

Nursing: Postgraduate Preregistration Expansion

Qualitative market research with potential recruitment audiences

Report of findings



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Executive summary

PROJECT BACKGROUND

The Government has committed to delivering sustainable growth in the nursing workforce. Qualification and training strands that are contributing to this ambition span a range of undergraduate and postgraduate routes, each of which has their own benefits and specific target audiences for recruitment.

HEE commissioned this qualitative market research to understand more about perceptions of postgraduate nursing qualifications and the audiences who could be encouraged into nursing via this route. The key purpose of the work is to help inform compelling marketing activity that will help drive up applications of those wanting to work in the NHS.

41 respondents were interviewed for this study, representing those who would consider a change in career and do not reject nursing outright and covering both those who do not currently work in the health and social care (H&SC) sector and those who do but in non-nursing roles. Those who recently made the decision to change career and qualify for nursing via a postgraduate route were also included, as well as admissions tutors at a range of higher education institutions (HEIs) offering postgraduate preregistration courses.

KEY FINDINGS

- 1. Environmental factors arising from the current pandemic appear to be supporting consideration of changing career for some in the target audience.
 - The pandemic has contributed specifically to considerations around changing careers, both per se and in relation to the health system. For example, changing working conditions (such as a shift to working from home) and concerns around job security in some sectors have caused reflection on whether current careers are the right choice or if new directions need to be taken. The value of the health and social care sector to society has also been highlighted, creating specific interest in this area.
- 2. A wide range of barriers exist to considering nursing per se and to considering qualification via the postgraduate route specifically. However, many of these barriers are solvable by marketing activity.
 - There appears to be significant lack of awareness and knowledge about nursing as a potential career switch, as well as the postgraduate training options to do so, that signal a need for broad marketing around both key points. Many in this sample (whether currently working in the H&SC sector or not) assumed that nursing training is generally undertaken by school leavers and were unaware of mature study options or people retraining. This overarching issue means they are not considering, or even

- noticing, marketing of nursing careers or training routes as they assume it is simply not relevant or accessible.
- There are specific barriers around postgraduate study as a route. While the route can appeal to the audience once it is understood, the audience does not always have sufficiently developed understanding of the tertiary education system to recognise what some qualifications are (e.g., PGDip) and that study can be undertaken that is not directly related to a first degree. Marketing activity needs to help bridge this understanding gap so that the audience can easily see how postgraduate nursing qualifications are relevant to those with a wide range of existing degrees.
- Once the postgraduate route is understood in general terms, there is variation in whether individuals are more drawn towards a PGDip or Masters, broadly based on their confidence level and ambitions. Although their choices will be largely determined by what is available locally, this raises potential considerations around what HEIs might offer.
- There are some specific barriers to considering nursing as a career, which relate to
 questions around some of the practicalities of the role and concerns around working
 conditions. For those who are warmest to nursing, these barriers can be overcome
 when they understand more around the role, the range of roles available within
 nursing and specific benefits available. However, these barriers are very important to
 consider within marketing as:
 - While communications need to be accurate, it is important to avoid inadvertently raising or compounding concerns as this will prevent further inquiry
 - The nature of the barriers indicate that some demographic groups have a better fit with some nursing roles or branches, indicating specific targeting opportunities
- Within the barriers to considering nursing as a career, there are some nuances between those who currently work in the H&SC sector and those who do not. This has implications for what messaging is prioritised within communications targeted at each broad group. There are opportunities for targeting since the two cohorts are 'reachable' in different places.
- There are also general barriers to switching career and the time and cost investment this involves. For the broad audience of potential career switchers, financial cost can involve loss of income as well as acquiring new debt from study. This highlights the importance and value of financial assistance, which is essential for many to consider the change. In broad terms, some demographic groups (age- or circumstancerelated) are also better placed to make investment in training than others.
- 3. Showing the potential recruitment audience existing marketing material highlighted that there are lots of examples that work relatively well to increase interest in nursing and the postgraduate qualification route. However, there is potential for more targeted material and

currently a gap in terms of communications or activity that works to connect the audience to this existing material.

- As noted above, as a first step in the consideration journey, the potential switcher audience (from both H&SC and non-H&SC sectors) need to be made aware of the possibility of retraining for nursing via postgraduate study. In addition, those not currently working in the H&SC sector need help in understanding that it is possible to close the vast gap they perceive between where they are and qualifying as a nurse, and how to do this.
- 4. The development of new communications to fill this gap ideally needs to acknowledge that, while many motivations towards nursing as a career are shared across the potential switcher audience as a whole, those who currently work in H&SC and those who don't have different needs for the primary messaging focus.
 - Having already made a career choice to help others, and knowing quite a lot about
 what nurses do and different nursing roles, those in the H&SC sector need a spotlight
 on what nursing offers them that is different from their current role. This is primarily
 rational benefits around the specific nature of the work and career opportunities.
 - By contrast, those who do not work in the H&SC sector need 'educating' about nursing careers. They need a basic frame of reference which focuses primarily on emotional benefits (a key motivator for change) but also an understanding of variety within and between roles to overcome their initial limited assumptions and encourage further exploration.
- 5. Finally, there are some other ways in which the audience varies which would be valuable to reflect in marketing where the possibilities allow.
 - Specifically, individuals vary in terms of their start point for wanting to change career.
 Some are looking to move away from things they currently dislike towards a career that is more fulfilling and have a specifiic motivation in 'leaving something behind'.
 However, others are more simply lacking fulfilment in what they are currently doing and seeking to move towards a career that will fill this void, provide satisfaction and help them achieve their goals and ambitions.
 - Reflecting these nuances in thinking (where there is opportunity) will help material or messages work harder and speak more strongly to individuals in the target audience.

Background and project objectives

Project background

The Government has committed to delivering sustainable growth in the nursing workforce – and this is vital in delivering the ambitions of the Long-Term Plan¹. However, there are a number of challenges to realising these ambitions for growing the nursing workforce through any qualification routes.

Over recent years, while full-time employees in the NHS grew by 2.8% in 2018-2019, the proportion of Registered Nurses within the total workforce reduced. This issue is not just relative to other health roles. Behind these falling numbers are a significant number of vacancies. In Q1 FY 19/20 there were 44,000 Registered Nurse vacancies in England (12% gapped), and indications are that if this is not addressed this could rise to 100,000 vacancies in 10 years².

Looking at conversion rates from applications to university courses to qualifying as a Registered Nurse, a high number of applications within this cohort tend to be generated each year (with nursing getting more applicants than there are spaces even in low application years)³. However, as with other courses, there is some attrition. Furthermore, there is also natural attrition within the workforce over time, as nurses retire or move out of the profession for other reasons.

To create growth in the workforce, a significant increase in numbers of qualified nurses is needed. To date, the health sector in England has been supplementing its recruitment to the nursing workforce with already qualified nurses from abroad. However, it is important and valuable to grow domestic supply.

In looking at the options and opportunities for creating growth, postgraduate programmes and entry to the profession appear particularly attractive as a solution, for a number of reasons.

Allowing NMC registration within two years, it is one of the fastest routes for creating qualified nurses (both Apprenticeships and undergraduate study take longer). Those with existing degrees and, for some, existing work experience in other sectors, can also bring proven academic ability alongside general experience, resilience and skills and attributes that make them well suited to nursing. Furthermore, while there is limited data in England,

 $^{^1}$ In 2017, a target was set to grow undergraduate Registered Nurse places by 25% 2

https://www.health.org.uk/sites/default/files/upload/publications/2019/S05 Falling%20short The%20NHS %20workforce%20challenge.pdf.

³ Undergraduate degrees can be achieved through the university route, blended learning programmes or apprenticeship (which delivers a degree-level qualification on completion).

data from other countries indicates postgraduate routes are also more successful in attracting a broader profile than traditional nursing training programmes.

While changes in the job market may present a natural opportunity for some to retrain and switch career, nursing will need to compete with other public sector roles (health and other) looking to recruit from a similar pool.

With these needs in mind, HEE commissioned this research to understand more about perceptions of postgraduate nursing qualifications and the audiences who could be encouraged into nursing via this route, in order to inform compelling marketing activity that will help drive up applications of those wanting to work in the NHS.

Research objectives

The overall objective of this qualitative research was to provide a rich exploration of the postgraduate audience journey to discovering nursing as a career option and the opportunities for both reach and leverage amongst those who are appropriate for a career in nursing and eligible for the postgraduate route.

Specific areas for the research to explore included:

- Motivations to applying for postgraduate training in nursing and what content works well to create or enhance this
- Barriers to applying for postgraduate training in nursing (including any myths around this study route) and what helps counter these barriers
- The decision-making journey, understanding potential touch points in terms of information or messaging needs (what kind of content works well in respect of these) and times and places to reach the audience
- Understanding what can enhance perceptions of nursing careers and the postgraduate route to become a more attractive option

Research methodology

OVERVIEW OF METHOD

The research included three broad sample sub-groups, each of which have a valuable and potentially different perspective on the research questions:

- **Potential career switchers** (with two sub-sets of potential switchers from non-H&SC careers and people in existing H&SC roles): 18 respondents
- Those already committed to nursing through postgraduate study (including both current students and newly qualified practitioners): 10 respondents

 Those who considered postgraduate study for nursing but changed their mind: 4 respondents

In addition, nine admissions tutors with responsibility for postgraduate nursing courses, representing different institutions and different courses, were interviewed.

All were interviewed in one-to-one interviews over Zoom. All interviews were around 90 minutes, except those with the admissions tutors which were 30 minutes.

The potential career switchers who are currently not in H&SC roles (12 in total) were also asked to undertake a simple task prior to interview, focused on exploring a career in nursing and the options available to them to qualify and make this switch. The purpose of this was to emulate the process they would be likely to go through if prompted to investigate a career in nursing, to understand where they look and how they perceive and understand the information they find.

SAMPLE DETAIL

The table below gives a more detailed breakdown of the specific audience sub-groups and the criteria used to define them:

Specific audience sub-groups / quotas:		Sub-total		
	per group			
Potential career switchers, curre	12			
have not previously considered r	nursing and would meet minimum entry			
requirements for study (minimur				
Existing H&SC staff with related	6			
entry requirements who haven't				
Current students on a	Those who started training after a related	4		
postgraduate pre-registration	postgraduate pre-registration undergraduate degree and experience			
programme, including:	programme , including: Those who started training after a non-related			
	undergraduate degree			
Newly qualified professionals, re	4			
undergraduate degree via a post				
Individuals who have considered but didn't apply for postgraduate study in		4		
nursing				
Admissions tutors with responsi	9			
Total number of research partici	41			

Definitions:

- Related undergraduate degree included any accepted by at least one HEI, e.g. social sciences, human sciences, biomedical sciences, public services
- Minimum entry requirements in addition: minimum 5 GCSEs including Maths, English and Science at grade C/4 or above

In addition, the sample represented:

 Amongst potential career switchers: All had a genuine desire or requirement to find a new job or career; all were open to a career in nursing (non-rejecters) but had not

- considered this career yet; all met eligibility criteria for post-graduate entry; and a spread of current employment sectors, age, socio-economic group and gender was represented
- Amongst existing H&SC staff with related undergraduate degrees: a spread of field of existing degree, age and gender were each represented
- Amongst those who had considered but did not apply for postgraduate study in nursing: reasons for not applying had to be influenceable by marketing (i.e., decision should not have been as a result of insurmountable practical issue such as illness or complete rejection of role); and a spread of demographic criteria (gender, age) was represented
- Amongst current students and NQPs: a spread of course type (PGDip and Masters) was represented
- For all: a spread of geographical location through England

Fieldwork took place between 3rd March and 22nd April.

Respondents in the potential career switcher, current H&SC staff and those who considered by did not apply sub-groups were drawn from the following locations: Birmingham, Bournemouth, Bristol, Essex, London, Manchester, Merseyside, Sheffield and Stoke-on-Trent.

Current students, NQPs and admissions tutors also represented a range of locations covering north, midlands and south of England. These locations are not detailed to protect personal identity.

The research team included: Joceline Jones, Matt Wheeldon, Tillie Harris, Elena Hailwood, Hannah Jeffery and Martha Whiting.

* * * * *

Key Findings

1. Overall warmth of the potential career changer audience towards switching

This section outlines how potential career switcher respondents in the sample (whether currently working in H&SC or other sectors) were currently thinking about a change of career.

It also highlights some specific categories within these audiences who are potentially warmer to considering nursing as a career switch.

