



UNDERSTANDING  
NURSING ASSOCIATE  
PRACTICE

# PERSONAL & PROFESSIONAL DEVELOPMENT

*FOR* NURSING ASSOCIATES

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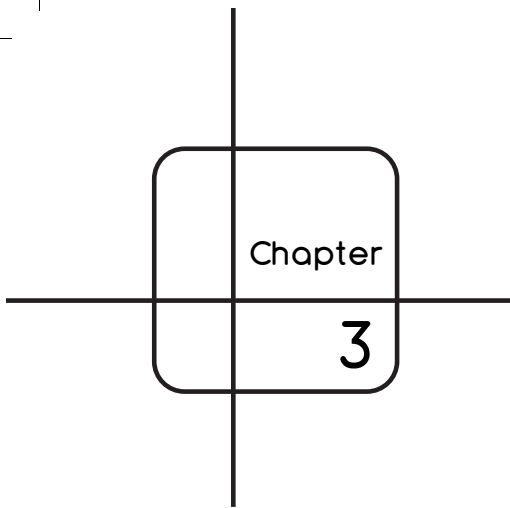
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# Resilience for professional practice

## *NMC (2024A) STANDARDS OF PROFICIENCY FOR NURSING ASSOCIATES*

This chapter will address the following platforms and proficiencies.

### **Platform 1: Being an accountable professional**

- 1.1 Understand and act in accordance with The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates, and fulfil all registration requirements.
- 1.5 Understand the demands of professional practice and demonstrate how to recognise signs of vulnerability in themselves or their colleagues and the action required to minimise risks to health.
- 1.8 Understand and explain the meaning of resilience and emotional intelligence, and their influence on an individual's ability to provide care.
- 1.10 Demonstrate the skills and abilities required to develop, manage and maintain appropriate relationships with people, their families, carers and colleagues.

### **Platform 2: Promoting health and preventing ill health**

- 2.5 Understand the importance of early years and childhood experiences and the possible impact on life choices, mental, physical and behavioural health and well-being.

### **Platform 5: Improving safety and quality of care**

- 5.9 Recognise uncertainty and demonstrate an awareness of strategies to develop resilience in themselves. Know how to seek support to help deal with uncertain situations.

## Chapter aims

- Explore the role of resilience and how this influences professional practice.
- Consider how to develop and maintain professional resilience.
- Identify the role of professional resilience in leadership in practice.
- Outline organisational resilience and the impact this has on the health and care workforce.

# Introduction

This chapter follows on from Chapter 2 discussions on reflection, reflexivity and self-awareness to consider how these support self-management and resilience, both personally and professionally. You will explore the concept of resilience, the impact personal and professional challenges have, and how these impact each other. The psychological basis of stress will be outlined to enable recognition of your own signs and symptoms of this, linking it to the impact that the expectations we set ourselves can have. This relates to **emotional intelligence**, the ability to recognise both our own and others' emotional state, which can impact care giving. The role of burnout, coping with demanding work and workloads, and experience of systemic barriers for minority groups, such as people from ethnic minority backgrounds, cultural differences, or neurodiversity, will link to self-care and the importance of managing your own mental and physical health for well-being. You will consider how to manage your own needs to be resilient with the help of the role played by support networks, Schwartz Rounds (Golding, 2024) and mindfulness. The role of organisational resilience will be explored to see how you may be affected by this.

## Background

When you work in a caring profession, whether you are based in a hospital, General Practitioner (GP) practice, care home, working in patients' homes, a prison healthcare facility or other health provision, you will be faced with being available to your patients, service users or clients, often at times of vulnerability. People need you to be there for them, to help them navigate or manage the care system, their health needs or other wide-ranging needs. You, as a nursing associate or student nursing associate, have made a commitment to support people in meeting their care needs to meet the NMC (2024a) *Standards of Proficiency for Nursing Associates* and the NMC (2018a) *The Code: Standards of Professional Behaviour*. You will stand by their side, hold their hand, be a form of gentle support, offering a skilful presence to reassure, ease discomfort and re-establish well-being. These are undertaken mindfully, with awareness of the responsibility you have to your patient, but at times, they can take their toll on your own emotional well-being, particularly when you are faced with additional stressors within your own life. This can include undertaking a programme of study, as discussed in Chapter 1 – balancing your own needs, your family commitments and the need to work on top of having enough time to study and complete assessment is demanding. Life has a nasty habit of sneaking up on you when you least expect it, and how you manage and cope with those unexpected, or even expected events, can cause difficulties in managing your emotional health and well-being.

