Experiences and Emotions of Faculty Teaching in Accelerated, Second Baccalaureate Degree (ASBSN) Nursing Programs

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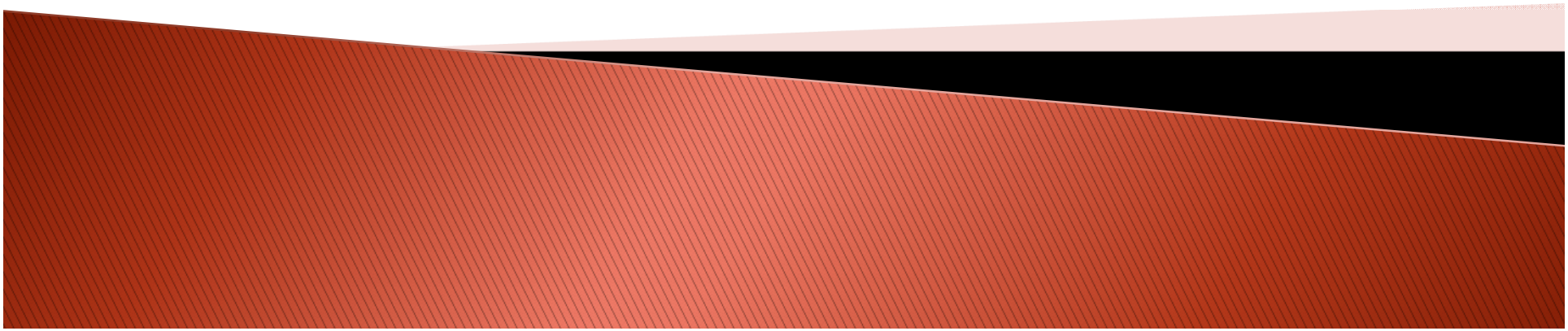
October 11, 2013



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Background

- For students with a previously earned baccalaureate degree
- 12-18 months long
- > 225 ASBSN programs over the past 40 years

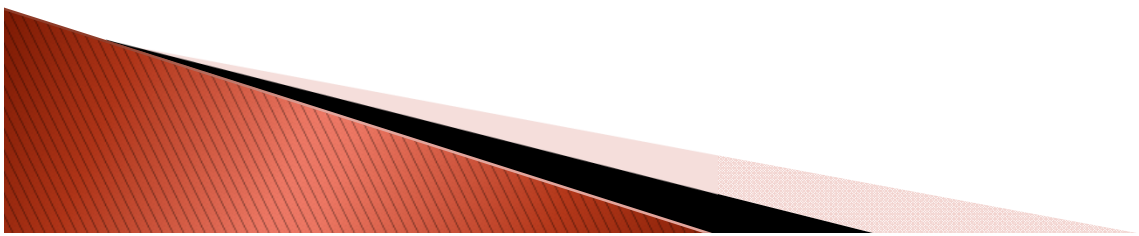
UW-Eau Claire ASBSN Graduate

Research Questions

Research Questions

- What are the experiences of faculty who teach second baccalaureate degree students in an accelerated program?

- What associations exist between selected demographic characteristics and respondents' descriptions of their teaching experiences?



Today's Presentation

ASBSN faculty's description of

- rewarding, challenging, and distressing experiences
- powerful and/or significant emotions

UW-Eau Claire ASBSN Students and Faculty

Literature Review

Faculty describe rewarding experiences

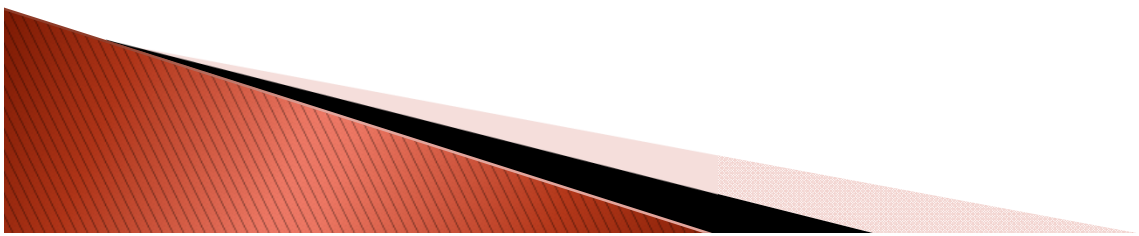
- Highly motivated adult learners with high standards and valuable life experiences

  Cangelosi, 2007; Hamner & Bentley, 2007; Hegge & Hallman, 2008
- "They are the students who want to sit in front of the classroom, who come to class prepared, are fully engaged in class discussions…"

  Rodgers, Burson, & Kirschling, 2004
- Students' wish to be challenged and to excel, both of which motivated faculty to "perform 'at the top of my game'"

  Cangelosi & Moss, 2010
- Understanding a student's perception of being "a novice again" was described as an "a-ha moment" by one faculty

  Brandt, Boellaard, & Zorn, 2012



Faculty describe challenging experiences

- All faculty described students as challenging; some identified them as perfectionists; students' prior experiences or education may be intimidating

  Cangelosi & Moss, 2010

- Students were seen as wanting to be "the perfect nurse so they try so hard that they frustrate themselves…in some cases it can almost paralyze them"

  D'Antonio, et al., 2010

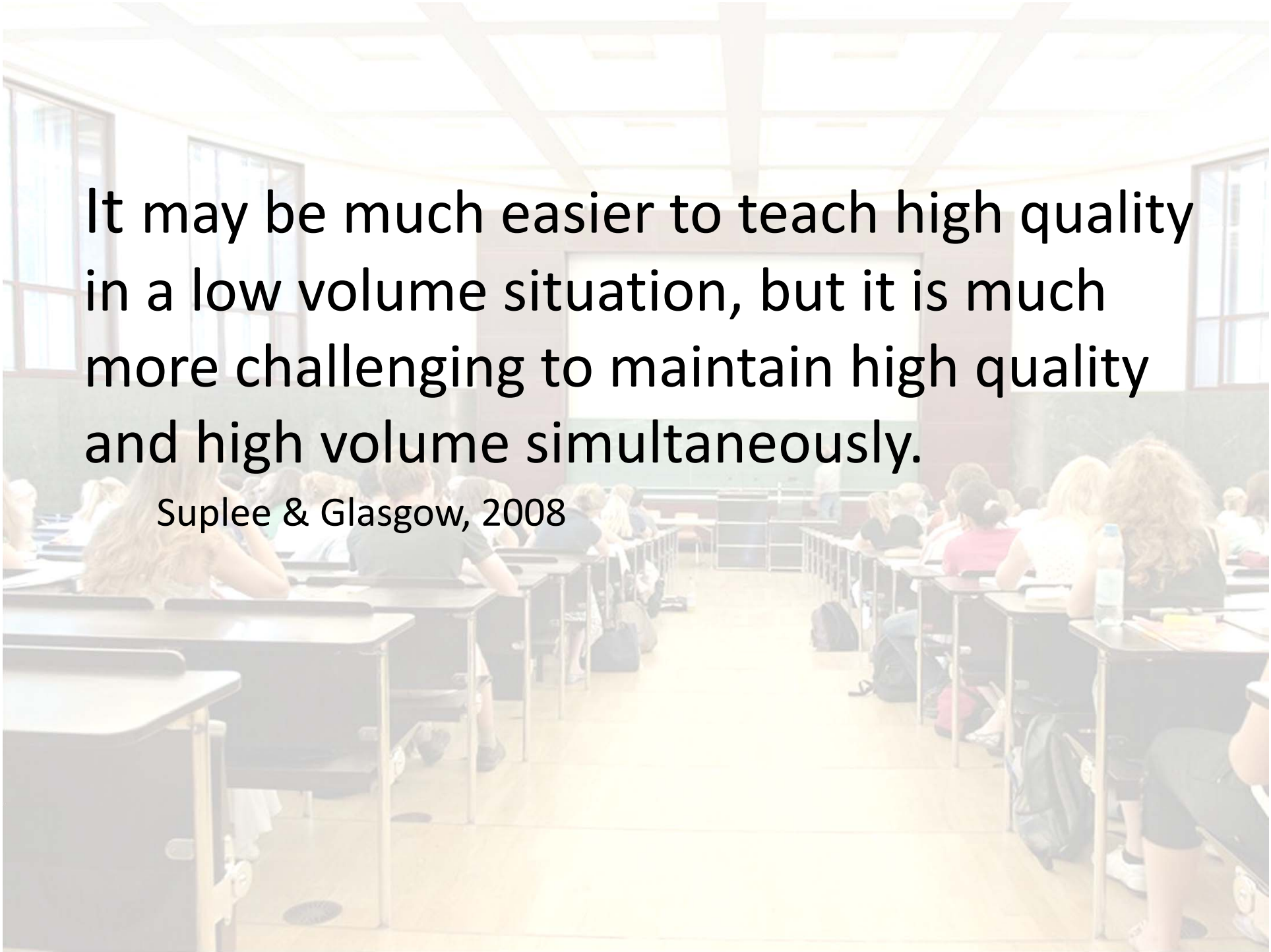
- Students
  - Aim to control the classroom dynamics and challenge the faculty at every interaction
  - Demand more evaluation time
  - Protect their free time and express concerns when it was threatened

  Lockwood, Walker, & Tilley, 2009

ASBSN students are
"treading uncharted waters,
sometimes needing a compass,
sometimes needing a captain,
sometimes needing an oar to grasp,
sometimes needing a lifeboat"