THE STARTING POINT OF THE AUDIENCES IN CONSIDERING A CHANGE OF A CAREER (AND NURSING WITHIN THIS)

Potential career switchers who currently don't work in H&SC

Respondents in this sub-group, including those who had actively considered postgraduate study in nursing but not applied, came from a diverse range of backgrounds and working circumstances. However, there were some overarching themes in how they were thinking about possibly switching careers at this point in time.

The pandemic has been a specific trigger, providing both a natural 'break point' and a focus on health:

- Those who had started working from home sometimes found this caused reflection on their normal work environment and what they do and don't like about it, leading to thoughts of change to something more in line with their wants and needs.
- Those who had been furloughed and/or feeling the sector they worked in is under threat economically, were often focused on job security both short and long-term and seeking something more secure.

Covid really made me doubt my job security ... so I started to think about other careers. Also, furlough was so boring ... [Potential Career Switcher, Non-H&SC, F, 31, C1, Bristol]

 With a spotlight on the positive contribution NHS workers are making to the pandemic, and the respect and thanks from much of the public, some were also thinking specifically about a role in health being both valuable to society and personally fulfilling. The findings also suggest that some demographic factors have an influence on how open or likely someone is to making a change. Within this sample:

- Younger respondents (in their 20s through to early 30s) were more likely to feel they
 have time on their side to build a full career, even if they switch. Depending on life
 stage, they can also have fewer commitments that create limitations or constraints in
 what they decide to do and how this affects their personal financial situation and
 availability of time to commit to training.
- Those at the oldest end of this sample (in their 50s) also seemed closer to being willing or able to switch, having a 'now or never' attitude. However, their ability to change was linked largely to the availability of broader financial support from a partner (e.g., to cover household and living costs).
- Those in the mid-range of mid 30s and 40s had the highest barriers, as a result of having most to lose in terms of current financial security and job progression and high levels of financial responsibility given the current stage of their mortgage or age of dependents.

I have thought about changing — I'm not too old, life's too short to not do what you want, but it's long enough that you can make changes. [Potential Career Switcher, H&SC, M, 50, C1, Birmingham]

Additionally, barriers raised by life stage can impact on which specific nursing roles are more appealing and seen as feasible. For example, community or primary care-based roles can present an appealing proposition for those with younger children, whereas hospital environments and shift patterns may present more difficulty as a job option.

Potential career switchers who currently work in H&SC

Respondents in this sample who were currently in H&SC roles were recruited to be 'open to considering a career change' but reflected a range in terms of the extent to which they had thought about this to date.

Many of the pandemic-specific factors above that have contributed to a desire to change career do not apply to this group, since their working practices have not changed in the same way as other sectors and they have not experienced the same issues around job security. However, the pandemic has still placed a focus on the value of frontline service delivery to the public / patients and in terms of job satisfaction.

Aside from this, considerations around changing career link to different aspects of low or reduced satisfaction in their current roles. That is not to say that they are all highly dissatisfied but rather that their specific current role is less fulfilling in some ways than they would ideally want it to be. For example, some felt that they had ended up in their current role as a result of circumstance or even progression, but this direction had moved them away from aspects of work they enjoyed.

NOTABLE CATEGORIES WITHIN THE RECRUITMENT AUDIENCE

Within the two broad sample segments of potential recruits currently working in H&SC roles and those currently working in other sectors, there were indications that certain groups or audience 'categories' may be warmer targets for nursing through the postgraduate route.

Amongst those currently not in the H&SC sector:

- Under 30s who have recently graduated, especially with social science degrees
- Those with psychology degrees or latent interest in psychology
- Women on maternity leave
- Those in low paid public sector roles

Amongst those currently working within the H&SC sector:

- Those working in other roles involving children
- Those working as carers
- Those working in support services rather than frontline roles
- Senior / older / more experienced H&SC workers

It is worth noting that nursing was 'off the radar' for all respondents falling into any of these categories due to the general barriers around awareness of the postgraduate routes into nursing. The option can be compelling when introduced, but there are some nuances to consider in terms of specific information needs by category.

The reasons why these are potentially warmer targets and the overarching information needs or priority messaging focus for each sub-group are outlined below. More detail on specific motivations to considering nursing is outlined in Section 3, and barriers to considering nursing in Section 4.

Categories amongst those currently not working in H&SC

Under 30s who have recently graduated, especially with social science degrees

Many of these respondents had a strong interest in people which had led to, and had been built further by, their initial degree. However, these respondents also tended to lack an obvious current career path or the options that are more obviously a closer fit with their interests are both few and not well paid.

Most in this group were also open to doing entry-level H&SC work to gain experience for the postgraduate qualification.

A specific pool within this category is those currently looking at careers in charities or mental health. For these respondents, both the broad area of health/care for others and job security within nursing are appealing.

It's really made me think, this conversation, it's like the guy said [on university life as a student nurse] it's a job for life and it's worth it if it makes you happy, it's only a couple of years of studying I can probably deal with not having as much money for a bit ... I've got my whole life ahead of me really [Potential Career Switcher, Non-H&SC, F, 22, C1, Manchester]

The key information needs / interests for this group are:

- The possibilities for progression
- The variety of the roles available
- Suggestion that nursing will provide meaningful work that positively impacts the lives of others

Those with psychology degrees or latent interest in psychology

Psychology is an oversubscribed undergraduate degree and it is extremely competitive to progress to further qualification and a career in this specific field of health. The realisation that there are not many opportunities can come quite late, leaving many unable to pursue their initial career aspiration. Those who take Assistant Psychologist positions can find that they have no or little progression possibility and low pay.

I ended up in healthcare because as an Assistant Psychologist and in all mental health jobs there was no permanent contracts...it was really demoralising so I ended up getting a job as a healthcare assistant and I ended up staying there because I was making more money as an HCA doing unsociable hours than I was as an AP [NQP, F, MSc Adult Nursing]

At the same time, psychology attracts people with similar instincts to those attracted by nursing, especially nurturing tendencies and an interest in care.

Some admissions tutors mentioned psychology undergraduates who are considering further Master's level psychology study as potential targets for postgraduate nursing.

The key information needs / interests for this group are:

- The possibilities for progression
- Opportunities that might exist as a nurse to get involved in further research and / or the academic side of nursing

Women on maternity leave

For this group, the focus on health and care has quite often been sharpened due to their recent experiences and the arrival of children. The time away from their normal career also presents a key time to be considering their work options for the future. However, the disruption of becoming a mother for the first time can mean that although this is a key moment to consider a career change, the expectation for some may be that they don't intend to go ahead with the change immediately, but rather when their children are older (i.e., aged 8-10).

For this group, the part time and community roles are likely to be particularly attractive, as they believe they would allow them to fit in nursing around their childcare and family responsibilities.

The key information needs / interests for this group are:

- Information and awareness raising around community-based and primary care roles (as these are perceived to offer more family friendly ways of working, with daytime hours rather than night shifts)
- Information on working hours more generally
- Any opportunities within nursing for part-time work

Those in low paid public sector roles

This group, by their nature, are already likely to have a strong interest in public service, which fits well with potentially becoming a nurse. However, within this sample, there were relatively high levels of dissatisfaction and negative comparisons of their current jobs (which included roles in local authorities and with children) versus the health sector.

The key information needs / interests for this group are:

- Financial support during training
- Length of time retraining will take
- Pay progression / projections
- Assurance that their skills and experience will be recognised
- Assurance that they won't feel alienated while training (significant fears for some around being too old to go back to university)

Categories amongst those currently working within the H&SC sector:

Those working in other roles involving children

Found especially in child social work and nursery nursing, these respondents typically wanted to improve pay and/or conditions while still working with children.

Those working as carers

Those in this group may have ended up in the care sector because of lack of other opportunities. They are potentially already looking towards moving out of the role to improve their pay, career prospects and status. Some in this sample also had a strong desire to make others, especially their family, proud of them for what they do.

Those working in support services in the H&SC sector

In this sample, respondents who were currently working in support services reflected a wide mix of current roles and skills. However, some who saw their work as a 'back room' role, wanted to be more frontline, particularly after the experience of the pandemic. The motivation for those in this group was wanting to do something with more direct impact on

individuals. However, at the same time, they were conscious of not wanting to lose experience-based pay.

Senior / older / more experienced H&SC workers

Within this sample we had examples of senior employees who wanted to get back to the 'frontline' of service delivery and away from what they considered to be the paperwork or management burden into which they had been promoted. This led them to be looking for a role where they can either exercise leadership or autonomy - or be more involved in day-to-day work. Some in this group felt that they had nothing left to prove in their current role and would be happy just being team members in the future. Others may have reached a ceiling in their current role and be looking for a chance for progression.

2. The journey to discovering nursing and what this means for marketing content and placement

OVERVIEW

The research highlighted some key differences to consider when targeting the two broad cohorts of those who are currently working within the H&SC sector and those who work in other sectors with campaigns about nursing careers and specifically postgraduate training:

- They are at different start points in terms of their consideration of nursing; those in the H&SC sector having already committed to a care role in some way and have a much higher degree of familiarity about nursing. This makes a difference to what they need to hear about nursing as a career in the first instance.
- Their journey to discovering nursing as a possible career switch, and the postgraduate route to training, is potentially different. Specifically, they either can or need to be reached in different places with this information.

These two considerations are linked as they cover both what the audience needs to hear or understand and where they need to hear or see it. More detail to explain key differences between the two cohorts is given below.

POTENTIAL CAREER SWITCHERS WHO CURRENTLY DON'T WORK IN H&SC ROLES

The discovery and decision-making journey for non-H&SC potential career switchers is 'logical' but it highlights why nursing is initially out of consideration, as well as some sticking

points. Diagram 1 below illustrates the key stages that this audience go through when thinking about a career switch and where discovering nursing fits within the journey:

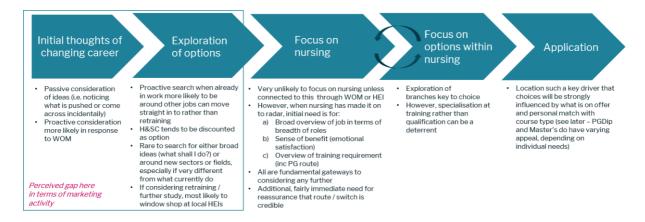


Diagram 1: The discovery and decision-making journey for non-H&SC potential career switchers

As detailed in Diagram 1, if the audience are looking anywhere for inspiration on job / career change it is likely to be online and focused on the local jobs market. Most in our sample claimed to be going online initially rather than speaking to anyone (whether professional or family/friend) about possible options.

Any initial searches and areas of exploration are unlikely to be around 'healthcare'. Instead, their searches tended to be more vague or general and likely to cover a very wide range of public service. When searching, respondents in this sample claimed they were more likely to look for options that have some degree of fit with their experience to date (whether degree focus or work experience) than to search with a broad enquiry looking for inspiration (e.g., 'what shall I do?'). This is because they expect their chances of being successful in a job application to depend partly on having some knowledge or experience that is transferrable. However, they are also generally not considering retraining or further education as part of the career switch, knowing that this comes with cost of both income and time.

I think I might go online and spend time researching it! I didn't know there were so many different parts...now I need to decide if there's something right for me. [Potential Career Switcher, non-H&SC, F, 47, C1, Manchester]

For those who are considering further study as part of their change, there is again an assumption that whatever they choose at Master's level might need to have some connection to their initial degree.

When looking for jobs or options for Master's study, the lack of focus on health and social care does not necessarily reflect low interest in the sector. Beyond the assumptions mentioned above about needing to link to current experience, there is also some expectation that most healthcare roles which involve frontline care, particularly those in a medical environment, are unlikely to be accessible to career switchers given a need for specific qualifications.

Because I did politics, I didn't know I could do nursing with my degree, it's very different. I think I just assumed I'd need science [Potential Career Switcher, non-H&SC, F, 22, C1, Manchester]

In relation to nursing specifically, there is an additional assumption that nursing is something school leavers tend to move into via a specific training route⁴, rather than something people consider training for at a later stage.