## What is resilience?

Resilience has several definitions, depending on the point of view being looked at. It can be your capacity to tolerate excessive demands and stressors without experiencing stress-related problems that affect your performance; for example, managing assignments while working and supporting your family's needs. It can also be determination to see something through, such as when you find it difficult on a placement, you make the most of the learning opportunity despite the challenges; or an ability to 'bounce back' from a challenging situation to continue as you usually would, such as at the end of a stressful time in a personal relationship that resulted in being less focused on an assignment; you are able to pick this up again once the relationship issue is resolved. Therefore, this can be thought of as a process (working through the issue to manage your needs), an outcome (being resilient as a result of the issue after it is resolved) and an ability (able to manage the issue without it affecting you unduly) (Southwick et al., 2016).

## Case study: Andreia

Resilience as a process: Andreia settled in the UK after being displaced from Ukraine due to the conflict. Unfortunately, their family were not all able to leave so they have been unable to spend time together, but Andreia talks a lot about their 'UK family' who offered a home and have become their main source of social support. Andreia spent time studying English to be able to gain a qualification and contribute to the society that had offered refuge during the conflict. At home, they were employed in the leisure industry but felt that they needed to be able to make a significant contribution to the hosting society that could also support their homeland, should they ever be able to return. They were able to secure a role as a healthcare assistant at a local care home and offered the opportunity to complete the nursing associate course as an apprenticeship.

Resilience as an outcome: Andreia has been in the UK and studying hard for three years now, coming towards the end of the SNA course. They have struggled with English not being their first language, as well as academic study, which they had not attempted before. They spoke to their personal tutor who suggested they access the academic student support but there have been times when Andreia has been deeply frustrated and upset. The final straw came when their brother was injured because of the conflict at home, which resulted in taking some time out from studying. Having six months away has enabled Andreia to refocus following their brother's recovery and they have now returned with renewed determination.

Resilience as an ability: Andreia recognised the strategies that helped them to manage overcome this experience and so, in the following assessment period, they accessed support from student services, tutors, their peers and their 'UK family'. Putting these strategies in place helped Andreia successfully complete the assessments without feeling overwhelmed and stressed as they had previously.

Resilience as an outcome: Andreia's self-awareness, and ability to seek support when needed, helped them to manage their needs at different times which result in managing these effectively.

The passion, determination and perseverance you have for achieving your long-term goals has been referred to as 'grit' (Duckworth, 2016) and this has been shown to determine academic and professional success regardless of your IQ (intelligence quotient), which measures human intelligence, including your ability to resolve or solve problems; therefore, determination to succeed involves resolving or solving problems you encounter along the way.

## Activity 3.1 Reflection

Reflect on an experience where you had a negative emotional reaction to change within your practice as a student nursing associate (SNA)/nursing associate (NA).

Now reflect on an experience where you were resilient when faced with a change in practice.

Consider why you reacted differently in the two situations.

Can you identify the three different types of resilience through your experiences?

*(Continued)*

## Chapter 3

(Continued)

Was this a resilient process?

Was resilience the outcome?

Do you feel your resilience is an ability?

*This activity is a personal reflection, so the outline answer at the end of the chapter provides guidance only.*

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Resilience in individuals is needed to manage risks arising from life events that may include challenges or threats to health and well-being. The NMC (2024a) *Standards of Proficiency for Nursing Associates* recognise the importance of managing your own emotional health and well-being, including vulnerability in yourself and other colleagues; therefore, it is important that you can explore your own emotional well-being needs. To assist you in developing a theoretical understanding, a conceptual framework, Neuman Systems Model (1995 cited in Turner and Kaylor, 2015), which focuses on humans, environment, health and nursing, will be used to explore resilience within health and care settings. Later in the chapter, we will describe strategies that help promote resilience development in nursing.