Hegge & Hallman, 2008

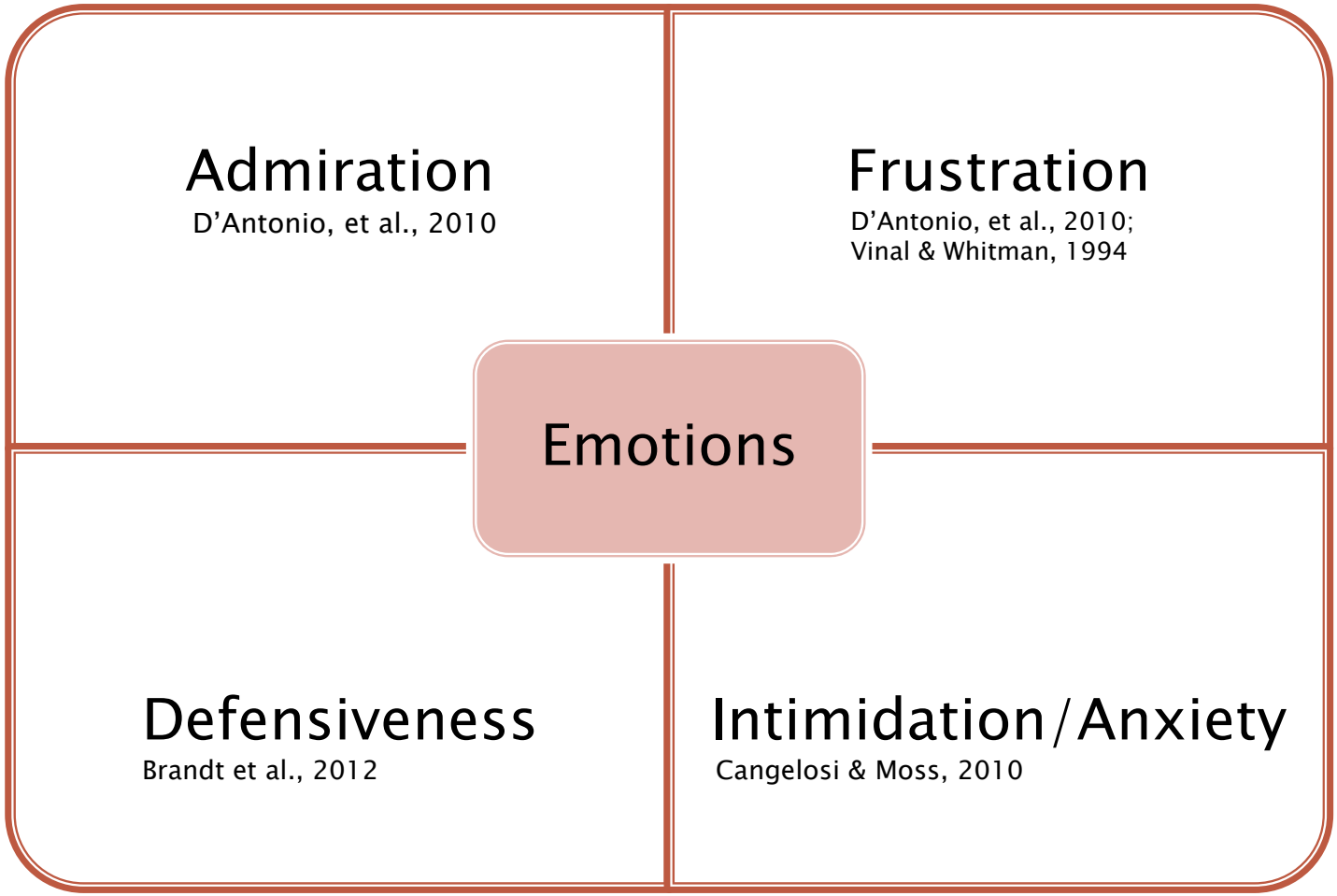
Photo courtesy Flickr user flicktone



It may be much easier to teach high quality in a low volume situation, but it is much more challenging to maintain high quality and high volume simultaneously.

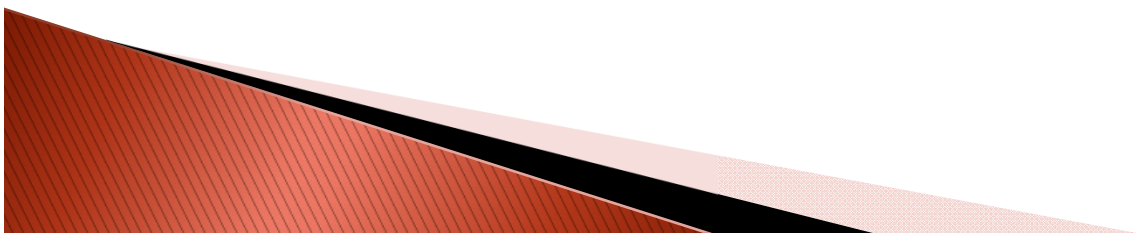
Suplee & Glasgow, 2008

Faculty describe emotions



Literature Synthesis

- Recent, rapidly-growing mix of research and non-research
  Beal, 2007
- Focuses on students & programs; faculty experiences & emotions inferred from
  - student experiences
  - faculty descriptions of teaching strategies and programs
- Existing research about the faculty perspective: single settings, small samples
- We build on this: larger sample, broad geographic region



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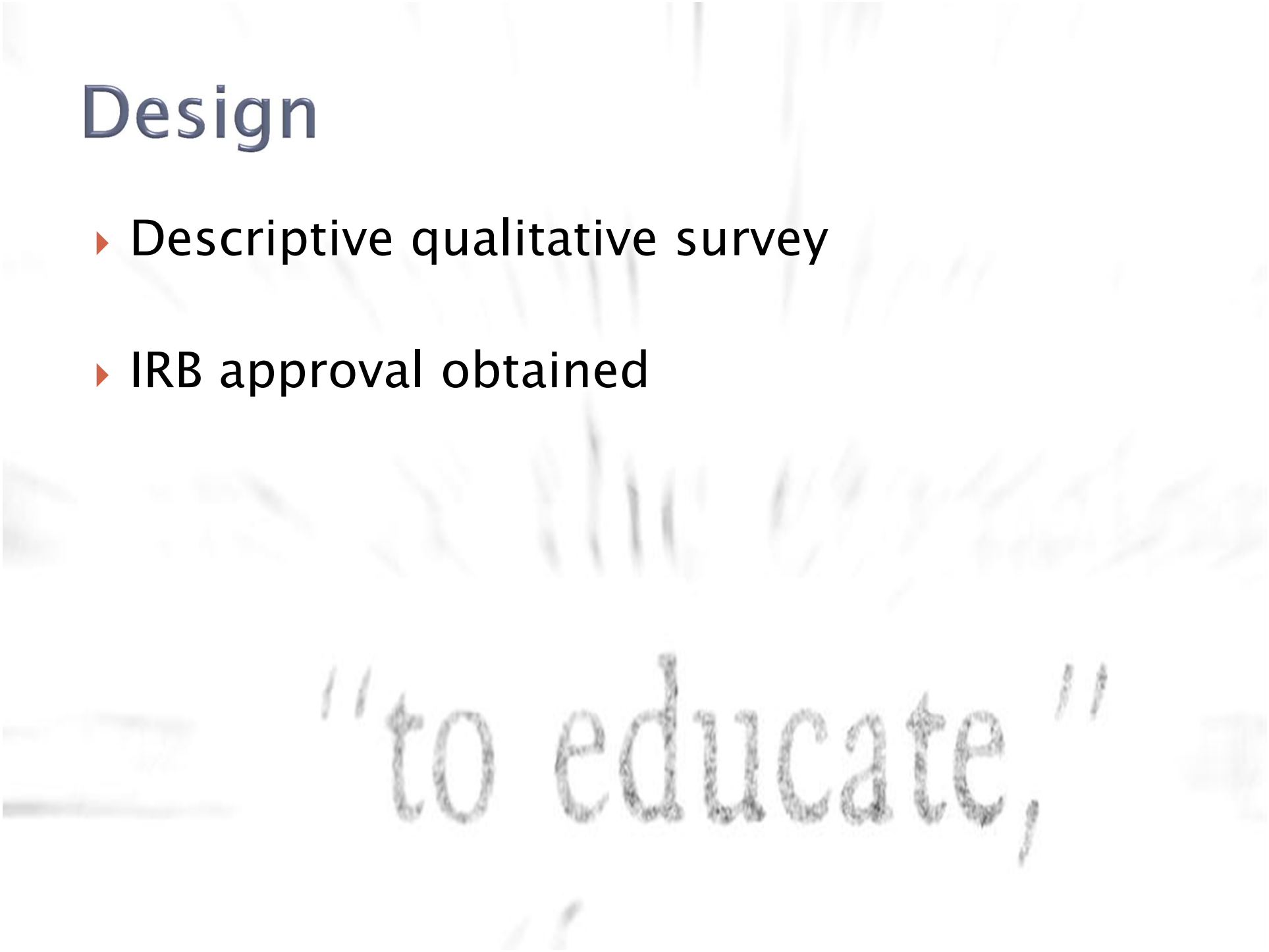
Method