Another consideration is that for most potential career switchers in this sample, their search is also extremely local. None wanted to relocate as a result of being rooted in the local area and the expectation that moving area creates expense. As a result, they were more likely to:

- Check their local jobs market
- Look at the local university or higher education facility to see what is offered there, rather than going to a national site

This overall journey to discovery outlined above highlights some key points to consider in marketing planning, and specifically in relation to creating initial engagement and getting nursing on the radar for this cohort:

- This potential career switcher audience who are currently not working in H&SC are not spontaneously looking for nursing (or other health and social care sector roles) and their start point is that nursing is not likely to be relevant to them (through lack of accessibility to training or as a viable career switch)
- They might come across other roles or marketing of competitive options, such as police, teaching, local Government, civil service, etc while searching
- At the first point at which communications about nursing as a potential career switch reaches them, this audience have some key information needs that need meeting immediately in order to consider the idea any further:
 - Very high-level sense of what a nursing career is about with a focus on both emotional reward and range of roles/options as the highest-level motivators and barriers to address⁵
 - Very clear signposting that nursing training is available to those with degrees in other subjects through a specific type of study
- As a fairly immediate next step, the audience needs information (or access to information) that addresses a raft of immediate questions around feasibility of a switch to nursing 'for someone like me' to solve a 'credibility gap' around whether this is a realistic consideration

These considerations highlight various solutions for closing the gap between sparking thoughts around the possibility of nursing as a career switch and taking action to find out more:

⁴ Knowledge around training routes is generally very low for those who are outside of the H&SC sector, with an assumption of nursing specific training but very little understanding about the different routes, education level or type of qualification that nursing training leads to

⁵ See later Sections 3 and 4 for more detail.

- Advertising that draws attention to nursing as appropriate for career switchers and spells out the route of postgraduate training. As noted above, this needs to spell out at a high level that nursing is a great career and the headline benefits of emotional reward and variety across roles⁶. It also needs to highlight very clearly the ways for career switchers from other careers to qualify. Within this, given low familiarity with language around tertiary education and postgraduate study in particular⁷, the audience needs some degree of 'handholding' and strong signposting (e.g., flagging relevance to those with 'degrees in other subjects').
- Case studies to help potential career switchers quickly 'join the dots' by seeing that other people have done it and how. Case studies are potentially a very hard-working format once the initial idea around nursing has landed, able to cover where a nurse who qualified through the postgraduate route came from, where they've got to and how they got there, as well as information that boosts motivations and helps counter barriers. Depending on channel these can also work to create the initial connection with nursing (e.g., articles).

If you already have a degree... you want real life stories of different people and how they have done It. [Potential Career Switcher, non-H&SC, F, 45, C1, Birmingham]

• Information or information tools to help people understand where they fit in. There is a clear need for information that helps this audience navigate two things. Firstly, how their own experience to date can lead to nursing and how their experience and qualifications can lead them into training. Secondly, given that nursing is a large and varied field, many also need help with matching field and/or role types to see what is available and where they might fit beyond the immediate assumption of hospital nursing.

A specific watch out here is that the need to specialise into a field at training, rather than on qualification, can be a deterrent for those who feel they might make the wrong choice. In light of this, information that flags potential routes to switching fields or variety within specific fields is likely to be helpful.

I suppose for me it would be more about a definitive route, almost like a pathway, like this is where you currently are...almost like something I could fill in, like an online tool I could put in my current qualifications and it would tell me what additional learning I would need, what kind of salary I could potentially start on [Considerer, 35, B, Manchester]

Within this project, we explored reactions to a work-in-progress infographic that is being developed to help the audiences understand their route to qualification. In its current form,

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⁶ Variety is important to ensure that the audience has an immediate impression of role options, since the hospital or urgent care environment can lead to initial dismissal

⁷ See Section 5 for further detail

while it worked relatively well for some, many were finding it less useful as they did not understand much of the terminology and could not find themselves at the start⁸.

Diagram 2 below highlights some examples of existing marketing collateral that were working relatively well for this audience to meet some of their information needs. The darker the green within the arrow, the more positive overall.



Diagram 2: Examples of existing marketing collateral that work well for those not in H&SC

Overall, there were plenty of examples that provide compelling detail once the target audience is connected to it, with some working better for specific demographic groups within the audience. A key requirement, however, is for more material that can push them towards these.

If new material is developed for this postgraduate target, there are also considerations around their specific spread of motivations and barriers, which would be valuable to reflect within the content⁹.

More detail on specific examples of existing marketing material is given in the Appendix.

POTENTIAL CAREER SWITCHERS WHO ARE CURRENTLY WORKING IN THE H&SC SECTOR

The discovery and decision-making journey for those currently in H&SC roles shares some aspects with those who are outside of the sector but also has some differences.

These key differences are:

⁸ See Appendix for more specific detail on this example.

⁹ See Sections 3 and 4 for more detail on motivations and barriers
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- They have a higher understanding of what nursing roles are about in terms of both the emotional benefits of the role and working context, which brings some specific queries and concerns
- They are often connected to H&SC-specific communication channels and are therefore reachable via this route, as well as within channels focused on health sector specific jobs

Diagram 3 below illustrates the key stages that this H&SC audience go through when thinking about a career switch and where discovering nursing fits within the journey:



Diagram 3: The discovery and decision-making journey for potential career switchers currently in H&SC roles

As noted in the diagram, considerations around changing role began from a different start point for respondents who were already working in the health and social care sector. Generally, although not looking to move out of the sector, some felt they would still ideally be doing something else that was a better fit with them (their skills or what they wanted day to day or over time).

This frame of mind means they quite often noticed ideas or became interested in other roles when they came across information about them passively, from word of mouth or interaction with others in different roles in their current job. In terms of word of mouth, respondents in this sample often had close or more distant family members in the profession already.

Given they are already in the H&SC sector, they are often consuming sector-specific information and channels, therefore this is one route whereby some had gathered ideas and where others can be reached.

It's something you see all the time when you work in the public sector, there's lots of weekly newsletters and recruitment drives and areas where they say you can transfer over...it's always there in the background [Potential Career Switcher, H&SC, F, 40, C1, Manchester]

Importantly, given their higher level of familiarity with what nursing is about, their immediate information needs are different to potential career switchers from other sectors. Material

that only 'reaffirms what they already know' (e.g., the emotional benefits of nursing) is less likely to cut through to create interest in the role as a career switch than information which provides a view of comparative benefits versus their current role (e.g. variety of settings, transferability, good opportunities for progression for those who want it, pay) and answers some of their concerns and queries (e.g. hours of work, extent of training requirement, etc).

The pension scheme and student loans stand out...good to know you're supported. [Potential Career Switcher, H&SC, F, 51, C1, South London]

There are also some concerns that arise from discussion around pressure on the nursing sector. For example, there was widespread awareness of a shortage of nurses, which can enhance the sense that there are plenty of jobs and opportunities available but can also bring concerns around working conditions.

However, as with potential career switchers who do not work in H&SC sector currently, there is some assumption that nursing is a career that people have opted in to and started training for from school. While we saw slightly higher knowledge amongst these respondents around the existence of a postgraduate training route for nursing, many were unaware. These assumptions and lack of knowledge can lead to dismissal of nursing as an option unless the opportunity to switch via a training route is made explicit.

I wasn't aware that I could do something to get into nursing like this, what I knew about was like a train on the job type thing [Potential Career Switcher, H&SC, F, 40, C1, Manchester]

There is less of a requirement amongst this audience for help in working out which field of nursing is a best fit and fewer concerns around specialisation at the point of training. Those in this sample were looking for best fit with the interest or experience to date which they felt would both help with their training and potentially with the role, being able to bring skills across and not start at the very bottom or allow them to progress more swiftly.

Within this small sample, interest also seemed to be slightly higher towards Master's (versus PGDip) as this was connected to assumed quicker or better opportunities for progression, particularly for the more academic. However, as with the non-H&SC potential career switchers, most in this sample are unlikely to consider relocation, as a result of being rooted in the local area and the expectation that moving area creates expense. As a result, they were more likely to be influenced by what is on offer at their local university or higher education facility.

The overall journey to discovery for potential switchers currently in H&SC roles, highlights a slightly different set of key points to consider in marketing planning (versus those not currently in H&SC roles):

 As with the non-H&SC sector potential career switcher audience, many are not spontaneously looking at nursing and there can be an assumption that this is not particularly accessible as an option

- However, they may be looking at other health sector roles with some relevance to their current career
- At the first point at which communications about nursing as a career switch reaches them, they have some key information needs that need meeting immediately in order to consider the idea any further, which are nuanced versus those currently not in H&SC roles:
 - 'Permission to consider' as someone in a different H&SC role, e.g., through signposting the possibility of a switch
 - Very high-level sense of what a nursing career offers that is more unique to nursing and generally beneficial - with a focus on making a difference at the front line, variety in and across roles and potential for progress as the highestlevel motivators and barriers to address¹⁰
 - Very clear signposting that nursing training is available to those with degrees in other subjects through specific types of study and that financial support is available
- In terms of channels for reaching them, they are often consuming broader health sector information and communications

Again, these considerations highlight various solutions for closing the gap between sparking thoughts around the possibility of nursing as a career switch and taking action to find out more:

- Announcement advertising that signifies the opportunity would serve as a link to find out more. As noted above, this needs to spell out key points that create interest. It also needs to highlight very clearly the ways to qualify.
- Case studies to help career switchers from H&SC quickly 'join the dots' by seeing that other people have done it and how. As for the other cohort, case studies can potentially work hard to give examples of the journey to qualification, reinforce motivation and benefits, and answer queries. Depending on channel these can also work to create the initial connection with nursing (e.g., articles).
- Information or information tools to help people understand where they fit in. While, as noted above, there is a strong need for information that maps this, some find it useful to see a map of the qualification route and how they fit in. On the whole, we found the work-in-progress infographic worked better for the H&SC respondents who tended to be slightly more familiar with some of the language and terms and therefore found it easier to use. However, this was not the case for all who needed more assistance to understand where they fit.

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¹⁰ There is some nuance here versus the non-H&SC sector potential career switcher audience. See Section 3 for more detail.

Diagram 4 below highlights some examples of existing marketing collateral that were working relatively well for this audience to meet some of their information needs. The darker the green within the arrow, the more positive overall.

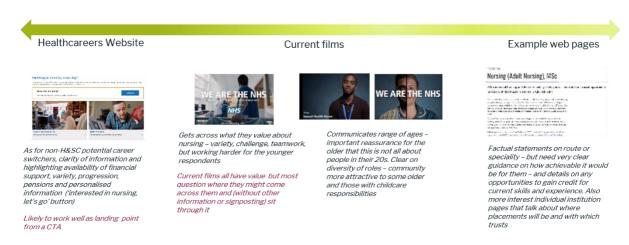


Diagram 4: Examples of existing marketing collateral that work well for those currently in H&SC

Overall, as for those in non-H&SC careers, there were plenty of examples that provide compelling detail once the audience is connected to it. Again, however, a key requirement is for more material that can push them towards these. If new material is developed for this postgraduate target, there are also considerations around their specific spread of motivations and barriers, which would be valuable to reflect within the content¹¹.

More detail on specific examples of existing marketing material is given in the Appendix.

3. The specific motivations of the recruitment audiences towards a career in nursing and what they need to hear

OVERVIEW

This section details the specific motivations that potential career switchers (either within the H&SC sector or outside of it) hold in respect of a career in nursing. These are obviously important for developing compelling marketing content that will raise interest in nursing as a career, which is the first step to considering retraining via a postgraduate qualification.

For the audience as a whole, motivations are typically either emotional or rational in nature and tend to reflect broad themes. Most motivations are also shared across the two cohorts of potential career switchers who are currently within the H&SC sector or outside of it.

¹¹ See Sections 3 and 4 for more detail on motivations and barriers

However, these two groups do differ in terms of which motivations are highest priority to reflect in marketing, as a result of how familiar they are with nursing currently.

For those not working within H&SC currently, emotional motivations tended to be much more top of mind initially and important to creating initial engagement and interest. The rational motivations are also important but tended to become more important further into the consideration process, particularly when making the decision to commit to a career change.

Help people recover, I don't think anything's more rewarding than that [Potential Career Switcher, Non-H&SC, F, 22, C1, Manchester]

Those already working within H&SC did have emotional reasons for wanting to potentially work in nursing. However, their current career path was already delivering on these to an extent. As a result, their view of retraining as a nurse tended to be much more transactional than for the non-H&SC cohort. While it was helpful to give a reminder of emotional motivators, these were affirming rather than highly motivating or new. Instead, they were more initially concerned with details around pay, conditions and employability than those not currently working in the sector.