### Understanding theory

Neuman developed an approach to think about resilience within the nursing profession as they recognised that by keeping nurses emotionally resilient, the impact on patient care and healing could be strengthened through reducing the patient experience of stress. The basis of the model considers that patients interact within an environment, continuously responding to changes within this. To enable this to happen, patients develop strategies to defend themselves from stressors that may result in a positive or negative outcome. This ability to adjust and adapt to the environment is a normal defence process, which results in the patient's wellness level being maintained, described as a 'protective buffer,' as it prevents stressors overwhelming normal well-being levels. The role of social support, spirituality and a person's age are recognised as being key areas for maintaining status quo of well-being.

When this defence mechanism is challenged with environmental stressors, the patient has an adverse response. Your response can help in a few ways, with an initial intervention, such as identifying risk factors or using a health promotion approach. The next line of support could include trying to expand the patient's defence system through actions that strengthen this, for example, active listening, meditation or mindfulness activities.

One of the challenges recognised within Neuman's Systems Model (1995) is the role of physiological, psychological, sociocultural, developmental and spiritual elements that must be considered. Understanding the physiological response to stress, as discussed in Chapter 2, will help you understand your patient's responses to stress; stress hormones produce physiological changes that cause the heart to pound, breathing to quicken, tensing of muscles or sweating, the 'fight-or-flight' response. This requires an understanding of the patient themselves and their unique life experiences, beliefs and values, and will require you to keep an open mind to why they are reacting the way they are. You need to remember that being in a care

environment removes patients from their normal environment. This interrupts basic routines and removes autonomy to make decisions, such as what to wear, what to eat and who they are sharing the space with. This can be disempowering for patients and create stress and vulnerability where it does not usually exist in addition to the ill-health experience that resulted in needing to access a health service.

Once you have acquired skills in recognising the patient's responses to stressors in the care environment, it is important that you consider your own reactions and responses to these. You will face stressors within the care environment as well; demands on managing your workload, staff sickness, patients deteriorating, relatives visiting and wanting information, as well as meeting your own basic needs for hydration, nutrition or elimination, which may need to wait because of the demands being made on your time. These may be on top of personal stressors, such as managing your home and family, ill-health within the family, demands others may make on you, and of course, the requirements to complete your studies. These impact in your ability to manage your own responses to stressors and can result in not maintaining positive emotional well-being.

## Underpinning resilience

When you think about your own responses to stressors, it may help if you understand some of the underpinning processes that enable or hinder these to manage the NMC (2024a) requirements within the nursing associate standards.

## Biological, personality and sociocultural connections

The biological impact of hormones and autonomic nervous system is linked to the ability to cope with stress. Some people's personality may exhibit defiance, or they may be a risk taker or an optimist, and these may change at different ages and stages of life. This is because your brain continues to develop and change throughout your life; for example, executive function (the ability to control and manage your thoughts and behaviour) and social cognition (thinking). In parts of the brain of younger people, there is increased amounts of white matter where decision-making takes place and reduction in grey matter, where understanding the risk to themselves and understanding others' perspectives is underdeveloped. These differ across genders but have been linked to development of mental health issues across adolescence (Schweizer et al., 2023). This links to sociocultural perspectives, as life experiences can influence how you deal with situations and your coping strategies. The support that you have around you can influence how you will deal with a situation. Therefore, it is important for you to recognise how your age can influence your experience, how you manage your emotional needs and the influence on decisions you make in those moments. This relates to NMC (2024a). Requirement to understand resilience and emotional intelligence, and how this influences your ability to provide care.

## What determines resilience?

Various factors underpin resilience as explored below.

## Activity 3.2 Reflection

What things do you think you need to be a resilient person both professionally and privately?

*This activity is a personal reflection, so the outline answer at the end of the chapter provides guidance only.*

### Self-mastery

Your outlook on life and how you view yourself and others will be influenced by your upbringing and environment. When facing adverse situations, a positive outlook has been found to result in stronger coping behaviours to protect and result in a quicker recovery. This helps to improve your health and well-being, and achieve a sense of self-mastery. Conversely, a negative view of yourself and others can increase how you perceive stress, and limit your self-mastery and belief that you can manage the challenges you face. Therefore, if you see things negatively, you are more likely to think narrowly, have limited belief in yourself and negative self-talk that can result in less effective coping habits.