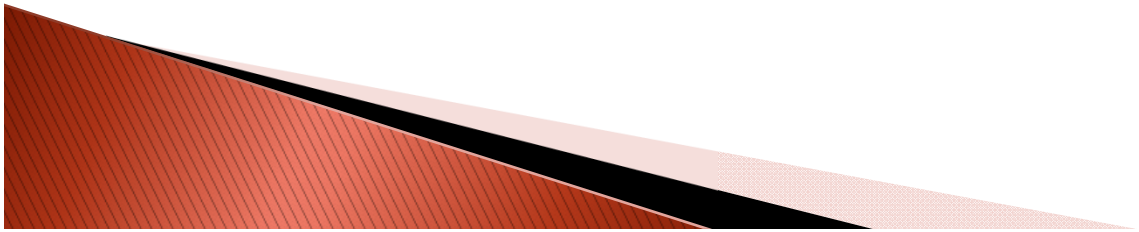
Design

- Descriptive qualitative survey
- IRB approval obtained



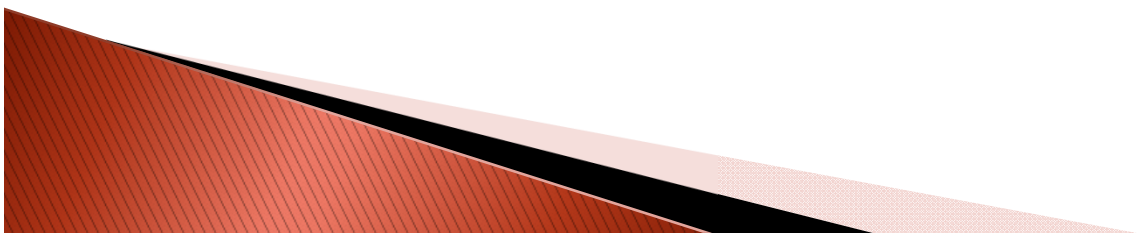
Purposive Sampling

- All accredited ASBSN programs for 12-state Midwest region of AACN (N = 63)
- 12 programs eliminated
- From 51 remaining, 25 programs were randomly selected
- All nursing faculty, academic staff, & administrators (N = 986) were individually e-mailed cover letter & active link to the "Accelerated Second Baccalaureate Degree BSN Faculty Experiences Survey" (AFES)
- 138 individuals who self-identified as having "substantial" ASBSN teaching experience completed the survey
- Eliminated 9 who were clearly not second baccalaureate degree



"Accelerated Second Baccalaureate Degree BSN Faculty Experiences Survey" (AFES)

- Online survey using Qualtrics
- 15 demographic items and 13 qualitative items in 4 domains
  - Experience of teaching
  - Teaching approach
  - Facilitating students' development
  - Facilitating ASBSN faculty development

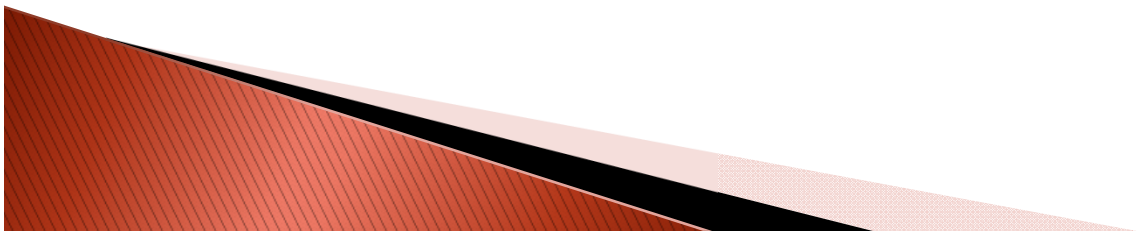


Domain One – Experience of Teaching

- Describe 2 to 3 of the most rewarding experiences you have had teaching ASBSN students. Provide specific examples to illustrate your description.

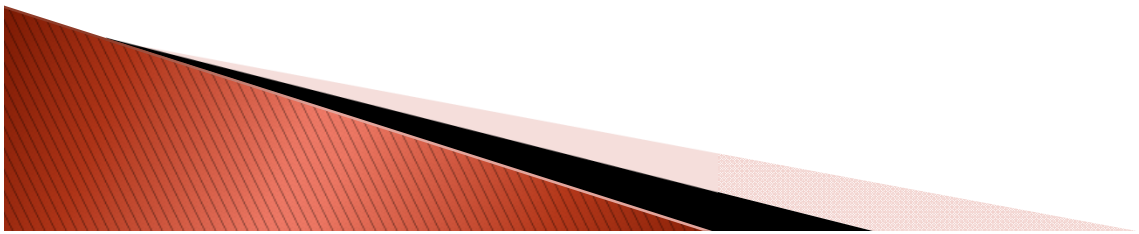
- Describe 2 to 3 of the most challenging or distressing experiences you have had teaching ASBSN students. Provide specific examples to illustrate your description.

- Describe powerful and/or significant emotions you have experienced, whether once or repeatedly, while teaching ASBSN students. Please describe situations that have contributed to these emotions.



Qualitative Data Analysis

- Data exported from Qualtrics to NVivo9
- Data cleaned and analyzed (queried, coded) using NVivo9 features
- Response coding rules established
  - "Number of comments per single item response per single respondent"
  - "Number of comments required to constitute a theme"
- Responses/codes analyzed for themes
- Themes validated and refined by three researchers



Findings

Respondents' Characteristics

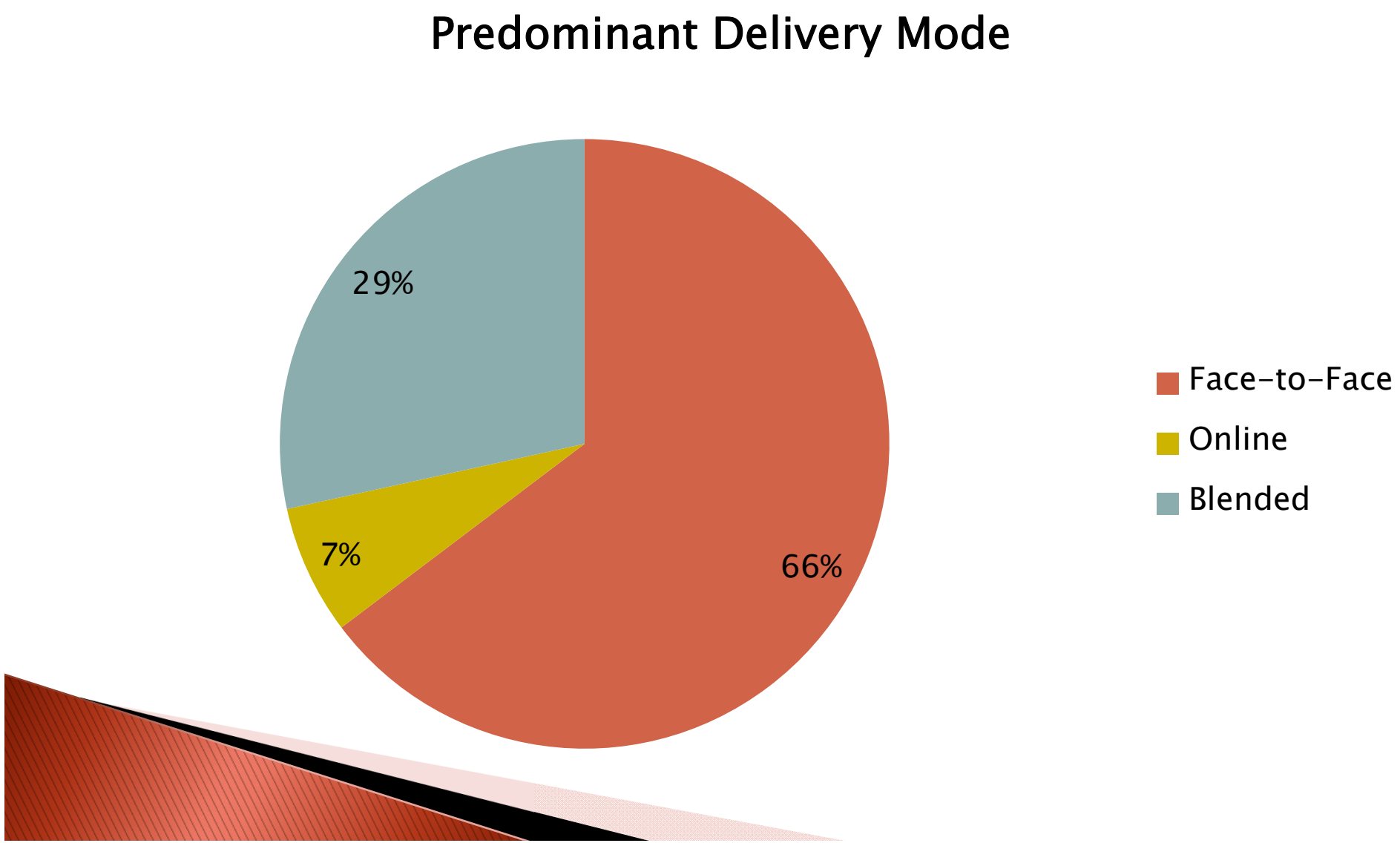
Aged 51-59 (49%)

Female (98%) and Causcasian (98%)