95% employment – that's a huge amount, that's really high. that's very important if you're going to change your whole life up you need to know you're going to have a job at the end of it [Potential Career Switcher, H&SC, F, 40, C1, Manchester]

Each motivation detailed below is something that the audience believes in when prompted with messaging or information. As noted elsewhere this report, broad barriers that are currently preventing the audiences from understanding that nursing is a potential career option, which means that these motivations are not sufficiently conscious to drive action unless prompted.

Once presented with the alternatives of the Master's and PGDip as qualification options, there are other motivations to consider that relate to both fit with the individual but also the relative value of the two qualifications. Perceptions of the two and the specific motivations to considering each route, are outlined in Section 5.

SPECIFIC MOTIVATIONS TOWARDS NURSING AMONGST POTENTIAL CAREER SWITCHERS NOT IN THE H&SC SECTOR

As noted above, for potential career switchers currently not in the H&SC sector, emotional motivations tended to be more top of mind than rational ones when thinking about changing career generally and nursing specifically. It was common for respondents in this sample to talk about wanting to 'do something worthwhile' and 'making a difference'.

This stems primarily from being unfulfilled in their current role. We saw two broad clusters within this sample group of:

- Those who disliked aspects of their current job, which they felt made their working experience negative. Examples given were that their daily work was monotonous, that they sometimes experiencing a lack of cohesiveness or camaraderie with colleagues and, for some, a lack of respect for what they do (either from their employer or more generally). Overlaid on this was a recognition of their work not having any personal impact (either generally or in a way they cared about). These people wanted to move away from these aspects of their current working circumstances, either just losing these negatives or replacing them with something more satisfying and fulfilling.
- Those who were less focused on aspects of their job that they disliked and more on lack of fulfilment. They were less likely to talk about specific negative experiences that irked them and more likely to mention experiencing a lack of fulfilment or purpose. Feeling that they were not having any personal impact (either generally or in a way they cared about) was often top of mind and, for some, there was an overt desire to work in a profession which was recognised as socially valuable.

These two points of view are useful to consider for marketing content, since reflecting and creating a strong match with how people feel about their current position may increase engagement and perceived relevance of messaging.

I don't want to go back into recruitment...I've proved to myself I can learn new things in the past year...I want something where I can talk to people and give back. I want something long term that challenges my brain. [Potential Career Switcher, Non-H&SC, F, 47, C1, Manchester]

However, it is the case that once emotional drivers had prompted an initial response, the practical considerations become important in terms of getting individuals to commit to the idea of retraining. Pay and benefits become important hygiene factors; needing to be at a certain level for the career to be feasible. However, where they are better than expected, these contribute to sense of benefit and can become a motivator.

Emotional motivators for non-H&SC potential career switchers

There are four broad themes for the emotional motivations of this cohort, each of which is comprised of specific drivers. The relative priority of these and specific drivers within them can vary by individuals. However, all non-H&SC potential career switchers showed some mix of these themes:

Emotional theme	Specific drivers		
A sense of wanting to be with	Personal experience		
people who are experiencing	Wanting to save lives		
vulnerability	Helping others		
A desire to be 'part of	Working as a team		
something'	Being part of something 'bigger'		

Variation in the day to day and across roles		
Respect from others		
Self-respect		

In more detail:

A sense of wanting to be with people at an emotional time

This theme is made up of positive personal experience, a desire to save lives, and a more general desire to help others. There is an overall perception of 'specialness' around the role (at all the levels in which it is delivered) which can't be mentioned explicitly but which people believe and want to be part of.

My interest in nursing is much more linked to my interest in people and caring.... rather than being about science and medicine. [Potential Career Switcher, Non-H&SC, M, 26, B, London]

Personal experience, where present, was often key. It could be driven by a sense of debt, because the NHS had helped them as an individual, or the service had helped someone close to them. This led to a desire to 'pass the favour on' and make sure that others have the same experience from the NHS in the future.

I've been thinking about nursing for four years...since I had my little boy. I was in hospital then and saw the amazing job they do. [Potential Career Switcher, Non-H&SC, F, 35, B, Manchester]

Wanting to save lives was seen as a key reason for going into nursing. It was the most obvious way in which nurses were seen as making a difference to those around them, and gave a sense of purpose.

A further consideration was wanting to help others who are experiencing vulnerability. At the heart of this was a belief that when people are at a low point they need someone to help them. Some were motivated by a belief that they would be good at being the person who could help (with variation in whether this was more 'altruistic' or more 'saviour' led as a thought).

A desire to be 'part of something'

The specific drivers within this theme are wanting to be part of something bigger, and a desire to work as part of a team.

Being part of something bigger was particularly appealing to those who felt that their current job was less important than working for the NHS. The NHS was typically seen by respondents as a great part of society and, as such, working for it would be more worthwhile, purposeful or noble than what they currently did.

I'd like to have an actual profession, help others and give a little bit back to the NHS... for me, it's helping people, giving back and that reward of making people better. [Potential Career Switcher, Non-H&SC, F, 35, B, Manchester]

The idea of working as part of a team was particularly appealing to those who have been isolated or furloughed over the past 12 months. However, aside from this specific impact of the pandemic, the team aspect of working as a nurse was also attractive to those who currently work in an atomised company structure and would like to be in a more collaborative environment.

Variety

This theme and driver were about a desire to not have a 'boring' nine to five routine, and to face different scenarios and challenges every day. Variety in the day-to-day role, and for nurses as a set of staff across the organisation, is a reason to believe in the expected emotional benefits as well as a rational benefit in itself.

A need to feel more valued personally

The drivers within this theme are self-respect, and wanting to have respect from others.

Self-respect was important to those in the sample who didn't feel good about what they currently did for a living. This group had typically been questioning what is important to them recently (because of either their life stage or the pandemic).

Respect from others tended to be mentioned by those who felt they were not respected or valued by their current employer. Some also felt that respect from the public (as have been demonstrated by the high levels of support for NHS employees over the course of the pandemic) was something that would make them feel fulfilled.

The strength of their sense of respect from the public was tempered to a degree by awareness that nursing and other health professions are 'not respected as much as they should be' by all people (see Barriers). However, there was still a belief that a majority of society feels very positively about and are respecting of nursing as a career.

Practical motivations for non-H&SC potential career switchers

Interest in nursing increased when it was felt that the career could offer more benefits than they currently receive. These were typically expressed in terms of employability, job security, increased earning and career development, and discounts and recognition.

Although most did not want to relocate initially, there was an attraction in the ability of nurses to work throughout the country, coupled to a strong sense that they will always be needed. Both made job security appear particularly high.

When nurses get qualified, they get work within a quick amount of time, so I'm hoping that will happen with me. [Potential Career Switcher, Non-H&SC, F, 29, C1, Bristol]

The salary and benefits, alongside a perceived low chance of redundancy, was particularly attractive for those whose employment had been affected by Covid.

For those currently at a ceiling in their work, the clear routes and opportunities for progression were also attractive.

Some had also noticed the number and type of discounts given to NHS workers over the pandemic and saw this as a 'nice to have' additional benefit that supported a wider sense of appreciation for those in the sector.

SPECIFIC MOTIVATIONS TOWARDS NURSING FOR POTENTIAL CAREER SWITCHERS CURRENTLY WORKING IN THE H&SC SECTOR

Emotional motivations for H&SC potential career switchers

The emotional motivations for this cohort fell into two broad themes. These share some territory with the non-H&SC career switchers but have specific nuances that reflect their different starting point of considering a nursing career (as described earlier).

Again, the relative priority of these and specific drivers within them can vary by individuals. However, all non-H&SC potential career switchers showed some mix of these two themes:

Emotional theme	Specific drivers
Personal reward	Rewarding aspects of the role
	Aspirational career
	Personal experience / close ties
Rich day to day experience	Patient facing
(specific interactions within the	Working as a team
role)	Warmth towards clinical environments

In more detail:

Personal reward

This theme is comprised of different drivers that relate to the rewarding aspects of the role, the aspirational nature of nursing, and personal experience of or connections to nursing.

The rewarding aspects of nursing were drivers for those who were already passionate about helping others, so switching careers into nursing would allow them to continue to do that in a different way. Many had been drawn into their current role by a commitment to helping

others and a high respect for public sector workers and the NHS. Nursing was consequently of interest to many as it was congruent with these thoughts.

It feels so good to help people and I don't want to give that up. [Potential Career Switcher, H&SC, F, 26, B, Bristol]

The aspirational nature of nursing was key for some, especially those working in care. Once understood as a possibility, moving on to nursing felt like it might be the next logical step in their career and would help them to get more out of their contribution. Some, especially those in child care and Health Care Assistant (HCA) roles viewed nursing as an aspirational career step. Within this, some also hoped their career to date might contribute in some way to their route to becoming a nurse or progress once qualified.

As with the non-H&SC cohort, those who had had personal experiences with nurses wanted to make a positive impact / difference to others because of this. Many also had close family and friendship ties with those in the nursing profession, and felt warmth towards the work they did (seeing nursing as high impact and valuable to society).

Specific interactions within the role

The drivers in this theme were wanting to be patient-facing, working as part of a team, and a warmth towards the clinical environment. These specific aspects of day-to-day work were expected to provide emotional benefits.

Wanting to be patient-facing was attractive to those who had already experienced frontline roles and wanted a new career that would allow them to continue or go back to working with patients directly. This was seen as being more rewarding than the office work into which some of them had been promoted in their current field.

I wouldn't and couldn't go and work in an office now, I'd have to stay with people and children... I want to be there and see the impact I'm having. [Potential Career Switcher, H&SC, F, 26, B, Bristol]

There was also high interest in doing frontline work from those currently doing laboratory work, who had become disillusioned with having no contact with patients. This group saw nursing as potentially allowing them to make more of a 'direct' difference to other people's lives.

Working as part of a team was a particular motivation for those in desk roles, or currently working in more 'solitary' roles. These people in particular were more likely to have felt isolated over the past twelve months, and would value being part of a more collaborative environment.

I feel there's real camaraderie in nursing...no one is below anyone else...that's just from my experiences at the hospital. [Potential Career Switcher, H&SC, F, 51, South London]

Warmth towards the clinical setting was important for those who had chosen to be in and already felt comfortable working within that area. For some, a medical or clinical environment carried slightly more status than their current or alternative H&SC environments.

Practical motivations for H&SC career switchers

The practical motivations were similar across all H&SC respondents, and were typically thought of transactionally – in terms of both what the individual would be bringing into nursing and what they would get out of it. Practical motivations span three key drivers: transferable skills and knowledge, career progression, and employability / job security.

When considering transferable skills and knowledge, many in frontline roles thought that their existing skill set would translate well into nursing, so that even though they would be at the start of a nursing career, they wouldn't feel like they were starting again from scratch and would have an existing degree of comfort with what they are doing and their working environment. These skills included: working with specific groups such as children, knowledge of the public sector, medical knowledge, people skills and the ability to deal with crisis scenarios.

Also, I can bring so much across into nursing, I've learnt so much already from being involved in childcare systems and social work. [Potential Career Switcher, H&SC, F, 26, B, Bristol]

Career progression was more of a motivation to those currently in roles similar to nursing that require less training (e.g., nursery work, HCAs, and social care workers). These respondents saw themselves as better positioned to progress than those entering from less related professions and, as such, potentially having an advantage for career progression.

I want to progress what I'm doing with children further I guess; I just think it's time for a new opportunity. [Potential Career Switcher, H&SC, F, 51, South London]

Those currently working outside of the NHS (e.g., in social care or early years) were motivated by the security of an NHS career and the high need for nurses in all areas of the country. Nursing was seen as being secure when compared to agency work or being self-employed.

'STARTER FOR 10' COMMUNICATIONS TERRITORIES

The research findings suggest some potential directions for communications territories which are outlined below. These are based on areas of interest and concern from the various segments of the audience and intended to be 'thought starters' for new campaign and information content.

The territories cluster primarily around the idea of a nursing career being rewarding; the progression and leadership opportunities over time; and further detail on the qualifications that will be gained and the nature of the training.

Some of the possible territories have sub-territories within them to accommodate nuances around what is of interest to specific groups within the broad audiences¹². Others have broader resonance. For each territory we have given a brief description, indicated who it is suitable to be aimed at, and the noted the examples of the research stimulus which come closest to addressing the subject currently.