### Social support

Support comes in the form of family, intimate partners, colleagues, neighbours, friends and spiritual community members, to name a few. Strong support networks and using social support are linked with resilience, as they strengthen the ability to endure psychological challenges. It has been shown that better quality of life results from strong social bonds, and for your patients, wound healing, and life expectancy are also positively influenced. In contrast, a weaker sense of control and depression are associated with a lack of support.

As a resilient person, you will develop the ability to communicate effectively, creating healthy social bonds and show value and compassion. These are traits that enable you to be an effective nursing associate and meet the *NMC Standards of Proficiency for Nursing Associates (2024a)*. It is important to recognise that you can learn to improve your ability to form healthier relationships and stronger networks of support.

A myriad of traits is associated with a positive outlook. Those most associated with resilience are believing that success is possible (optimism), viewing difficulties as opportunities for growth and learning, having the willingness to push forward, being able to accept change, and being open to making mistakes and learning from failures. All these traits can be cultivated with practice and are not dependent on upbringing and genetics.

### Genes

A range of genes has been identified that are associated with resilient phenotypes (how a gene expresses itself physically). Various genes have been identified that influence responses to stress, the role of the nervous and immune systems, as well as production of serotonin and dopamine, neurotransmitters which decide your biological response to stress. Although science shows genes have a role in resilience, these can be influenced through life experience, as the role of nature and nurture work together. Therefore, self-mastery and social support can influence your genes in responding to stress.

## Child development

Attachment theory (Bowlby, 1988) identified that a safe base and early childhood experiences can positively or negatively affect the development of the stress response and how individuals subsequently learn to cope with adversity. The central nervous system circuits are affected by trauma and abuse through a hyperactive stress response. This leads to more anxious behaviour, with helplessness being learnt as a belief that you cannot control adverse situations. When individuals realise changing behaviours is possible, the learnt helplessness does not occur. This knowledge helps understanding the importance of early years and childhood experiences and their possible impact on life choices, mental, physical and behavioural health and well-being outlined in the NMC (2024a) standards.

Cultural beliefs, values and expected behaviour can influence individual behaviour and coping styles. How you see yourself and your relationship with others may predict resilience; for example, the culture within your family will have influenced your own self-esteem and self-worth. It is important to remember that culture is not an ethnicity or religion but the attitudes of your family, friends and social network in which you were brought up. Cultures with strong core values that respectfully collaborate with open communication, have been shown to have strong resilience within the community as well as individual resilience.

## Managing stress

You will have coping strategies that help you cope with stress; however, some of these may be maladaptive or adaptive. Maladaptive strategies may reduce feelings of anxiety and help you cope in the moment, but these are not healthy for your body; for example, smoking. Adaptive behaviours, therefore, are behaviours that help you cope with stress but are also positive healthy strategies that do not adversely affect your body or mind, for example going for a walk to clear your head.

## Becoming more resilient

It is important that you are honest with yourself and realistic about what you can take on and manage effectively. There will be times when additional stressors impact on you; therefore, thinking about your own fears and confronting these head on, appraising situations realistically, calming your emotional responses and maintaining health behaviours, such as good sleep hygiene, and having a balanced nutritional input and exercise routine are all examples of adaptive coping habits.

Avoidance of managing your fears through immersing yourself in work, drinking alcohol or binge eating can all impact on your sleep, reduce your energy levels so you feel unable to exercise and are maladaptive coping habits.

There are some adaptive coping habits that can improve your resilience, such as meditation, yoga, accessing social support, connecting with your spiritual needs, reflecting on your thoughts and beliefs, regulating your emotions. Humour and laughter are good sources of coping with difficult experiences as they relieve the emotional burden and, psychologically, they relax your stress response. They have been shown to increase immune responses, reduce experience of pain, give you greater energy, as well as soothe tensions to improve your mood and increase your sense of well-being.

Spirituality is another important consideration. As previously discussed, this is not confined to religious or cultural beliefs but is an internal process that creates your values, ethical beliefs and social behaviours. If you have a strong sense of purpose, feel connected with your wider environment, this can enable management of traumatic events. Conversely, low spirituality is related to low resilience.