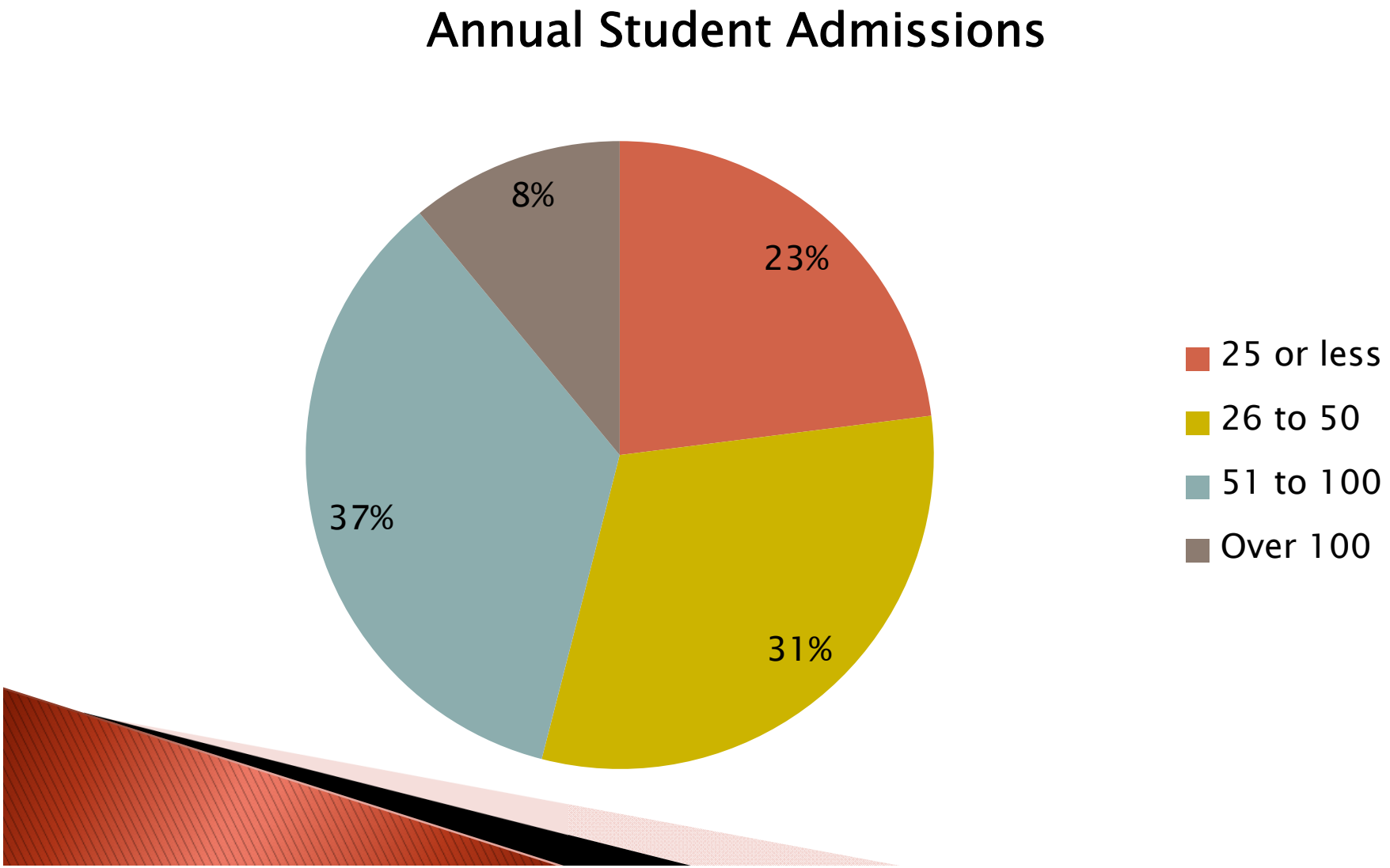
Master's degree (61%) and Doctorate (38%)

Taught in ASBSN 6 years or less (79%)

Characteristics of Respondents' Programs

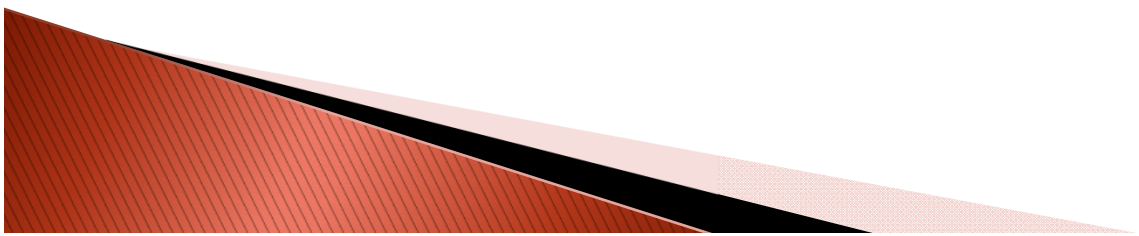


Characteristics of Respondents' Programs



Experience of Teaching Domain

- 3 items
- 96 respondents answered all 3 items
- 97 – 110 respondents to each of the 3 items



Rewarding Experiences (1 Theme)

- Engaging with motivated, mature and diverse students (60 comments)

  The accelerated students provide a very rewarding teaching experience because of the level of involvement they have in each class; they are motivated, interested, and connected to learning.

  The discussions in class are lively and rich, with students bringing various life experiences to the table.

  Their motivation and engagement is contagious.

  Their motivation is inspiring. In my experience, the students arrive early for lab and are many times engaged with the manikins and equipment before I arrive.

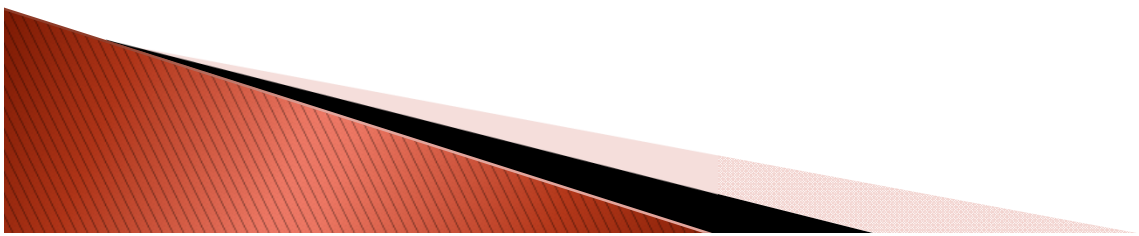
Challenging/Distressing Experiences (5 Themes)

- Arrogant, entitled, and/or disrespectful student behaviors (36 comments)

  They often do not know what they do not know...since they have had another degree, they question why they need to complete some requirements.

  They are generally older students with multiple other responsibilities and expect more freedom in due dates and expectations.

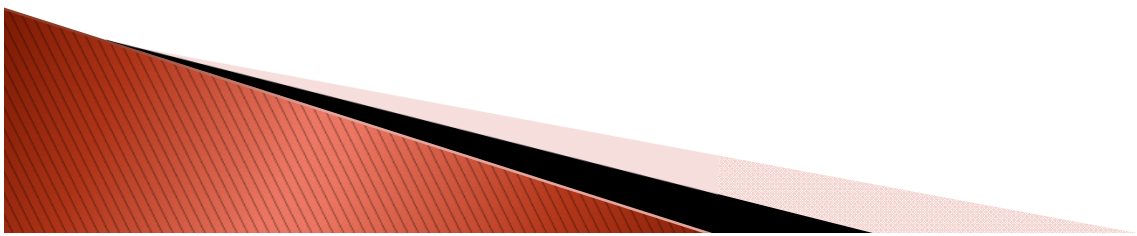
  Students see themselves as peers or experts rather than beginners, lack boundaries of respect for faculty or agency personnel.



- Demanding, challenging student behaviors
  (15 comments)

  Demanding at times, expect to learn everything, always want explanations and rationale (though this is often what makes it the most fun).

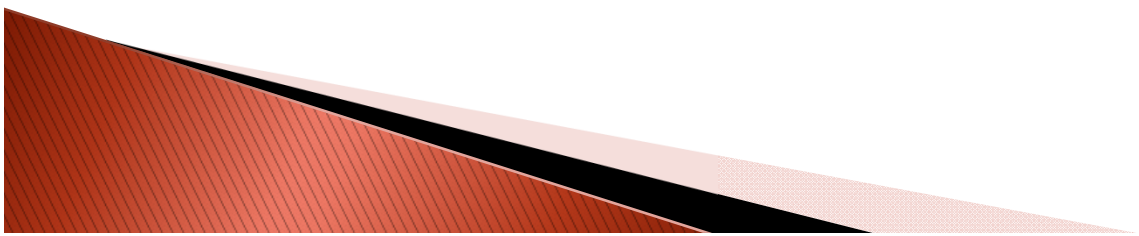
  High maintenance sometimes, need very close and personal attention, private reviews night before exams, argue over exam answers. In general an older group, can be unprofessional and argumentative.



- Stressed, fatigued students (11 comments)

  They may have significant others or children, and it's difficult for them to balance home life and school. They may have financial constraints -- may not qualify for scholarships or aid. They may not be accustomed to the work ethic of the undergraduate students and that takes some time to adjust to our standards --- they need to work in teams and they may say they don't have the time to participate in planning meetings and group projects because of their outside employment or family life situations.