The table below summarises the potential territories that have emerged with their audiences:

Rewarding career	warding career C		Career progression / leadership opportunities		
Sub-territory: Caregiving	Sub-territory: Excitement	Sub-territory: Progression (general)	Sub-territory: Leadership	Academic qualifications / post-graduate entry	Practical, hands-on elements of training
Helping others, looking after vulnerable, supporting recovery, holistic care, connection with patients and families	Excitement: breadth and variety of day to day role, team work, working under pressure, continual change	Learning and development, pathways for progression and specialisation, higher earning potential	Nurse as leader, ongoing learning and development, senior opportunities, managerial roles	Elements of stimulus focusing on the value / prestige of academic qualifications (particularly MSc)	Elements of stimulus focusing on the placements and practice-based learning
Speaks particularly to:					
Back room workers in H&SC, recent graduates looking for a challenge/fulfilment, those in roles involving working with people or children	Younger, back room workers, those dissatisfied with their current roles	All, but especially those in low paid roles, carers, those at natural break points in their careers		Senior/older/more experienced, those who don't feel challenged in their current role, recent graduates	Carers, older/more experienced who are less academic, those in low paid roles or disaffected with their current role

Each territory is described in more detail with its examples below.

Territory One: Rewarding Career

Sub-territory: Care Giving

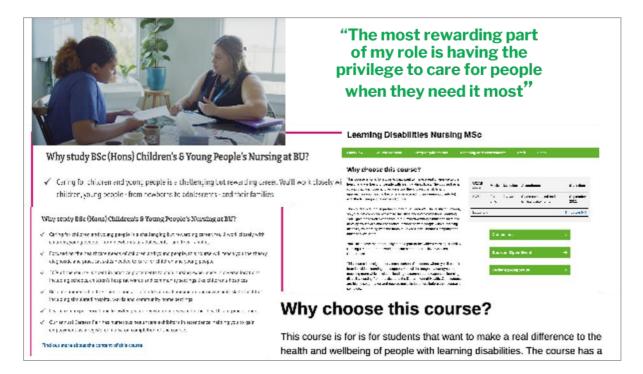
This sub-territory is likely to speak more strongly to workers in H&SC support services who want to be more hands on, recent graduates looking for a challenge or fulfilment, and those already in roles working with people or children.

The heartland of this idea is about helping others, looking after the vulnerable, supporting recovery, holistic care, and the connection with patients and families.

For me I just love caring for people, I just get it, don't even know how to describe it ... it's just a humbling feeling that I'm doing something right...I'm definitely a people person, I love talking to people [Current Student, F, Adult Nursing PGDip]

¹² See earlier Section 1 for detail on notable categories

Examples within the stimulus that delivered on or were close to this territory included:



Sub-territory: Excitement

This sub-territory is likely to speak more to younger people, workers in H&SC support service roles who are away from frontline health delivery but would like to be there, and those dissatisfied in their current roles.

The heartland of this idea comprises the breadth and variety of the day-to-day role, team work, working under pressure, and the idea that there will be continual change.

"No two days the same, no two roles the same"



PHUSPECTUS

Nursing (Adult Nursing), MSc

With essential training and decision-making skills, you will be ready for an exciting career in nursing with this Moster's degree in Adult Nursing.



Territory Two: Career Progression/Leadership Opportunities

Both sub-territories below are on themes which speak to those in all groups. However, they are especially appealing to those in low paid roles, those who have reached a ceiling in their current career, and those at natural break points in their careers (maternity, redundancy, furlough).

Sub-territory: Progression (general)

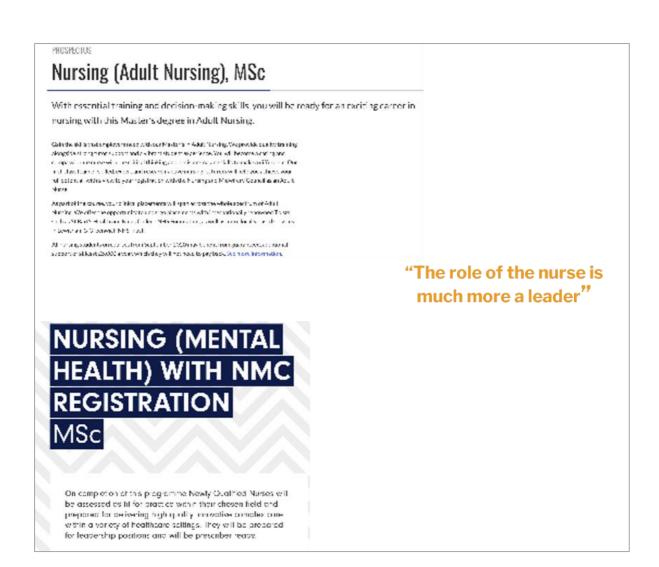
The heartland of this sub-territory is in learning and development, pathways for progression and specialisation, and higher earning potential. It is likely to have broad appeal, as this motivation is significant across the whole audience. Within this sub-territory there is the potential to dial up opportunities for *clinical* specialisation to attract those who are drawn to clinical work specifically.

Progression is important to me...l'm always trying to go that step forward. [Potential Career Switcher, H&SC, F, 35, B, Manchester]

Sub-territory: Leadership

This sub-territory is about the nurse as leader, featuring the opportunities for ongoing learning and development, senior opportunities and managerial roles. It is particularly appealing to some individuals from higher socio-economic groups, and those who feel that they are more academically inclined. However, some see this sub-territory as a move away from being clinical and patient-facing (which is part of the key appeal of nursing for them).

Leadership and management sound interesting as a facet of the MSc.... [Considerer, M, 47, B, SE London]

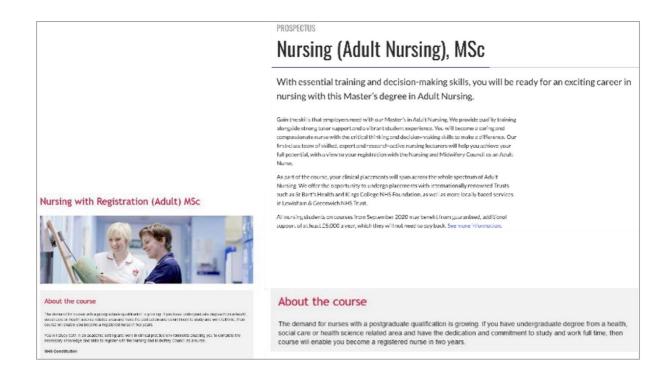


Territory Three: Academic Qualifications / Postgraduate entry

This territory is likely to speak more to those who have recently graduated and who want to get on in their career, and the more experienced or senior who don't currently feel challenged.

Elements of the stimulus that focused on the value / prestige of academic qualifications (particularly the MSc) were most appealing to the younger or more academic-leaning, and some older respondents (especially the more confident, and those from more academic backgrounds). In order to draw in the older and more senior, there is potential to dial up the recognition of work and life experience and existing skills.

I didn't know you could do a PhD, I'd be interested to know what it could cover and where it would take you. Then you'd be doctor but a nurse, I'd assume. [Potential Career Switcher, Non-H&SC, F, 31, C1, Bristol]

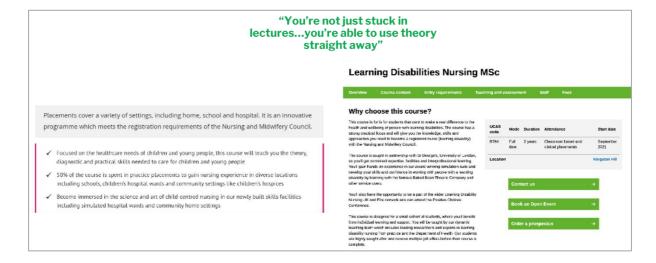


Territory Four: Practical, hands-on elements of training

This territory is likely to speak particularly to carers, those already in frontline roles, the less academic and the lower paid.

It comprises those elements of the stimulus focusing on the placements and practice-based learning, which were particularly engaging for the younger and less academically confident, alongside the older and further away from education, particularly those not keen on 'being a student again'.

I couldn't do 2 years in a classroom full time. I would want to throw myself into it alongside the studying...I'd want to be in a real-life environment. It'd be great to learn whilst you're doing it. [Potential Career Switcher, Non-H&SC F, 47, C1, Manchester]



4. Barriers to taking up a career in nursing through the postgraduate route to consider within marketing

OVERVIEW

A range of emotional and practical barriers to a career in nursing emerged within the research.

In the case of the emotional barriers, several were shared across potential career switcher both within and outside the H&SC sector. However, the H&SC switchers were more likely to have additional emotional barriers based on some perceptions of nursing that have been shaped by their experiences working within the health sector.

The practical barriers were consistent for all respondents and irrespective of the sector they currently work in. However, it appears that age and life stage influence how significant these barriers are deemed to be, and how they are prioritised in importance by each individual. Those with families, status in their current role, or (relatively) higher salaries had stronger barriers to switching careers than those who were younger or just starting out.

Emotional barriers

All respondents were aware of elements of life as a nurse that could have a significant emotional toll. While communication of support is helpful (although the level of detail and query will vary by audiences) variability and transferability within and of roles is also key.

The key barriers for potential career switchers both currently in and outside of the H&SC sector were:

- Career burnout / stress
- Dealing with crisis points

Career burnout / stress was a major concern. Although media coverage of NHS workers in the pandemic has been largely positive, there was still a perception that the nursing profession entails very long hours. Consequently, nurses were expected to experience high levels of exhaustion, stress and burn out. This view was informed for those currently working in H&SC by the experiences they had heard of directly from friends and contacts who already worked as nurses.

To an extent this can be addressed by highlighting the options and transferability of skills within nursing, including both:

- Variety of options that can be pursued once within nursing
- Non-emergency paths which are thought to be slower paced

This is not to say that all are seeking non-emergency or non-hospital roles. However, knowing there are options is reassuring.

Furthermore, communication of any elements of support that are available to nurses will help demonstrate that they will not be left to deal with stress-related issues on their own.

Dealing with crisis moments is recognised as a key part of the job, especially in terms of having to deal with patient crisis and death. For some, this was a 'deal-breaker', in that they didn't believe they would be able to do the job. Others, although they felt it was important that this aspect of the role was not 'sugar-coated', were still less *sure* about their skills for dealing with these moments, and the impact that they might have on them (individual or cumulative).

You'd need to be careful not to get attached to patients in case they pass away.

That's quite a lot of pressure on your mental health. [Potential Career Switcher, Non-H&SC, F, 31, C1, Bristol]

Communicating support as above is helpful. However, communication of training to gain the skills to cope with crisis can be highly motivating. For respondents, this suggested growth and development of their personal skill set, which they felt would be valuable in both their work but also life generally.

Some examples of the stimulus were inadvertently off-putting because they were dominated by high-pressure situations. For example, the *We Are Nurses* film, though engaging in some aspects, indicated to respondents that the majority of the role was dealing with crisis. They sought a better balance of scenarios which highlighted that this tougher side of the job was compensated by more joyful and rewarding aspects.

Those currently working in H&SC roles typically had additional barriers either drawn from their own experiences working alongside the NHS, or family and friends working in nursing. These included:

- A sense that the career is undervalued
- Concerns around lack of support

Specifically, for a number of H&SC respondents there was a sense that **nursing is not properly appreciated, or valued more broadly as a career** by either the NHS or the public. While this concern was shared by respondents across the two cohorts to a degree, for those in H&SC roles it was more likely to be informed and crystallised by friends and relations already in the profession who felt undervalued.

It's deemed quite a thankless job a lot of the time, everyone says you need to be a certain person.... but actually, like police officers you just get crap for it [Potential Career Switcher, H&SC, F, 40, C1, Manchester]

Those in current H&SC roles were also more likely than those potential career switchers outside of the sector to be worried about **lack of support for nurses within the NHS**.

Some H&SC respondents linked this specifically to a lack of professional support and the management system within nursing. Some queries around support also came from negative perceptions of the current levels of staffing.

I've also heard nursing is under staffed...so I would worry about that over time. [Potential Career Switcher, H&SC, F, 35, B, Manchester]

To address this issue within marketing, there is potential to communicate the support available and ongoing changes and developments. Where possible there is also space to communicate a positive story – that the NHS is working to address shortages and new nurses can be part of the solution.

Practical barriers

Potential career switcher (whether currently within or outside of the H&SC sector) shared the same practical barriers, but the importance of each barrier was likely to increase with an individual's age and (to some extent) income needs. Strength and prioritisation of barriers were therefore more linked to age / life stage than segment.