By developing and maintaining good relationships and support networks, accepting that some things cannot be changed, engaging in discovering yourself, thinking about the long term so that you do not make rash decisions and take care of your mind and body through good sleeping, eating and exercising habits, you will enhance your resilience and this will contribute to stronger self-confidence too, although some of these are easier than others and some are easier said than done!

You can develop greater awareness through mindfulness as this strengthens mastery through your immersion in the present moment. This involves you being able to observe your thoughts and emotions without becoming them. Some mindfulness exercises use colouring, but this can be any activity that requires you to give it your full attention, such as knitting or participating in a physical activity that you need to concentrate on.

For those with greater complex or distressing thoughts or emotions, cognitive behaviour therapy can help you learn to regulate your negative thoughts and memories, rather than getting stuck within them. This would require accessing professional support, either through your employer's occupational health service, your GP or student services where you are studying. In doing so, you would show that you recognise uncertainty and demonstrate an awareness of strategies to develop resilience in yourself, as required for NMC (2024a).

As discussed earlier, humour and laughter can be powerful tools to enable feeling less stressed as laughter can bring you into the present moment, difficult thoughts are left behind and future anxieties are not yet recognised. You can be distracted in a positive way, it can create intrigue, you want to find out what is so funny. This helps stop your mind focusing on the negative thoughts, breaking habits involved with patterns of negative thinking, interrupting the neural pathways to create new ones that are more positive, and laughter brings joy into your life (Neal and Gonot-Schoupinsky, 2023).

## Maintaining balance

When it comes to the human brain, the ability to effectively multitask is a myth. Although computers can run two or more programs simultaneously, our brains must task-switch, and in the transfer of attention, time and productivity are lost. Monotasking, or single tasking, is now considered a way to increase productivity and actually maximise time. Evidence suggests that although you may feel that you manage a number of tasks at the same time, these will not be completed as well as they could be if completed individually. If you prioritise tasks at the start of the day, block calendar time to work on specific projects, pace yourself by scheduling rest periods, you can focus on one task and see this through to completion (Christensen, 2020).

### Activity 3.3 Work-based learning

Use the questions below to evaluate how you approach managing your time and how successful you are with managing all you set out to achieve.

Track your week to evaluate how many individual tasks you have to manage.

Do you give your full attention to each task? If not, how many tasks are you trying to manage at the same time?

Are you experiencing aches, feeling stressed or out of rhythm with your life? If so, which tasks or demands are contributing to this?

Are you sleeping well, getting to sleep easily or managing to stay asleep? If not, what thoughts do you have when trying to sleep – do they relate to the demands you have?

Are you reflecting on your life experiences? If so, have you managed to identify what helps or hinders you?

Do you feel able to say no when you have a lot of conflicting demands on your time? What prevents you from saying no?

When you have completed this activity, reflect on your responses; do you need to work on managing your time to enable you to complete one task at a time?

Do you have any intrusive negative thinking that can benefit from using laughter or mindfulness approaches to create new thinking habits?

*This activity is a personal reflection, so there is no outline answer at the end of the chapter.*

## Developing and maintaining resilience

### Activity 3.4 Reflection

Can you identify any ways that you can monotask?

*This activity is a personal reflection, so the outline answer at the end of the chapter provides guidance only.*

	Self	Social
<b>Recognition of</b>	<b>1 Self-awareness</b>	<b>3 Social-awareness</b>
	Emotional Intelligence Accurate self-assessment Self confidence	Empathy Organisational awareness Understanding the service
<b>Regulation through</b>	<b>2 Self-management</b>	<b>4 Relationship management</b>
	Self-control Transparency Adaptability Initiative Achievement drive	Conflict management Building bonds and collaboration Change catalyst Teamwork and inspiring others Leadership and developing others

Figure 3.1 Goleman's emotional intelligence model adapted (2002)

### Understanding theory

Goleman's (2020) Emotional Intelligence Model.

Goleman identified that emotional intelligence is how you manage yourself within your relationships through four areas, as seen in Figure 3.1:

*(Continued)*

(Continued)

1. self-awareness, knowing what you feel and why you feel that way, which are associated with positive decision-making;
2. self-management, which is how you manage your difficult emotional responses, so they do not hinder what you want or need to do, being able to adjust these so you are able to learn as all emotions have functions;
3. social-awareness, is having empathy, which is understanding how others feel and relating to that; and finally,
4. relationship management, how you put these together within your relationships.