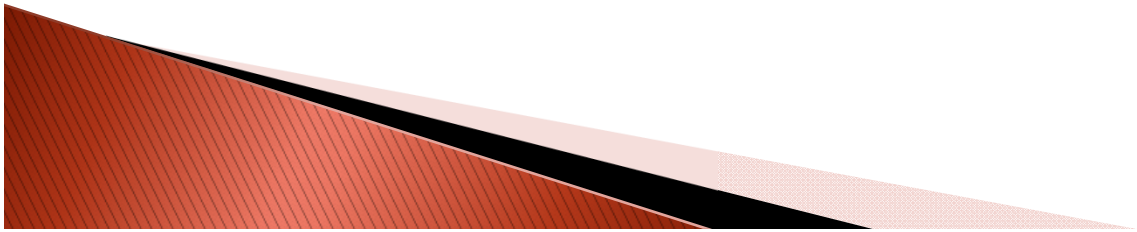
  The heavy academic load-students try to work in spite of recommendations against and end up struggling until they realize that they need to cut down or quit work.



- Students choosing nursing for the “wrong reasons” (22 comments)

  Some students go into nursing because it is a financially sound profession. This is sad. They do not meet the emotional, caring, physical or communication requirements needed to be a nurse. Some even graduate successfully because they pass the NCLEX and are very unhappy because their expectations were unrealistic.

  I had one student who was just going through the motions. Wasn't sure he actually wanted to be a nurse, but didn't like his first career and now that was half done with the accelerated program figured he shouldn't quit (didn't want to fail 2 careers). Provided challenging dynamics with the rest of the group.

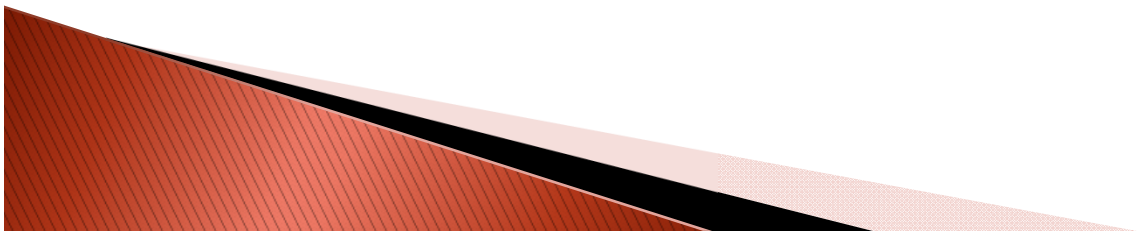


- Too much work, too little time, for students and faculty (17 comments)

  The time crunch is difficult. I think that some concepts need "sink in time."

  The schedule was condensed for the accelerated students which made the students feel they didn't have time to do the work required for the course and also was difficult to get feedback to them in such a short amount of time.

  Stressed! Compact curriculum is stressful. Having to teach a whole semester course in 6 weeks.

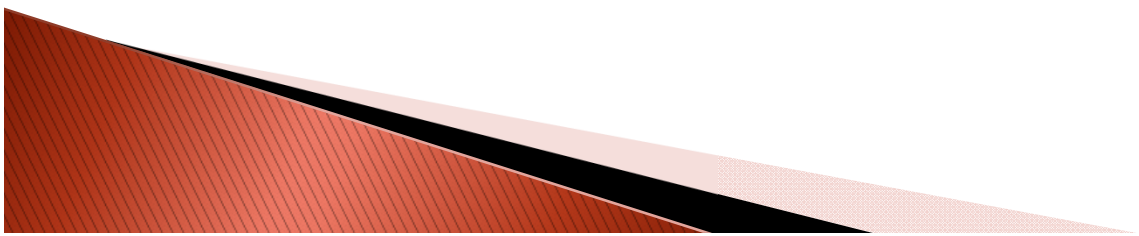


Emotions (4 Themes)

- Amazement (9 comments)

  Often I am amazed as to how accelerated students pull information from their previous careers and work experiences and apply them to nursing. It provides the class with the opportunity to realize they can build on what they've previously learned and use it in their nursing career.

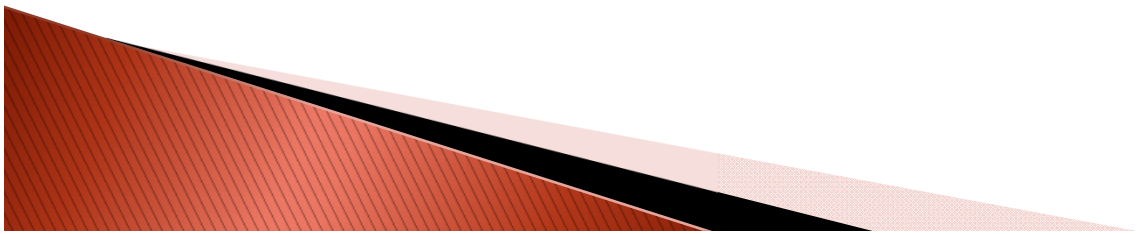
  I am amazed at the astonishing pace at which they learn and how well they apply that to practice.



- Joy & excitement (24 comments)

  I can think of two situations. One when I was working at the nursing home with the ASBSN's and really enjoyed care delivery as the students so quickly anticipated the needs of the patients, considered all care aspects (holism) and really were on top of using their assessment skills (I also teach Adult Health Assessment). I so enjoyed the delivery of the best care possible because these students were "on a different level" due to their lived experiences and maturity.

  Elation – ASBSN students often learn quickly and can really perform at a high level – they challenge the status quo which makes them fun to teach.



- Pride (17 comments)

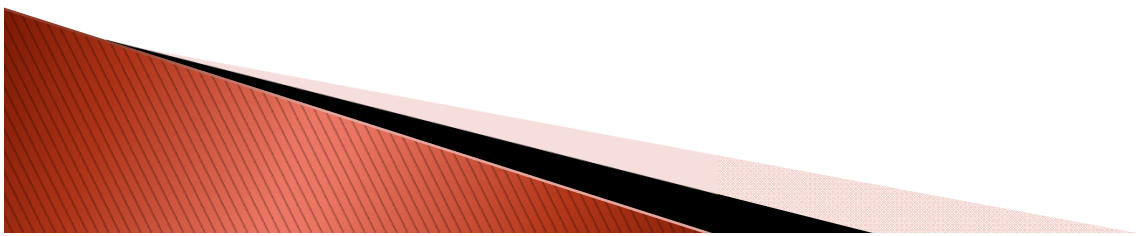
  We constantly receive comments from clinical facilities about the excellent students and now have some who prefer to hire the more mature ASBSN students. I am proud to work with them.

  I think the most powerful emotion I feel is pride in these students. They work hard and really want to succeed. When they do I feel that I have had some input into changing their lives. I have taught in the fundamental, adult health I and adult health II classes at the bedside with these students. They ask great questions, dig right in and care for their assigned patients, and are a more cohesive group than some of my traditional students are. The accelerated groups help not only their fellow classmates but offer more readily to help the staff on the floor.

- Frustration (16 comments)

  At times I felt frustrated because I think my expectations would be too high. I assumed that with their prior experience they would be more professional, more prepared for clinical, have more confidence with patients than my traditional students, where their skills were just as varied and they needed the same guidance. I sort of expected them to be like graduate students, but they weren't.

  Frustration – when they act like they know everything there is to know, or act better than their traditional counterparts, when they complain about how much work they have to do and why they should get preferential treatment because of their workload.



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Discussion

Engaging with Motivated, Mature, and Diverse Students

- Echoes nearly a decade of research

  Cangelosi, 2007
  Hamner & Bentley, 2007
  Hegge & Hallman, 2008
  Rodgers, et al., 2004

- Essence of relationship and connection was striking

UW-Eau Claire ASBSN Students and Faculty

Challenging/Distressing Experiences

- Four of the five themes identified student behaviors or characteristics that are seen as negative

- Relationship with students was not implied in these experiences

- Students choosing nursing for the “wrong reasons”

Gazza, 2009

“Being a gatekeeper to the profession” was important to the participants

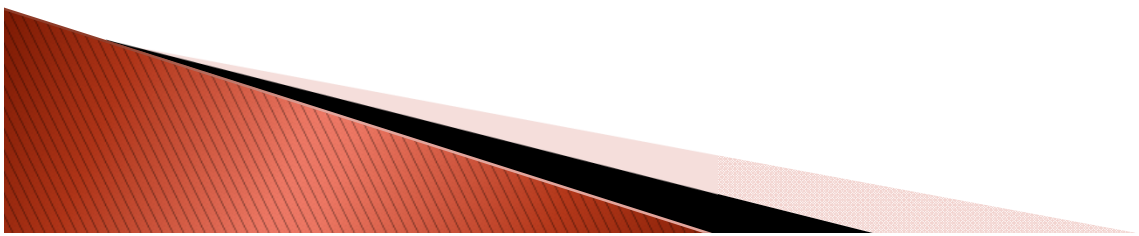
“we are the people who have control over who enters the profession”

Emotions

- Frustration, amazement, and joy and excitement were consistent with earlier literature

  Brandt, et al., 2012; D'Antonio, et al., 2010; Vinal & Whitman, 1994

- Pride was a theme that was not identified by previous authors



Study Limitations

- AFES was researcher-designed
- Inability to calculate survey response rate

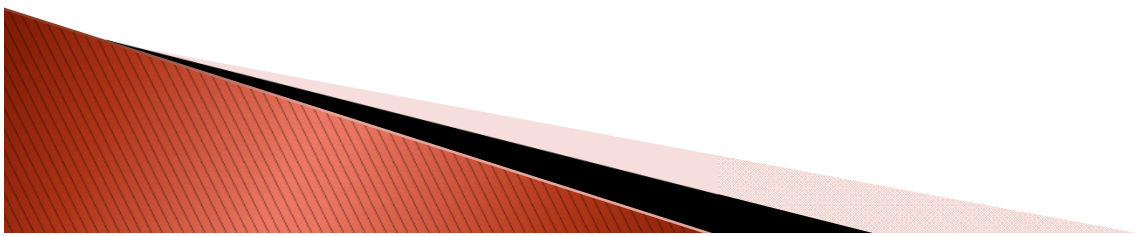
Implications for Education—Faculty and Administrators

- Faculty must be prepared
  - √ type of student
  - √ nature of ASBSN program

- Faculty must be supported
  - √ adequate staffing
  - √ preceptoring & mentoring
  - √ professional development for fast-paced, intense program with stressed students

Implications for Research and Literature Review

- Extend beyond Midwest
- Revise the AFES
- Employ other approaches to recruit a representative sample
- Examine how ASBSN faculty experiences and emotions compare with TBSN faculty



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Questions?