In summary, the key practical barriers were:

- Financial commitment
- Salary / status
- Shift work
- Impact on family

The **financial commitment** of retraining was a key barrier for switching career. For many this was a daunting prospect, particularly in terms of:

- Worries about how much a new degree would cost
- Worries around the number of years they would be un-salaried whilst training
- Queries and questions about how to make their current role work with retraining

If I was going to get some assistance with bursaries, it would prompt me to look much more into it. I worry because £9000 is so much to spend. I need to consider if I can financially afford it. [Potential Career Switcher, Non-H&SC, F, 38, B, Birmingham]

A lot of the time you get a lot of people in similar roles who would love to do that but financially that's what's holding people back and they'd be perfect! It's a shame [Potential Career Switcher, H&SC, F, 40, C1, Manchester]

Obviously, it was whether we could afford for me to not work, although the student loan is helpful, everything is a loan now nothing is a grant...so taking into consideration that that I'm going to have to pay it all back [Current Student, F, MSc Adult Nursing]

To address this barrier within marketing there is a need to make clear the costs and the financial support available. Mention of any other financial incentives to study that may be available will also help.

For some, the salary and status of an entry level nursing role was lower than they receive in their current job and, where this was the case, the idea of taking a pay cut was unappealing.

Some of those who had already worked their way up in their current job (especially those in H&SC roles who think they have relevant experience), did not welcome the prospect of starting at the bottom of the nursing career ladder and also linked that with taking a pay cut.

To address this barrier within marketing, there is a need for a clear demonstration of career pathways and earnings forecasts (both initially and over a career). In addition, those who are currently more senior would welcome any mention of recognition of their previous experience, and any credit that is given for this.

Shift work was a key barrier for some. There is a perception that nursing entails a lot of long hours and unsocial shift working. This was more of a concern for older potential career switchers, and H&SC potential switchers whose current roles have 9-5 hours.

Night shifts, day shifts, 4 days on then off again, that does make me nervous. It puts me off slightly, your body will always be adjusting to the time. I did nights before and the impact on my body was awful. [Potential Career Switcher, Non-H&SC, F, 38, B, Birmingham]

To address this barrier within marketing, demonstrating the breadth of nursing career options to show that nursing is not all about shifts in hospitals has value.

Lastly, **impact on the family** was a key practical barrier. There was a significant degree of worry from some respondents who have children about the impact that a nursing career would have on their childcare arrangements and parenting input (especially where linked to the worries around shift working). Those with family responsibilities were also concerned about the financial impact of retraining on their household.

The hours, the weekends, the late nights, you know that is something that comes with the job. It doesn't put me off, I just worry about my family. My partner works full time, my mum can't always help look after the little one. [Potential Career Switcher, Non-H&SC, F, 29, C1, Bristol]

To address this barrier within marketing, it will be helpful to show how other people have made it work within case studies. And, as above, demonstrating the breadth of nursing career options to show that nursing is not all about shifts in hospitals and can involve family-friendly working practices helps retain interest.

5. Relative appeal of a Master's versus a PGDip qualification

OVERVIEW

As noted earlier¹³, findings from this sample suggest that the routes into nursing are not well-known. Alongside this, there is a general lack of understanding of, or interest in, the process of postgraduate education more broadly.

This lack of awareness of options and low understanding of postgraduate education raises considerations around the language that needs to be used in communications. While the most committed (as demonstrated in this project by the Current Students and NQPs) were generally able to navigate their way to a suitable course eventually, there is a potential need for types of course and routes to be explicitly spelled out to the potential careers switcher audiences, particularly those who are not currently in the H&SC sector.

There were perceived strengths to both the PGDip and Master's routes, although there was a clear sense that each is most suited to a different type of person.

In general, the Master's is seen as more appropriate for the most academic, the more ambitious to progress, and those close to their undergraduate degree (who therefore feel more able to step up to postgraduate study).

The PGDip, on the other hand, was appealing more to those who doubted their aptitude for postgraduate study, whether because it has been a while since they were last in formal education or because they felt that they had reached their academic ceiling at undergraduate level.

For both groups, issues of time and cost of study (particularly when combined with the need to continue earning) were key, as was the nature of the course offered by the closest institution. Need for family and residential stability often meant that being able to study locally would be more important than the exact type of course being followed.

Each of these findings is discussed in further detail below.

LIMITED SPONTANEOUS AWARENESS OF POSTGRADUATE STUDY OPTIONS

Findings from this study suggest that before making an application neither the PGDip nor Master's route was known spontaneously. This was not specific to the nursing-specific postgraduate qualifications but reflected a general lack of awareness of how postgraduate study works.

¹³ Section 4, Barriers

Potential career switchers in particular (whether currently in or out of the H&SC sector) did not have good awareness of the options that they had, and therefore didn't have unprompted strong views.

However, after exploration the specific postgraduate solutions did make sense across this sample and felt like they would be potentially interesting. Indeed, there was more interest in these routes than the alternatives:

- Very few of those with existing degrees wanted to do another undergraduate degree (and the belief that they would need to had put some off looking at nursing more seriously).
- The apprenticeship (whether known beforehand or introduced during the session)
 was considered to be more suitable for the younger applicant, or those without
 existing family responsibilities.

I've heard about the training on the job type things...the pay is so low it's just not feasible [H&SC. F, 40, C1, Manchester]

However, there was significant interest in blended learning from those that had more
practical barriers to doing a full-time course (primarily because of childcare
responsibilities or the need to continue earning a salary while training).

A further consideration regardless of age or background is the importance of geography, even more so than course type. When talking to potential career switchers, current students or NQPs, it became clear that course choice often came down to what was available at their local centre of higher education. The ability to retrain without needing to relocate, or travel excessively, was a key consideration.

My main reservation would be if there's something available near where I live [Potential Career Switcher, non-H&SC, F, 47, C1, Manchester]

This low awareness of postgraduate routes to study was endorsed by the experience of the current students and NQPs who took part in this project. Most of these respondents had started out assuming that they would need to study for the BSc. In most cases this was because they held an assumption that training to become a nurse would require an undergraduate nursing degree. Awareness of the ability to take a postgraduate route, or any form of 'conversion' course, was very low.

As with the potential career switchers, the Apprenticeship route, which was slightly better known through family and friends who already worked in nursing, was discounted because of concerns over salary, hours, and incompatibility with childcare.

I know you can do the apprenticeship route but I know that band 2 wouldn't have paid enough [Current student, F, PGDip Adult Nursing]

Within this sample, the current students and NQPs had typically realised that they had options other than the BSc through advice that they received in three key channels:

- When told about the other options through friends that were current students
- When directed to the postgraduate course having made contact with their local university
- (For some) after they had done extensive personal online research

Across the sample of current students and NQPs the feeling was that their awareness of options, and the route that they had taken to get onto their course, was 'hit and miss'. All would have liked greater visibility of the courses and felt that they had only really achieved a good understanding of how they could progress when they had got significantly into the application process. Few felt that they understood what they would have to do (or wouldn't have to do) at the stage where they were doing their own research.

LANGUAGE AND TERMINOLOGY CONSIDERATIONS

Across the potential career switcher sample, the language around levels of study was unfamiliar, especially where a respondent had taken an undergraduate degree and then moved straight into the world of work. There was knowledge that a Master's degree comes after a Bachelor's degree, but much less awareness or confidence over what the step change in complexity or learning might be. However, there was an assumption that, as a level up, a Master's would be more difficult in some way. Furthermore, largely through their own experience at university, there was a perception that students tend to do a Master's degrees in the same subject they took for their Bachelor's degree. There was little awareness of people doing unconnected Master's degrees.

There was also a lack of knowledge and familiarity around the Postgraduate Diploma. Whether written in full, or where abbreviated to PGDip, respondents tended to be unsure what the qualification was. At worst, 'diploma' carried other associations meaning that it was viewed as lower than an undergraduate degree in terms of complexity and status.

This 'lesser' status was expected to carry over into the health system, for example, with those qualifying with a 'diploma' assumed to be qualified to a lower level. There were initial concerns that this might make the degree less valuable than other routes and put them in a less competitive position for jobs.

The word postgraduate is also not always familiar. For those who left university after a first degree and didn't consider further study, and who have not been exposed to other education levels through their work, postgraduate can carry little meaning.

Understanding of the two routes tended to be improved on further exploration with most key questions answered in online information, or via HEIs. However, this low familiarity with general terminology around qualifications raises an important consideration for marketing

communications. The target audience may not understand from the qualification names themselves what is on offer. For some, a more literal connection is likely to be needed, e.g., specific training courses for those with existing but unrelated / related undergraduate degrees.

MOTIVATIONS FOR CHOOSING ONE ROUTE OVER THE OTHER

Within this sample, the motivations for being attracted to either the PGDip or the Master's tended to be consistent.

For those interested in either route, the primary consideration was the degree to which the course was seen as likely to provide them with the right level of training.

However, where choices between Master's and PGDip are available locally, the two do pull apart on their perceived attributes and fit. As a result, each type of degree can be preferred by different individuals, as highlighted in Diagram 5 below..

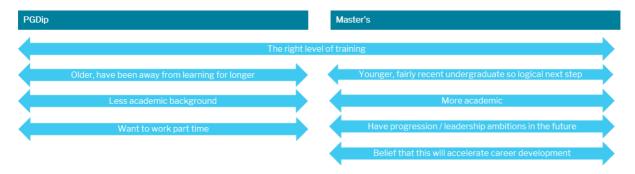


Diagram 5: Variations in type of individual the different postgraduate degrees appeal to

Overall, the PGDip was seen as a solid route, which was less valued by the more academic but also less daunting for all respondents.

The perceived benefits of the route included:

- Likely to be no more stressful than their previous Bachelors level study. Absence of a dissertation was also attractive for those who did not like writing.
- Less daunting for those who had been out of education for some years, as not seen as being a 'higher' level of study which they didn't feel prepared for.
- Potentially a cheaper route for those currently struggling financially, while still holding the ability to top up the qualification at a later date.
- Quicker to complete than a Masters, so consequently promising a faster route to qualification and full time earning.

I think now because I've done the PGDip I would be ok for the Master's, I think I was afraid that that jump would have been way too big...some of my cousins did Master's

[in other things] and I saw the amount of work and because I'm dyslexic I was worried that I wouldn't have the level of English...But I think now I feel I'm kind of three quarters of the way between the undergraduate and the Master's, I feel like at this point I would be able to do it [Current student, F, Adult Nursing PGDip]

I didn't want to spend 9k on fees and then drop out because it's too hard...I'd rather play it safe and do the PGDip...and then if I want to go on and do the Master's afterwards, I can do it in 6 months, it's just one more module [Current student, F, Adult Nursing PGDip]

At the same time there was a feeling from some potential career switchers that the PGDip route is less prestigious than a Master's degree, and consequently less likely to be respected by family members and others whose opinion was important to them. Some were also concerned, once aware of the two options, that a PGDip qualification might make them less attractive as an employee or prospect for promotion – although this was more likely to be a worry for those who were more academic overall.

Once understood, the Master's degree route represented a clear first choice for many of the younger or more academic, for whom it is the logical next step to build on the level of academic attainment that they have already achieved:

- It was seen as a step up from Bachelor's level study for all.
- Those who were most academically minded were also enthused by the possibility of progressing onto a PhD as an option.
- The Master's also does not share with the PGDip the same potential to be seen as
 'vocational'; it is clearly an academic course, with all the rigour implied by that status.
 For those potential career switchers in more senior roles currently, there was a level
 of prestige inherent in Master's level postgraduate study that served to both value
 and validate their previous experience.

It's good, going straight to postgraduate...So all you're doing is a Master's? [Potential Career Switcher, non-H&SC, F, 42, C1, Birmingham]

On the other hand, there were perceived negatives for some in relation to it taking longer and costing more than the PGDip route. Others also felt that Master's course might not fit well with a blended learning approach, particularly where that is attractive or a consideration. As noted above, for those who had been out of education a long time, had found their undergraduate study challenging or disliked writing, the higher level of the Master's was offputting.

A further consideration emerged from the current students and NQP respondents. Once on their placements they had been wary of admitting to being on the Master's course with reticence driven by two beliefs: that they might be viewed negatively compared to undergraduate nursing students or, conversely, that more would be expected of them as 'higher' level students.

Some Admissions Tutors also mentioned that there could be confusion and / or lack of clarity at the placement stage for Master's students, where those supporting them were not always treating them in the same way as undergraduate students.

PINCHPOINTS IN THE DECISION-MAKING AND APPLICATION PROCESS

In reflecting on their journey application and study, current student and NQP respondents outlined several potential stumbling blocks on the path from deciding to retrain as a nurse through to being accepted onto a course.

