I really enjoy. I've always wanted to do as much as I possibly can within my role.

Anne:

If someone listening is considering the course but thinking, "I'm not sure I'm good enough for this," what would you say to them?

Paige:

They are good enough.

I'm a perfectionist and I'm very hard on myself. Sometimes I would think, "I'm not good enough. I can't do this."

You have to push yourself outside your comfort zone. It will be worth it. The confidence I have now is completely different and I'm so proud of myself for doing it.

Anne:

Another concern for people returning to study can be the academic side. How did you find that?

Paige:

It was hard initially because I'd been away from academic study for a while, so I had to adjust.

The university was very good. They eased us in gently and provided resources to help us with assignments. There was also academic support available if you were struggling with writing or needed someone to review your work and suggest improvements.

I also had support from work, friends and family.

It was difficult adjusting initially, but you get into the swing of it quite quickly and the support is there.

Anne:

Is there a perfect time to start, or do you simply have to go for it?

Paige:

I think you just have to go for it. If it's something you really want to do, you have to take that step.

Anne:

I think your experience also demonstrates the value of doing your research and taking it to your manager. Rather than simply presenting a problem, you're also presenting a potential solution.

That shows determination. If you've already researched the course and worked out how it could happen, you're demonstrating to your manager that you really want to do it and that you're prepared to put the work in.

Sarah:

If you do that, you're probably already the right person for it.

Anne:

Paige, how do you see your career developing from here? What's next?

Paige:

I'd like to complete the top-up training to become a registered nurse. After that, I'll probably keep progressing from there. I'd like to keep developing throughout my career.

Anne:

Sarah, how important do you think the nursing associate role will be in the future of fertility services?

Sarah:

I think it will play a huge role.

Not everything we do within a fertility clinic requires the full registered nurse qualification. People coming from a healthcare assistant background often already have a really strong rapport with patients because they've been there supporting them.

Becoming a nursing associate can therefore be a very natural progression from one role to another and creates a really positive learning journey within the clinic.

Anne:

Do you think it opens opportunities for individuals that they may not previously have realised were available?

Sarah:

Absolutely. I wouldn't necessarily have known this opportunity was available for Paige if she hadn't discovered it herself.

I knew that I wanted Paige to eventually become a fully qualified registered nurse, but I'd assumed that would mean leaving her job, going to university for three years and then coming back.

Discovering that this could be achieved through an apprenticeship pathway was really important.

Anne:

Where can managers and potential students find information about the apprenticeship funding and available pathways?

Sarah:

The government website is a good starting point. You also need to find a university that supports the course.

Initially, Paige was due to attend one university, but the course was cancelled because there wasn't enough uptake. We then had to look at the alternatives and she ultimately moved to another university.

Anne:

Was the university learning online, or did you have to attend in person?

Paige:

It was a mixture. Sometimes we needed to attend university in person and sometimes the learning was online.

Anne:

So there is some flexibility within the programme.

As we start to wrap up, Paige, what are you most proud of in your journey so far?

Paige:

I'm proud of all of it. I'm proud that I actually did it.

I'm someone who always wants to do things, but I can also easily talk myself out of them by thinking I'm not good enough or that I won't be able to do it.

I'm glad I pushed myself and completed the whole course. I'm proud of what I'm doing now, how I'm supporting the clinic and the progression I can see ahead of me.

I'm really proud of everything I've achieved.

Sarah:

One of the things I'm particularly proud of is how Paige's thinking has developed.

She was always brilliant at what she did, and some of the tasks she undertakes are still the same, but there's now a difference in how she approaches those tasks.

She evaluates what she's doing and considers why she's doing it. If she doesn't think there's a valid reason for something, she'll come and ask me. She isn't afraid to ask anybody within the clinic, "Why are we doing it like that?"

I think that's a really important skill that she's developed.

Anne:

And that's how we should practise as nurses. We should be able to question something if we don't think it's right or if we need to understand why something is happening. That's a really important professional skill.

Sarah:

That development in accountability has made a big difference.

Anne:

Paige, in one sentence, how has becoming a nursing associate changed things for you?

Paige:

I'm able to provide a higher level of care for my patients, and it has massively increased my confidence.

Anne:

And Sarah, how has Paige becoming a nursing associate changed things for the clinic?

Sarah:

She's shown everybody what ambition can achieve and where you can go in your career. She's provided greater support to patients, the staff really respect her and it's been a positive experience for everybody.

Anne:

Thank you both so much for joining us and taking the time to talk about your experiences.

The nursing associate role can be an amazing resource within fertility clinics, and I don't think the opportunities it provides are spoken about enough.

Paige, you've demonstrated how much of a difference this pathway can make both to an individual's career and to the fertility clinic in which they work.

Thank you both for helping us understand how the nursing associate pathway can work in fertility care.

Thank you to everybody for listening to the RCN Fertility Nurse Forum podcast. Please keep an eye out for our future episodes. Goodbye.