Cheryl L. Brandt, PhD, RN, ACNS-BC

Experiences and Emotions of Faculty Teaching in Accelerated Second-Degree Baccalaureate Degree Nursing Programs

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NCIN Program Liaisons' Insights on Teaching & Learning

2013 NCIN Program Liaisons Summit
American Association of Colleges of Nursing
Washington, DC
October 11, 2013

Catherine M. Millett, Ph.D.

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"Who dares to teach must never cease to learn."

John Cotton Dana

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Four Take-Away Points

1. Faculty who teach in NCIN-grantee accelerated BSN programs value student strengths.
2. Accelerated program faculty are core nursing faculty: seasoned, full-time educators who wear many hats for their students and programs.
3. Professional development activities are prevalent and varied, but rarely differentiated for faculty who teach in the accelerated program.
4. Policies promote participation in professional development, while limited resources constrain opportunities to participate.

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T&L Timeline

Friday, Oct. 12

- Introduced at NCIN Summit, Oct. 2012

Thursday, Oct. 18

- Email sent to current and prior program liaisons to notify them about the upcoming survey.

Tuesday, Oct. 23

- Hurricane Sandy delayed launch.

Tuesday, Nov. 7 – Friday, Dec. 14

- Survey invitation with link emailed to program liaisons.
- Multiple email/phone contacts made.

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T&L Study Methodology

Population:

- Program Liaisons at former as well as current NCIN grantee schools of nursing completed the survey on behalf of their programs and schools.

Delivery Method:

- Email invitation with a link to the survey.

Participation Incentive:

- $50 electronic gift card.

Response Rate:

- 84% (81 of 96) of ABSN programs participated.
- Represent 32% (81 of 255) of ABSN programs nationwide, according to institutions' reports to AACN.

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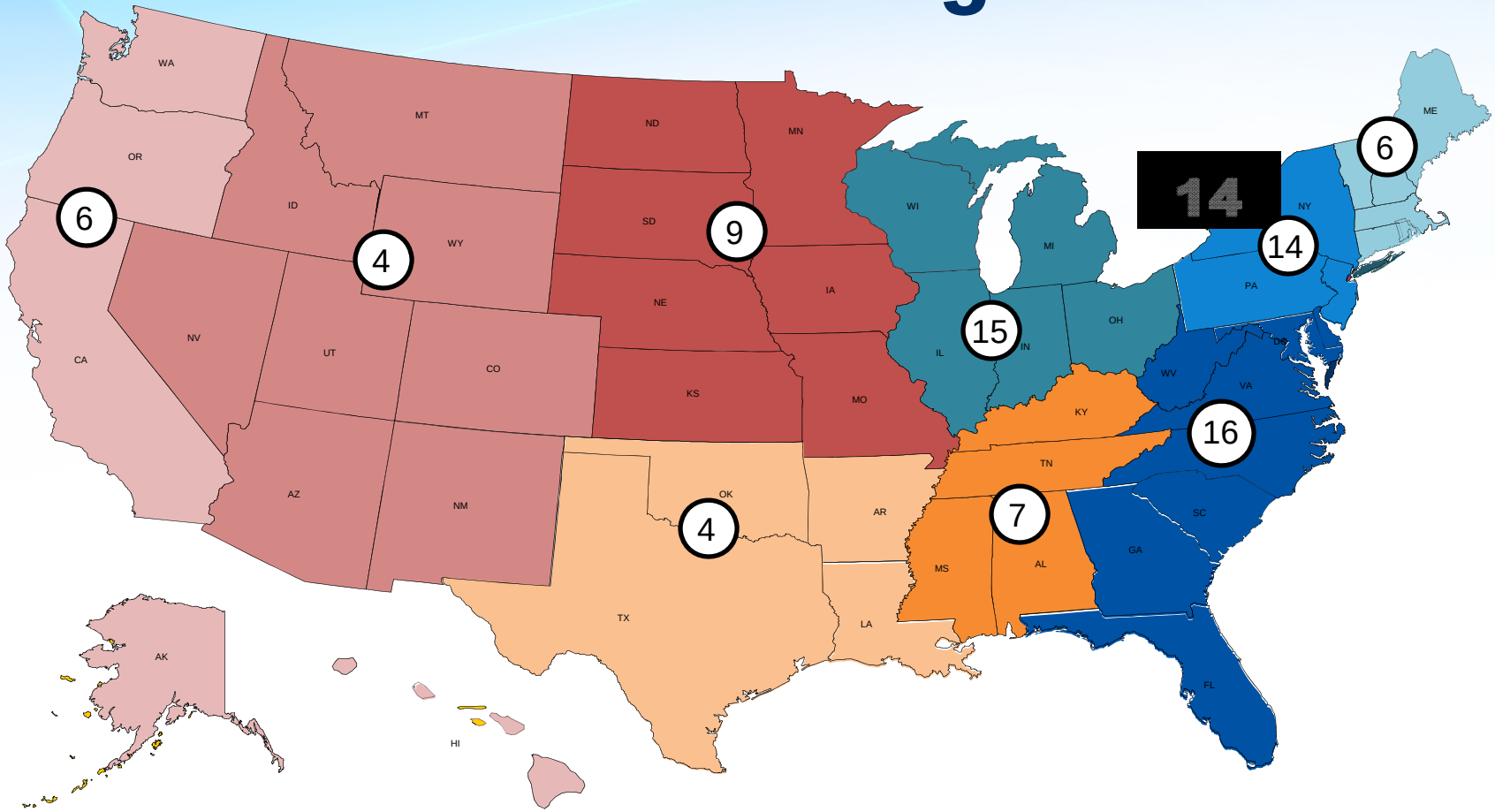
Participating Schools of Nursing with ABSN Programs



Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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School of Nursing Profile

Respondents with ABSN Programs (N= 81)

- 51% are public universities.
- 47% are research universities.
- Located in 37 states & District of Columbia.
  - South (35%)
  - Midwest (28%)
  - Northeast (25%)
  - West (12%)
- 74% are in urban areas.

Source: ETS evaluation; IPEDS Institutional Characteristics (NCES).

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Respondent Liaison Profile

Schools of Nursing with ABSN Programs (N=81)

- 94% are female.
- 86% identify as White or Caucasian.
- 75% are aged 50 years or older.
- 65% have a doctoral degree overall.
- 47% have a doctoral degree in nursing.
- 88% have served as the official NCIN Program Liaison.
- 53% are faculty members.
- 50% have worked at the school of nursing for more than 10 years.
- 85% have worked in nursing education for more than 10 years.

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Profile of NCIN ASBN Students

At Respondent Schools of Nursing (N=1,731)

- 61% are members of racial or ethnic groups that are underrepresented in nursing.
- 40% are male.
- 39% completed their first degree 2 years ago or less.
- 34% of students are 25-29 years old.
- 30% are married.
- 94% plan to pursue graduate studies at entry.
- 63% earned an undergraduate GPA of 3.25 or higher.
- 47% earned their first bachelor's degree at a selective college or university.
- 29% majored in the physical sciences.

Source: NCIN Student Entry Survey, Years 1-5 (2008-2012).