Goleman argues that the area of the brain that governs emotional intelligence is the last part of the brain to develop; therefore, it is important to teach this to children so that, over time, they develop this skill. This does not mean that as an adult you are unable to learn and develop emotional intelligence; neuroplasticity of the brain continues throughout life and as you work on the different domains, you strengthen and develop the skills necessary for good emotional intelligence.

In being able to explore Goleman's model, you will support demonstration of skills and abilities required to develop, manage and maintain appropriate relationships with people, their families, carers and colleagues as identified within the NMC (2024a) standards.

## Organisational resilience and the workforce

Goleman's work has focused on leadership in organisations, recognising the impact a leader's resilience has on those they lead and manage; therefore, it is not just you as an individual that requires the ability to be resilient. Good resilience within an organisation is necessary to manage risks; for example, during changes within the organisation, changes in the economic environment that impact on provision of services, political changes that influence policy directions within services, and staffing changes, such as being able to meet the provision of services. If an organisation lacks resilience, there is a risk to its reputation, as well as its ability to provide and maintain effective services. It is particularly important within care services as resilience in the workforce is needed to ensure their performance is maintained in service provision (Belasen, 2021).

### Activity 3.5 Work-based learning

What factors may impact your organisation in terms of its resilience?

What factors impact staff resilience?

*An outline answer is provided at the end of the chapter, but remember that each situation is different, so your experience in clinical practice may differ.*

One initiative that has been developed within health and care services to enable staff resilience is Schwartz Rounds (Golding, 2024). This is a structured forum for staff across an organisation, whether providing frontline care or not, to provide a regular opportunity to come together and talk

about the emotional and social experiences of working in healthcare. It aims to help you understand the challenges you experience, but also recognise the rewards of providing care. It does not intend to solve problems or focus solely on the clinical perspective of care provision, as it intends to support people in their roles through giving time and space to reflect on these. Evaluation of Schwartz Rounds has demonstrated that those who participate feel less stressed and isolated within their role and have a greater awareness and appreciation of others' roles. This can help to reduce the hierarchical nature between different roles, and the resulting increased compassion shown can also have a positive impact on patients' experiences of care. Participating in Schwartz Rounds can help demonstrate the NMC (2024a) standards highlighted at the start of the chapter.

## Activity 3.6 Critical thinking

What do you think the challenges are for staff to participate in Schwartz Rounds?

*An outline answer is provided at the end of the chapter.*

### Case study: Manuel

Manuel is participating in their first Schwartz Round on Imposter Syndrome at university. While listening to the three story tellers, they recognise some of the experiences, emotions and responses to situations, that although are not their experience, are similar. They grew up in a remote environment, kept away from school by their family. Throughout their childhood, they shared care responsibilities for their older sibling who had a learning disability and lacked opportunities to interact with other children. Since they have grown up, their sibling has died and they were left wondering what to do with their life, so they embarked on a distance learning programme during the pandemic and, subsequently, they moved to the local town and started working as a carer. Since then, they have moved further away from their family and entered other care environments, so when the student nursing associate opportunity presented itself, they felt they could apply for this. They have now been on the programme for four months. When the panel finished, the audience was invited to share their responses and experiences. After listening to others sharing their experiences, Manuel decides to speak up about their experience. Here they outline their childhood experience and share the challenges they have experienced being at university as a result. That they felt they do not belong and are not good enough, as they have not had any previous formal education, and socially, they feel awkward, not knowing the social cues for interaction with peers.

Following this, many others voice their support for Manuel and one of their peers, also in the audience, approaches at the end of the session to talk about how they can support them with meeting people and socialising more with people their own age. Manuel is unsure but agrees to try this. Two months later, Manuel is able to share with his personal advisor at the university that the experience of the Schwartz Round has changed their life; they have gained confidence as they now have a social network outside their family, they feel able to engage and relate to their peers and this has helped them to feel happier in all areas of their life. This has been noted by their line manager who shared feedback on the way they interact with their colleagues in a lighter way, how others have commented how much they enjoy working with Manuel and how their value within the team has increased.