Those in this sample had typically been driven by much longer-term aspirations to work in health than potential career switcher respondents, so to that extent had been self-starting in their research, and their efforts to find answers to their questions. However, they did have areas where they felt that more information would have been useful.

The primary concern was the need to sort out the necessary finances. This spanned the need for an initial overall view of how affordable the course would be, through to more accessible detail around the grants and bursaries available and how to make things work. There was a feeling from this group that they would have liked to see more details on how other people coped financially and their solutions with regard to childcare, part time work, etc.

It was a bit consideration for us about how we would afford it, paying the bills without my salary and also childcare...we agreed that I would do it for 6 months and if we couldn't make it work I would drop out [Female, Current Student, PGDip Adult Nursing]

The upfront cost of the Master's was a deterrent for some when they realised that the PGDip was cheaper. While these individuals had typically assumed that they would do the Master's (as the next logical step from their Bachelor's degree) they eventually elected for the PGDip in the expectation that they would be able to top it up to a full MSc at a later date.

At the point of application there were frustrations around not knowing exactly what documents would be required, and they would have liked to have had this laid out at an earlier date so that they had more time to gather them together.

There was also an issue for some around a lack of alignment between UCAS deadlines and the deadlines of individual institutions, which had led to one respondent being told initially (and incorrectly) that they didn't have a place, adding stress to the process.

Conclusions

This research indicates that the pandemic environment has had an impact on some in the audience to consider changing their career and retraining.

- For those in non-H&SC roles, these thoughts have been about finding a career that is
 more personally meaningful and satisfying. When prompted with certain information,
 a nursing career can look appealing in this context for some. Furthermore,
 postgraduate training as a route to get there is perceived as preferable to 'going
 back' to an undergraduate route of study.
- The impact of the pandemic on prompting reassessment of careers was less apparent amongst those respondents currently in H&SC roles who are, by definition, already in a role that contributes to people's health in some way. However, for some, the pandemic has shone more of a spotlight on the importance and value of frontline roles in particular and this has caused some to consider there are other jobs or careers that they might find more satisfying than their current role. Again, when provided with compelling information, nursing can become an area of interest and the idea of qualifying through a postgraduate route is seen as preferable to undergraduate options.

Findings also indicate that across the two broad cohorts (of career switchers who are currently in H&SC roles and those who are in other sectors) there are likely to be some specifically warmer targets for marketing this route into nursing.

- Some sub-groups within the different audiences stood out in this research as potentially warmer prospects for nursing. For those not in the H&SC sector currently, indicators are type of undergraduate degree, current job or sector they are working in and (for some) life stage. For those in the H&SC sector, those working in relatively low paid roles focused on children or care were warmer to nursing as they felt this could potentially offered them more satisfaction and benefits. Those who were previously in 'frontline' roles and have moved away from this through a job trajectory that was not led by choice are also open to becoming more patient-facing again.
- Being qualitative research with a necessarily limited sample, these indicated categories may not be exhaustive and there may be others that align with these initial ideas.

In developing marketing activity to reach these audiences, a critical first consideration is the need to overcome the issue that there is very low awareness of both nursing as a possible career switch and the existence of postgraduate qualification routes as a way to achieve this.

• In the first instance, both people with unrelated and related degrees are unaware that nursing is a career-switching option via postgraduate study. As such, both need signposting clearly. It is worth noting, however, that including this information at a

secondary level to marketing nursing per se is unlikely to be sufficient This is because there are assumptions that nursing training is via undergraduate routes only and largely undertaken by school leavers, both of which mean the audience assume that nursing careers are neither relevant not accessible to them (and will lead to disengagement).

- There are a number of other considerations for how to convey this messaging
 effectively. For example, language and understanding around postgraduate study is
 not well developed for many in the target audience, so they are likely to need very
 literal connection and signposting of the relevance and accessibility of nursing to
 those with existing degrees in other subjects.
- For those in non-H&SC jobs, there is also some need for proof / evidence that this
 route is really accessible and achievable. While a nursing career can appeal, the
 perceived gap between where they are currently and being qualified as a nurse is
 very wide. They need assistance to understand that change is feasible and the
 effort worthwhile.

The PGDip and Master's qualifications both hold appeal but different people are drawn towards either option depending on personal factors.

- When more is understood about the two as options, the PGDip can feel less daunting for those who have been out of education for a while or who are less comfortable with the idea of study that is at a higher level than an undergraduate degree and involves extensive writing through a thesis. The lower cost than a Master's can also be a persuasive factor. For those who are unsure of which route is right for them, the idea that the PGDip can be topped up and converted (if this is wanted at a later stage) is also valuable.
- However, many are also drawn to the idea of Master's which feels like a logical and forward step in education. This can be a more comfortable choice for those who are more academic and switching from a career where they have already made some progress, as it feels less like 'starting from the beginning'.
- Overall, while both options have a closer fit with different individuals, respondents
 were clear that geography was a key factor. None were willing to relocate given the
 already high cost of investment in retraining. Ultimately choice would therefore be
 driven by what is on offer at the nearest HEIs.

Personal investment of time and money is significant for anyone switching from a position where they currently have an income and this tends to increase with age (unless supported by another earner).

• Changing career via training involves both loss of income as well as gain of debt and, unsurprisingly, this change in financial circumstances is a significant hurdle.

- As such, there is a better overall fit with a broadly younger cohort for whom there
 tends to be lower financial pressure and therefore the financial commitment can
 have slightly less impact.
- The financial impact can still be a deterrent or reduce feasibility, however, given eventual earning potential as a nurse is not particularly high. Therefore, any financial assistance or incentives are likely to help.

In creating compelling marketing around nursing careers to this postgraduate target, there are some broad variations to consider within the potential audience in terms of triggering motivations.

- Those not in H&SC roles currently need a spotlight on the emotional benefits of
 nursing in its multitude of settings. This latter point is important for landing the idea
 of *variety* quickly, which is a benefit it its own right but also important to help with
 creating a sense of fit of self with the role, since not all see a good fit with hospital
 environments (for different reasons).
- Those in H&SC roles need a strong spotlight on the variety in the role (day to day and over time) as well as potential for progress. Patient interaction is a key draw to the career but a strong focus on emotional reward is less required than for non-H&SC. The H&SC audience already have an understanding of this and it is therefore neither new nor a key need. Indeed, a very strong focus on emotional reward can sometimes appear less credible or 'overselling' given their high awareness of challenges in the sector.
- The starting point for considering a change of career also varies depending on an individual's current set of circumstances. Some (especially younger graduates in other subjects) are feeling 'in limbo' and that they haven't found a role that meets their wants for emotional reward. As such, they want to 'move towards something right for them'. Others are more overtly dissatisfied with elements of their current role and are seeking to 'move away from things they don't like' as well as 'move towards something else'. Reflecting these nuances in position in some way may make marketing messaging work harder.

Finally, barriers to a career nursing also exist and it is important for marketing material to either help address these (for sufficient reassurance to encourage further exploration) or not to inadvertently reinforce concerns

- While all felt it is very important that marketing does not 'sugar-coat' the nursing role there was a desire for the right balance between reward and challenge
- For those in current H&SC who had a stronger sense of negative issues in working conditions and lack of support as a nurse, there are also additional messages around change or developments that will be helpful to counter current concerns they have

* * * * *

Appendix

Learning around existing marketing materials

MARKETING MATERIALS

Respondents were shown examples of a range of existing communications and marketing surrounding nursing careers in general and postgraduate nursing courses specifically.

Responses to these help indicate what sources are working well and, through this, some effective marketing principles.

More effective examples

Health Careers website

A number of examples were found to be working well either across the sample as a whole or amongst certain sub-groups:

The Health Careers website worked well for respondents across the sample. The layout of the site was generally felt to be clear and accessible, with the use of boxes and images helping to break up text and create visual interest. The information provided was also well understood and addressed key concerns, including:

- Availability of financial support For many, financial support was essential to enable
 them to take up training and, as such, details of support available were a primary
 consideration. The mention of financial support and signposting to additional
 information was therefore strongly valued.
- Multiplicity of nursing roles and the variety of roles day to day Noting that there are
 multiple career pathways within nursing was seen to suggest that it is possible to
 tailor careers to personal interests and commitments. In addition, the claim that

careers themselves 'offer variety' was felt to hint and the diversity of day-to-day work which was key to nursing's appeal for many.

- Possibilities for progression Progression was a central concern for many across the
 audience. For younger respondents, seeing references to opportunities for
 progression helped them to view nursing as a career for life and one that would
 remain dynamic. For older respondents, this also provided reassurance that they
 would make up any loss in pay during retraining.
- NHS pension Though pension was not a prominent consideration for some within
 the audience, some older respondents and those currently in public sector positions
 said that a good pension scheme was non-negotiable in any career they would
 consider.
- Personalised information and interactivity Finally, the suggestion of interactivity with the 'interested in nursing? Let's go' button was widely appreciated and was felt by many to suggest the availability of information that would be tailored to personal circumstances.

It's got all the information you need to change career. It covers all the things people are worried about, like finances. [Potential Career Switcher, H&SC, F, 35, Manchester]

I'm so shocked about the pension, it's a hell of a lot, it's huge! It's good they stated that on the retraining pages, now I'm older I realise how important pensions are.[Considerer, F, 25, C1, Liverpool]

Health Careers video: We Are Nurses







Overall, the *We Are Nurses* video had high appeal for many within the sample. However, certain elements were also off-putting for some.

Elements of the video which had the broadest appeal included the footage that depicted nurses providing emotional care, which worked to reinforce the perception that nursing is a rewarding career. The title 'We are nurses' suggests solidarity and connection to a larger community and cause. This was compelling for many and particularly resonated with those who felt unfulfilled in their current work.

The balance between care-oriented and medical aspects of nursing shown in the footage was widely felt to make the video engaging. This, along with the background music and pace of the film, created a tone of excitement that was particularly appealing for some younger and male respondents. For a proportion of the sample who were specifically interested in

clinical aspects of nursing, the images of emergency care, MRI scans and surgery also increased interest.

That was my favourite...it felt more real showing the highs and lows. it's such an encompassing occupation. [Potential Career Switcher, non-H&SC, M, 26, B, London]

However, some respondents felt that the film was overly weighted towards medical and emergency aspects of nursing, which led some potential career switchers to question whether they could cope and was particularly discouraging for those respondents hoping to balance work and family life. Finally, whilst a few younger respondents found the footage of partying off-duty nurses appealing, it was less helpful for many older respondents and could reinforce their perception that they were 'too old' to retrain.

I just felt really emotional watching that. It made me realise that emotionally you have to be really strong. In one sense it made me question whether I have that, am I strong enough? It did make me feel quite daunted. [Potential Career Switcher, Non-H&SC, F, 38, B, birmingham]

Health Careers video: Life as a nurse







The 'Life as a nurse' video was particularly engaging for female respondents and those with families due to the emphasis on care-oriented and community-based elements of nursing.

Across audience sub-groups, many respondents with children felt that they could relate to images of nurses providing care and this helped them to imagine themselves in the role. Illustrating the diversity of nursing as a career, both within the imagery and through elements of the script, was also appealing for many and helped to counter the perspective that nursing is primarily or wholly hospital based. In particular, showing community-based nursing roles was encouraging for some who were concerned about shift work or hospital-based roles (perceived as more emotionally demanding) being unconducive to family life. In addition, the breadth of ages shown within the film was appealing and helped to allay fears amongst older respondents that they were too old to change careers.

I really liked it...it was very real and it brought to life how different it can be day to day, the different situations. it did encourage me...helping with the baby and man with disabilities...it seemed very worthwhile. [Potential Career Switcher, Non-H&SC, F, 35, B, Manchester]

For potential career switchers from non-H&SC backgrounds specifically, the *Life as a nurse* film spoke to interests in hearing personal experiences of nursing. However, whilst this focus

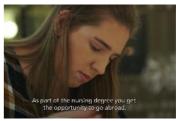
on the day-to-day was felt to be informative, some said that the video was overly mundane and lacked excitement.

For many within the H&SC sample, the focus on caring elements of nursing appealed as they felt that these were skills they had already developed. The emphasis on nursing itself was also positive as it helped them to focus on would gain from changing careers rather than the process of retraining and was therefore less daunting.

Health Careers video: University life as a nurse







For younger, early career respondents, the emphasis on work-life balance and job security within 'University life as a nurse' was appealing.

