The Underachieving Student

A workshop for nurse mentors

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The decision to fail

‘As the named mentor, you are responsible for making the final assessment decision and are accountable for passing or failing the student. The grade you award should reflect the student’s standard of practice in the latter part of the placement. The NMC standards state that mentors must keep sufficient records to support and justify their decisions on whether a student is or is not proficient’

(Royal College of Nursing 2007, p14)
Consequences of failing to fail

Failing to fail could potentially have a detrimental effect on standards of care in the future workforce, putting patients at risk. There is an overpowering sense of obligation to protect the nursing profession from incompetent and unsafe practitioners that would put the profession into disrepute

(Duffy, 2003; Black et al, 2014)
How mentoring affects nurses

- Mentoring students is a burden for nurses, time and energy required for the role is added to their already overloaded work day. The extra pressure is stressful and burdensome for mentors.

- Mentoring failing students was hard and painful, created extra work, created stress and worry, sleepless nights, exhaustion, challenged their values and beliefs about mentoring, shouldering the burden of responsibility, could lead to anger.

Elements of the workshop

- How do mentors identify a failing student?
- How do mentors feel about failing a student?
- How do students feel when they are failing?
- Why don't some mentors fail students?
- What helps mentors to manage failing students?
- Sharing knowledge and experience

Making a difference together
What factors help mentors to manage underachieving students?

**Sense of moral duty:** (professional responsibility and accountability) – a moral duty to fail an incompetent student – ultimate duty of care to protect the public from harm

**Courage:** Need to be brave to overcome the negative consequences of the decision – for the student and self and to cope with the reputation for being the one ‘who fails students’

**Doing the right thing:** Mentors avoided lasting moral distress by making the right fail decision, acting in accordance with their values and beliefs

**More support:** more structured time to engage with teaching, more clinical support for caseloads, forward planning for mentor preparation, feedback on performance

**Personal qualities:** although preparation and support are prerequisites for all mentors, it can be easy to underestimate the confidence, assertiveness and interpersonal skill involved in assessing performance, frankness, openness, objectivity and honesty

**Effective tools:** assessment tools with rigorous criteria to measure skills

**Effective processes:** early detection, regular meetings, identify deficits and learning needs, action plans

**Clear lines of accountability:** mentors are unsure to whom they are accountable

(Watson, 1999; Allen and Simpson, 2000; Duffy et al, 2000; Duffy 2004; McCarthy, 2006; Pellatt, 2006; Fothergill et al, 2007; Walsh, 2010; Jervis and Tilk, 2011; Black et al, 2014)
References

- NHS Lothian and NHS Borders (2010) Supporting the underachieving student:: a guide for mentors in practice