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1 FACULTY IN ACCELERATED BSN PROGRAMS VALUE STUDENT STRENGTHS

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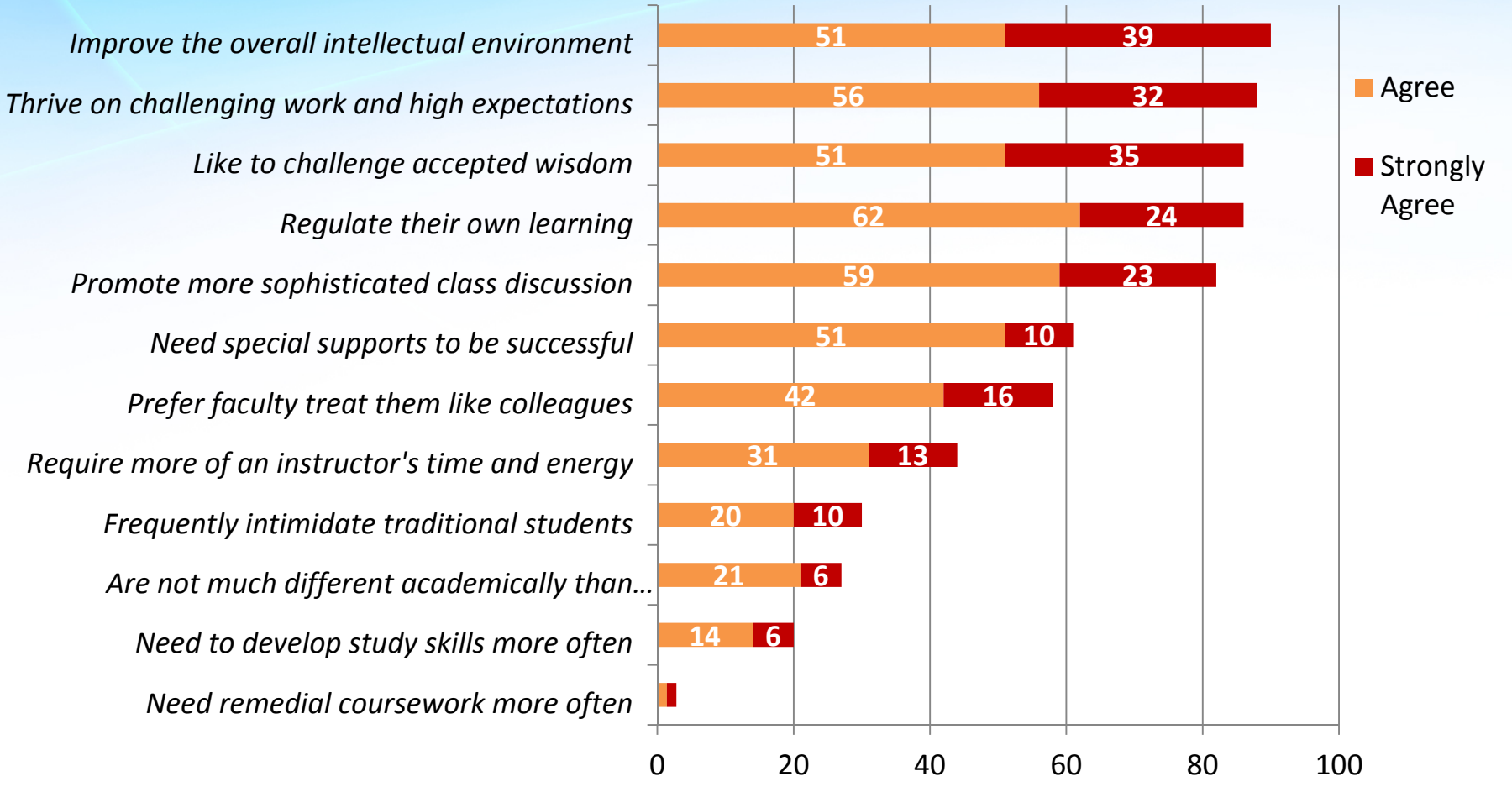
Accelerated Nursing Students...



Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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A Focus on Student Strengths

Among schools of nursing that have participated in NCIN, perceptions of accelerated students are positive:

- **90%** of program liaisons agreed or strongly agreed that accelerated nursing students *improve the overall intellectual environment of the school of nursing*.
- **89%** agreed or strongly agreed that accelerated students *thrive on challenging work and high expectations*.
- **86%** agreed or strongly agreed that accelerated students *regulate their own learning*.

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Little Support for Negative Perceptions of ABSN Students

- Similarly, a majority of respondents disagreed with some common negative perceptions of accelerated students:
  - **90%** of respondents disagreed or strongly disagreed that ABSN students *need remedial coursework more often than traditional nursing students do*.
  - **76%** of liaisons disagreed or strongly disagreed that accelerated students *need to develop study skills*.
  - **59%** disagreed or strongly disagreed that accelerated students *frequently intimidate traditional students*.

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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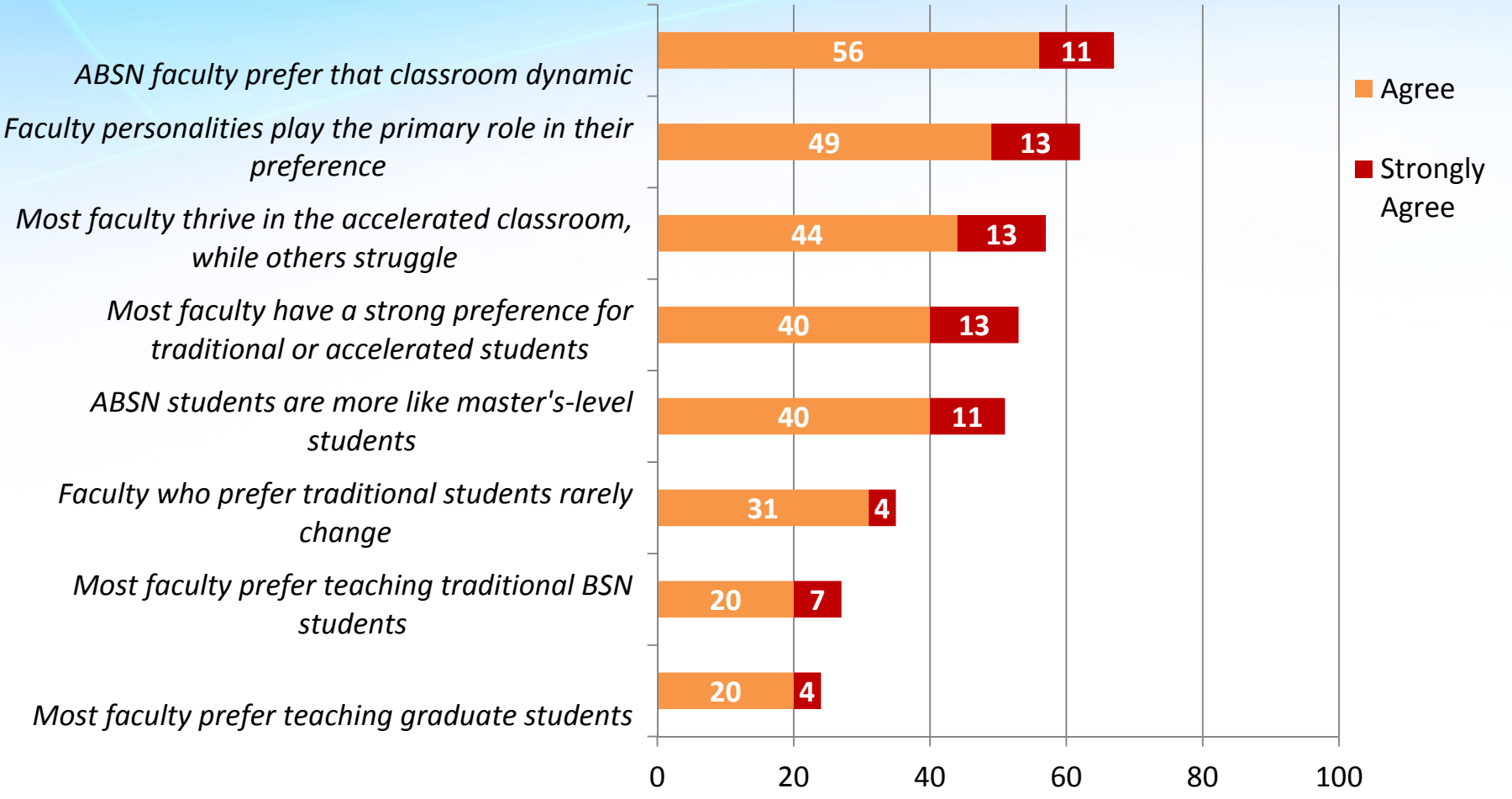
Faculty Preferences for Teaching



Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Slight Preference for ABSN Students

- Respondent liaisons also reported that faculty in their programs prefer working with this type of student:
  - **67%** of program liaisons agreed or strongly agreed that *faculty teaching in the ABSN program prefer that classroom dynamic*.
  - **62%** agreed or strongly agreed that *faculty personalities play the primary role in their preferences for teaching students*.
  - **59%** ***disagreed*** or ***strongly disagreed*** that *most faculty prefer teaching traditional BSN students*.

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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2 ACCELERATED PROGRAM FACULTY ARE CORE NURSING FACULTY

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Accelerated Faculty = Core Faculty

- The most common difference between accelerated and traditional faculty in open-ended responses was none at all (61%), perhaps due to prevalent dual appointments:

  "No one exclusively teaches ABSN students in our program. Faculty who teach BSN students teach both traditional and accelerated (often in the same classroom and/or clinical group)."

  "We don't make a distinction. However, faculty who express a dislike for teaching ABSN students are not assigned to teach them whenever possible."

- Those who cited differences for accelerated faculty were most likely to describe them as highly engaged (12%):

  "The primary difference appears to be in the ability of faculty who are solely teaching ABSN students ... to be creative/innovative and to challenge students to achieve well beyond course expectations."

  "Faculty who teach in the ABSN program are energized by the students, willing to share experiences more readily with students, and usually have more clinical practice experience in their background."