Organisations that are resilient are able therefore to support staff in providing care as the environment reflects those positive approaches needed for resilience to thrive. This in turn can enable individuals to develop strong resilience in the roles they complete and can influence leadership, as Goleman discusses. Therefore, leadership as a nursing associate is something that you may develop as you progress with your own resilience development, supporting the quality of care you deliver to patients or service users throughout your career. Leadership in nursing associate practice is explored in more depth in *Understanding Leadership for Nursing Associates* (Cowls et al., 2023).

## Chapter summary

This chapter has identified the importance of personal resilience to manage and maintain healthy relationships. The nature of patients' resilience, and the interaction you have with them, affects the patient experience and your own self-management. Emotions play an important role in how you feel, so being able to recognise and respond to patients when they are experiencing stressors is an important mechanism in maintaining your own caring responsibilities as a SNA/NA. Adaptive and maladaptive coping mechanisms have been explored to highlight strategies to enable developing resilience through mindfulness and laughter. Goleman's emotional intelligence model has been identified as a way of increasing awareness of the components of emotional intelligence to strengthen your relationships with others. The role of organisational resilience, the impact this has on a workforce and the use of Schwartz Rounds to enable stronger resilience have been identified, along with the NMC (2024a) standards that link to resilience, clinical decision-making and subsequent impact on patient care.

## Activities: Brief outline answers

### Activity 3.1 Reflection (page 37)

You may have recognised how you respond to stressful situations and the strategies you use to enable you to manage these effectively. Sometimes, you may not manage but then you work your way through to overcome the situation to move forward. Your coping strategies will be unique to you and unique to situations as they present themselves; for example, you may feel more resilient in some situations compared to others. Recognising this, and the strategies that help you navigate them, will help you in embedding these strategies in future.

### Activity 3.2 Reflection (page 40)

What things do you think you need to be a resilient person both professionally and privately?

*The ability to recognise when something is causing you stress or feelings of anxiety. Being able to reflect on uncomfortable feelings or challenges that you face.*

*Being able to seek support from others.*

*Being able to take actions that help you feel happier, more relaxed, such as taking a walk or being in the natural environment, doing something creative, spending time with people you care about and who care about you.*

*Self-care; making sure you eat well and have a good sleep routine.*

### Activity 3.4 Reflection (page 43)

When you are using your computer, silence email notifications so you are not interrupted, make a specific time to read and respond to these. Try to avoid social media when focusing on a project, research has demonstrated that social media not only impacts on your emotional well-being but also reduces focus; so leave your phone in another room when you need to study or complete assignments.

### Activity 3.5 Work-based learning (page 44)

Factors that can impact an organisation's resilience include financial pressures, increased demand on services, political change with policy direction, quality assurance measurement through CQC or commitment of staff.

Factors that impact staff resilience include support for continued professional development, leadership approaches, supportive supervision of staff, feeling valued and listened to.

### Activity 3.6 Critical thinking (page 45)

*Challenges for staff to participate in Schwartz Rounds:*

Time – being able to be released from a work environment.

Attitudes towards participation if line manager does not see the benefit.

It can feel daunting as you are sharing your own experiences.

This can make you vulnerable.

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## Annotated further reading

Watch this video where Goleman discusses: What is emotional intelligence [www.youtube.com/watch?v=Y7m9eNoB3NU](http://www.youtube.com/watch?v=Y7m9eNoB3NU)

To enhance understanding of your own emotional intelligence, read and ask three questions from:

Goleman, D. and Nevarez, M. (2018) 'EMOTIONAL INTELLIGENCE: Boost Your Emotional Intelligence with These 3 Questions', *Harvard Business Review Digital Articles*, pp. 2–5. <https://hbr.org/2018/08/boost-your-emotional-intelligence-with-these-3-questions>

Watch this Ted Talk Video with Sarah Jayne Blakemore: The mysterious workings of the adolescent brain (2012). This 15-minute video explains executive and social cognition of the adolescent brain that will help you understand why some young adults may not understand, respond or see things in the same way as people further into adult life. <http://www.youtube.com/watch?v=6zVS8HIPUng>