Within this section of the sample, this film worked best amongst those who were more focused on practical learning and/or were less confident academically due to the focus on placements and employability. The video had less appeal to those who were more interested in the academic and clinical aspects of nursing and, as such, there may be potential to increase discussion of course content and the potential for progression and clinical specialisation following completion of the course.

The film had least appeal for older respondents and/or those who had not been in education for some time who often struggled to imagine themselves in a university setting. The mention of placements did slightly increase interest, however, on the whole the video was less relatable for these respondents.

It was really nice seeing them at uni, and what the girl said about her 4 job offers. it shows you can really do it. [Potential Career Switcher, Non-H&SC, F, 29, C1, Bristol]

It's more about uni...it was good that you have a job at the end. but having been to uni myself i feel like this almost made it look too easy. i never had time to go out on the weekend. [Potential Career Switcher, H&SC, F, 35, B, Manchester]

Higher Education Institution websites and course information

Within the overall suite of stimulus material, course information from a number of HEIs was shown to gauge what appealed to respondents and identify key areas of interest and gaps. Respondents were asked to read through and note any elements that stood out as particularly interesting or engaging. The following examples were the most successful amongst the sample:

PROSPECTUS

Nursing (Adult Nursing), MSc

With essential training and decision-making skills, you will be ready for an exciting career in nursing with this Master's degree in Adult Nursing.

Gain the skills that employers need with our Master's in Adult Nursing. We provide quality training alongside strong tutor support and a vibrant student experience. You will become a caring and compassionate nurse with the critical thinking and decision-making skills to make a difference. Our first-class team of skilled, expert and research-active nursing lecturers will help you achieve your full potential, with a view to your registration with the Nursing and Midwifery Council as an Adult Nurse

As part of the course, your clinical placements will span across the whole spectrum of Adult Nursing. We offer the opportunity to undergo placements with internationally renowned Trusts such as St Bart's Health and Kings College NHS Foundation, as well as more locally based services in Lewisham & Greenwich NHS Trust.

All nursing students on courses from September 2020 may benefit from guaranteed, additional support of at least £5,000 a year, which they will not need to pay back. See more information.

In this example, respondents picked up on the language of development and skills acquisition. For example, the phrase 'you will *become* a caring and compassionate nurse' (emphasis added) helped some respondents to imagine the transition from their current role to 'becoming' a nurse. Elements of the extract, such as references to 'critical thinking and decision making', were also appealing for respondents who were more interested in and comfortable with academic work. Some of those within the sample who were interested in career progression and leadership also picked up on the mention of prestigious teaching hospitals.

Whilst the content of the extract was widely appealing, many felt that the layout was currently unengaging, and the text could be broken up so as to be more user friendly.

Excellent...critical thinking would be so important...how amazing to have lecturers with all that hands on experience. [Potential Career Switcher, H&SC, F, 51, South London]

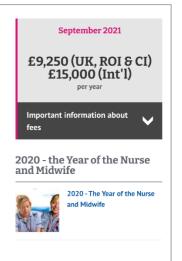
I think it's good where it says you will become a caring a compassionate nurse with the critical skills, it's saying you will become that type of person. [Potential Career Switcher, Non-H&SC, F, 22, C1, Manchester]

Bedfordshire University, Children's Nursing BSc

Why study BSc (Hons) Children's & Young People's Nursing at BU?

- ✓ Caring for children and young people is a challenging but rewarding career. You'll work closely with children, young people - from newborns to adolescents - and their families
- Focused on the healthcare needs of children and young people, this course will teach you the theory, diagnostic and practical skills needed to care for children and young people
- √ 50% of the course is spent in practice placements to gain nursing experience in diverse locations including schools, children's hospital wards and community settings like children's hospices
- ✓ Become immersed in the science and art of child-centred nursing in our newly built skills facilities including simulated hospital wards and community home settings
- ✓ Learn from experienced and knowledgeable registered nurses and other healthcare practitioners
- Our annual Careers Fair has numerous healthcare exhibitors in attendance, helping you to gain
 employment as a registered nurse on completion of the course.

Find out more about the content of this course.

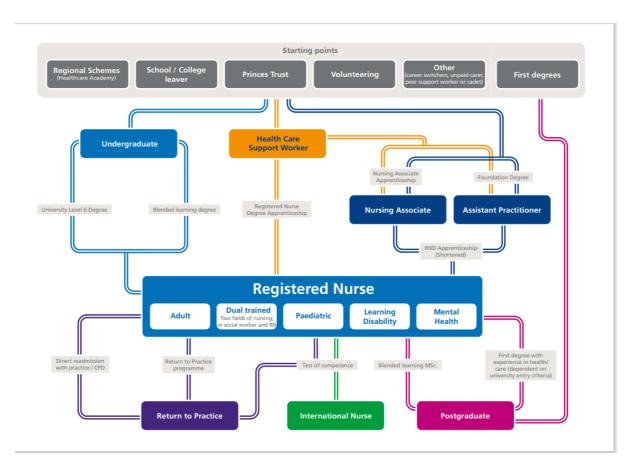


The above extract taken from the Bedfordshire University website was engaging for some respondents who were working with children or interested in working with children. For some, the first and second bullet points were helpful to draw attention to what they saw as transferrable skills from their existing experience and an overlap between their interests and children's nursing. The claim that children's nursing is 'child-centred' was also interesting for some respondents who conceptualised their current work in this way.

Some respondents, however, felt that the extract was overly broad and did not sufficiently explain how children's nursing differed from other 'child-centred roles'. These respondents (in youth work and teaching) wanted to understand what specifically children's nursing would offer them and how the skills they would gain would be different from their current work.

In terms of layout, this extract was felt to be interesting and accessible due the use of bullet points, boxes and colour. Many respondents also welcomed the clear statement of fees within the right-hand box.

Half the course is practice...that's attractive to me...I've always enjoyed doing practical stuff while I study. [Potential Career Switcher, Non-H&SC, F, 47, C1, Manchester]



The idea of visual depiction of information and of using an infographic to outline journeys into nursing was widely appreciated amongst the sample. However, responses to the draft Health Careers Infographic differed somewhat across audience groups.

Whilst some respondents found it easy to identify their starting point as the 'first degree' box along the top line, some potential career switchers and others less familiar with the NHS found the infographic overly complicated. These respondents sometimes struggled to make sense of their journey in the context of others shown and were sometimes distracted by the multiple routes.

It feels a little overwhelming...I still assume I'd have to do an undergraduate...I'm not really sure what this blended learning degree is. [Potential Career Switcher, Non-H&SC, M, 26, B, London]

Other respondents, particularly those in H&SC or those in more senior roles, felt that the postgraduate journey did not appear to fast track other routes, prompting concern that their existing qualifications would not be sufficiently recognised. Similarly, such respondents were sometimes discouraged by the indication that all routes ultimately led to the same place, which they saw as suggesting that their experience would not be taken into account.

Realistically they all end up at the same end, don't they? It's not like if you have experience they build on that.[Potential Career Switcher, H&SC, F, 40, C1, Manchester]

Responses also indicated some comprehension issues around the term 'first degree' amongst those who were older or had been out of education for a long time. A couple of respondents questioned whether this referred to having a first class degree or whether it might indicate that someone has more than one undergraduate degree.

CUREate website



CUREate is an Office for Students funded project that aims

to promote recognition of transferable skills between the arts and healthcare and to encourage people within creative industries to consider careers within health. Screenshots of the CUREate website were shown to individuals within the sample with unrelated first degrees, such as those in the arts and humanities.

For some shown, the apparent recognition of the value of creativity and expression in relation to care based work was strongly appreciated. Such respondents sometimes said that it was important to broaden the scope of nursing recruitment, to encourage greater diversity within the profession and to acknowledge that those with unrelated backgrounds have valuable skills.

So that's unlike anything I've ever seen before to do with nursing, it was encouraging people from a creative background into a biomedical science profession, it's quite refreshing actually. [NQP, F, MSc Adult Nursing]

Other respondents, however, questioned the approach of the website, which they saw as suggesting that arts were unvaluable or unviable careers. Such respondents sometimes interpreted the website in relation to the Government's 'Rethink. Reskill. Reboot' campaign, which they saw as unfairly targeting arts professionals and encouraging them to retrain in unrelated fields. Some also said that the site did not clarify why creative professionals should be encouraged to train in healthcare, which compounded the perception that site was implicitly grounded in negative assumptions about the arts. Other aspects of the site, such as the boxes titled 'form, focus and emphasis', were also felt to be vague and unclear.

It almost felt they were invalidating their current careers...like singer song writer and a podiatrist, it felt like they were slagging off the arts as not a viable careers. [Current Student, F, MSc Adult Nursing]

Imagery boards

In addition to the marketing examples just discussed, respondents were shown a compilation of images from existing marketing and communications around nursing careers to understand what kinds of images resonated and appealed.

The types of images that worked well included:

Images that depicted the breadth of nursing roles – Images that illustrated the variety of nursing including, for example, showing nurses in community settings, teaching roles, home visits and nurses who were not in uniform were engaging for many. Such images worked particularly well for respondents who struggled to envision themselves in a hospital environment.



It's nice to see a nurse in someone's home...that's more like my experience of being a community nurse.[NQP, F, MSc Adult Nursing]



I like the community ones...that feels more like me. hospitals can be daunting places, if I could choose I'd pick community setting. [Considerer, F, 25, C1, Liverpool]

The top two aren't in uniforms, that makes me think maybe there's different roles where maybe they're a bit more relaxed. [Considerer, M, 35, B, Manchester]

I'm getting a diverse job role...they're all very different situations. [Considerer, M, 35, B, Manchester]

 Images of nurses looking in control or apparently in senior positions – Showing nurses in positions of power or appearing to be taking control (such as in senior roles, teaching roles, or specialised roles) was widely appealing to respondents across the sample, particularly those for whom career progression was a key concern.



• Images of nurses working with children – The image below was engaging for some respondents who were working with children or who had children of their own as it helped them imagine how their experience of care-giving would translate to a nursing context.



I think the hospital ones, or the ones with children. some of them look like Grey's Anatomy. when people have all the blue uniforms on it makes me think of nurses. [Potential Career Switcher, Non-H&SC, F, 38, B, Birmingham]

Representations of staff diversity –
Respondents often said that nursing was an
ethnically diverse profession and that this
should be reflected within marketing
materials. In addition, a number of
respondents said that nursing could be seen



as a predominantly female role and therefore depicting men in nursing was important to redressing the gender imbalance.

 Positive team images – Images of nursing teams or multi-disciplinary teams (MDTs) were highly appealing for many respondents, particularly those who felt that their current job was lacking in a sense of community or support.



I like the ones of the team, I think teamwork is so important. I would be proud to be part of the NHS.[Considerer, F, 25, C1, Liverpool]

They all seem to be working with colleagues, so there's not much isolation. [Considerer, M, 35, B, Manchester]

I think that one shows me team work, you'll always be working with someone, working with other nurses, families....teams.[Current Student, F, Adult Nursing PGDip]

Images which worked less well or had mixed appeal included:

Images that solely showed nurses in uniforms (I.e not undertaking an obvious role or interaction with patients) – for some amongst the sample, uniforms were seen to illustrate that nurses were part of a larger team and were viewed as a positive symbol of the NHS. However, whilst respondents generally did not have negative associations with nurse uniforms themselves,



some found it difficult to imagine themselves in uniform and therefore such images were less resonant.

I just don't see myself there...i like the camaraderie but I honestly I just can't see myself in that environment at all. [Potential Career Switcher, Non-H&SC, M, 28, C1, London]

 Medical images – similarly, images of surgery or medical equipment was daunting to some potential career switchers who struggled to envision themselves in highly medicalised settings. Hospitals can be daunting places, if I could choose I'd pick a community setting. [Considerer, F, 25, C1, Liverpool]





Images of consultations and injections – some images which showed routine nursing
activities such as consultations and injections were seen as mundane and lacked
interest for some.





 Images of male doctors and consultants with female nurses – Some within the sample responded negatively to the following image which shows a female nurse with two male NHS staff in nonuniform. This was interpreted as reinforcing stereotypes of male doctors and consultants and female nurses and played into some respondents concerns about nurses' relative lack of power.



It's too many women, the only men are doctors or senior managers, where I work the doctors and the senior managers are 50/50 men and women...but graduate nurses it's something like 85% female. [NQP, F, MSc Adult Nursing]