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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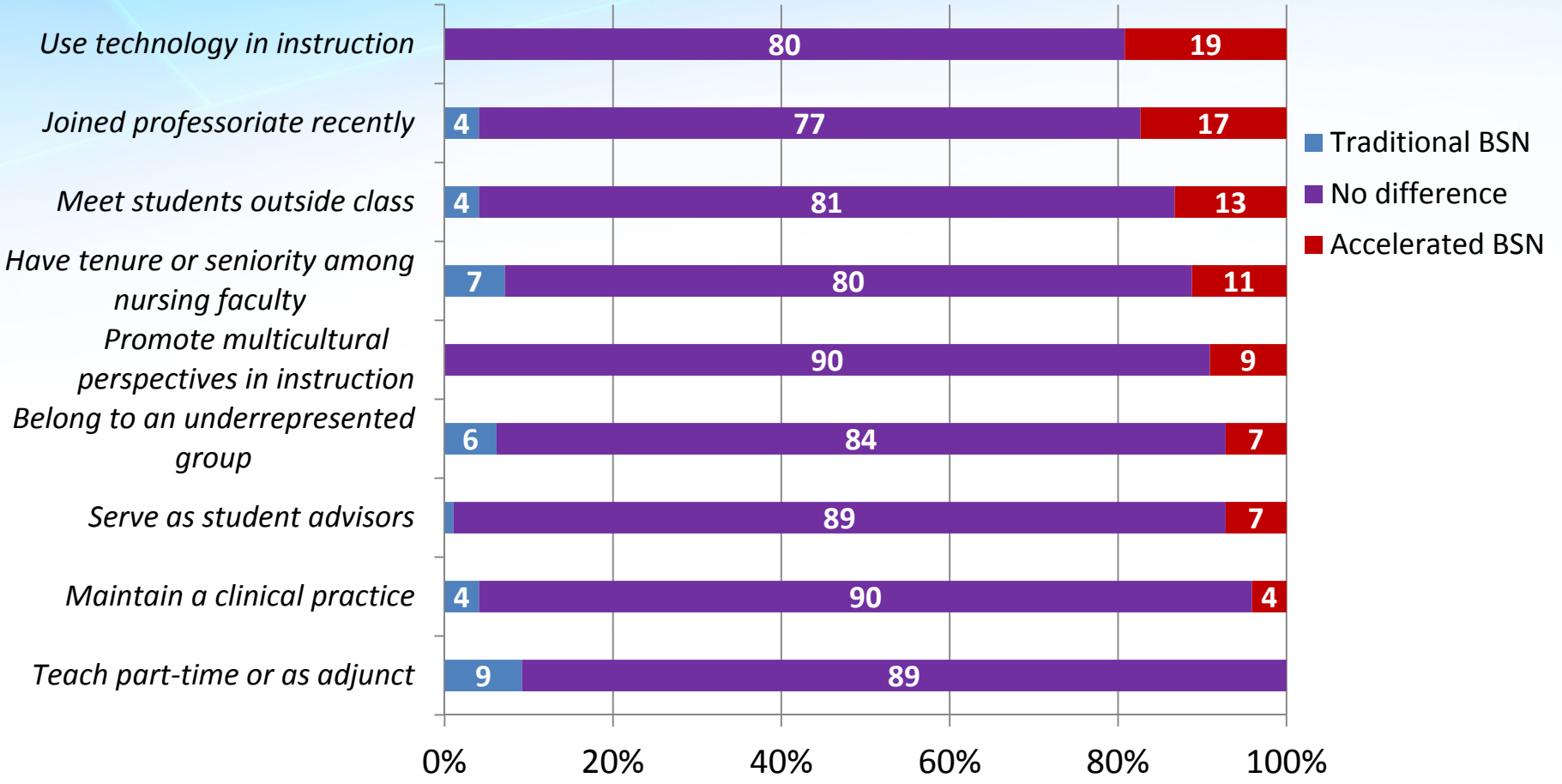
Many Similarities, Yet Some Interesting Differences



Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Accelerated Program Faculty Measure Up Nicely

- Comparing accelerated and traditional program faculty on a variety of characteristics revealed a favorable picture of accelerated faculty:
  - *ABSN program faculty are more likely to be seasoned professors* (Recently joined professoriate: 17% traditional v. 4% accelerated).
  - *ABSN program faculty are more likely to teach full-time* (Teach on part-time or adjunct basis: 9% traditional v. 0% accelerated).
  - *ABSN program faculty are more likely to meet with students outside of class on a regular basis* (13% accelerated v. 4% traditional).
  - *ABSN program faculty are more likely to use technology in their instruction* (19% accelerated v. 0% traditional).
  - *ABSN program faculty are more likely to promote multicultural perspectives in their instruction* (9% accelerated v. 0% traditional).

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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3 PROFESSIONAL DEVELOPMENT IS PREVALENT AND VARIED, BUT RARELY DIFFERENTIATED

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Faculty Orientation Programs are Common, but not Universal

- **63%** of respondents at schools with ABSN programs reported offering orientation for faculty who are new to accelerated programs.
- Among the schools that offer orientation for faculty new to accelerated education (n = 51), the most common activities included:
  - *Peer observations of teaching* (**80%**, n = 41),
  - *Assignment to an experienced mentor* (**71%**, n = 36), and
  - *Consultation with instructional experts* (**65%**, n = 33).
- About half of these schools (**47%**, n = 24),reported offering an orientation specifically focused on teaching in an accelerated format.

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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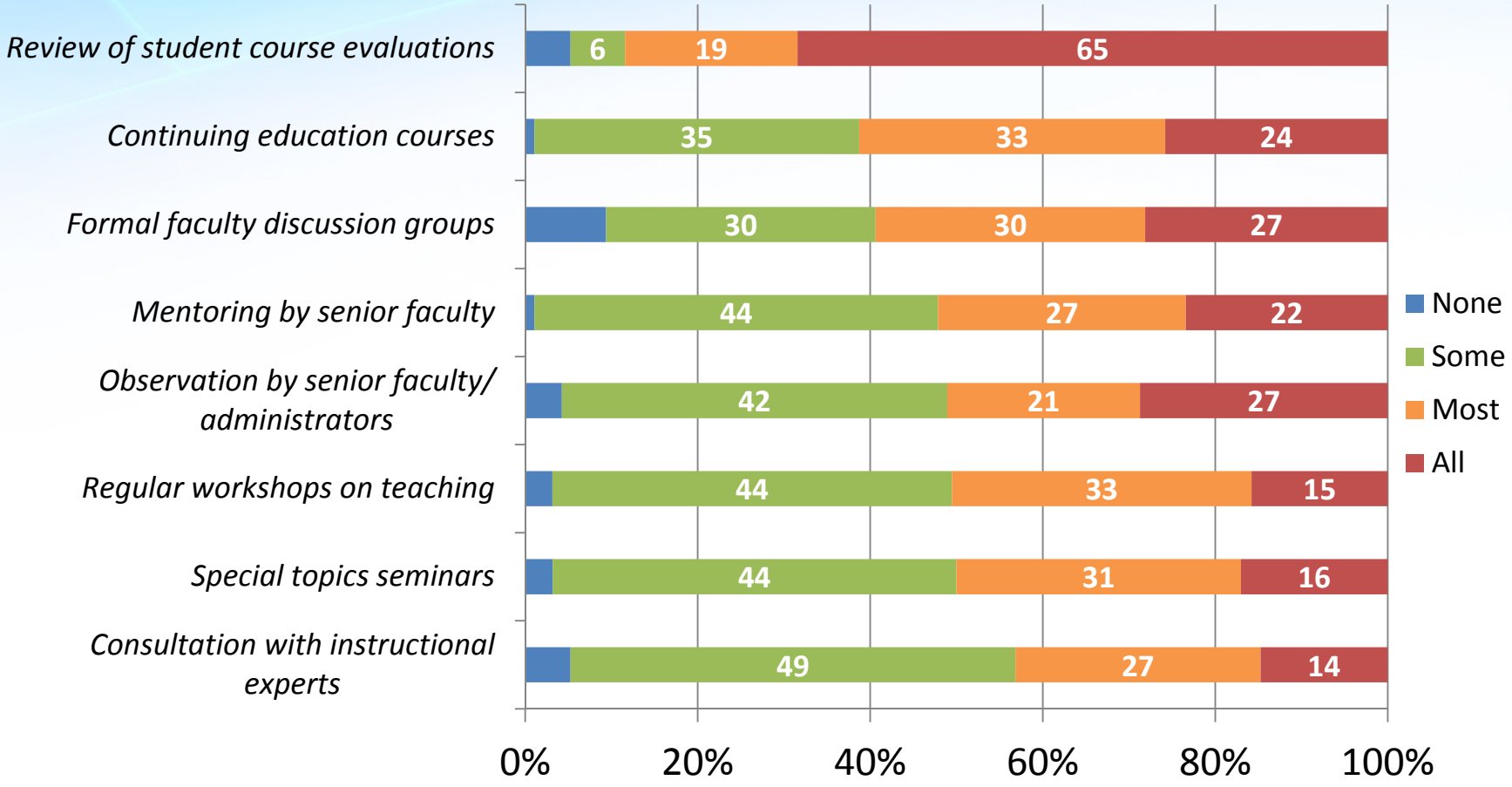
Reviewing Student Evaluations Stands Out Among PD Activities



Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Faculty Participate in Many Forms of Professional Development

- The most common response among various types and topics of professional development in which accelerated BSN program faculty participate was that "some" faculty participate in each, with a few exceptions:
  - *Formal reviews of student course evaluations* (**65%** reported that all faculty participate),
  - *Instructional technologies* (**43%** said "most" faculty participate),
  - *Continuing education courses and formal faculty discussion groups focused on teaching* (about equal proportions reported that some, most, or all faculty participate), and
  - *Evidence-based practice and evaluation of student learning* (similar proportions reported that some, most, or all faculty participate).

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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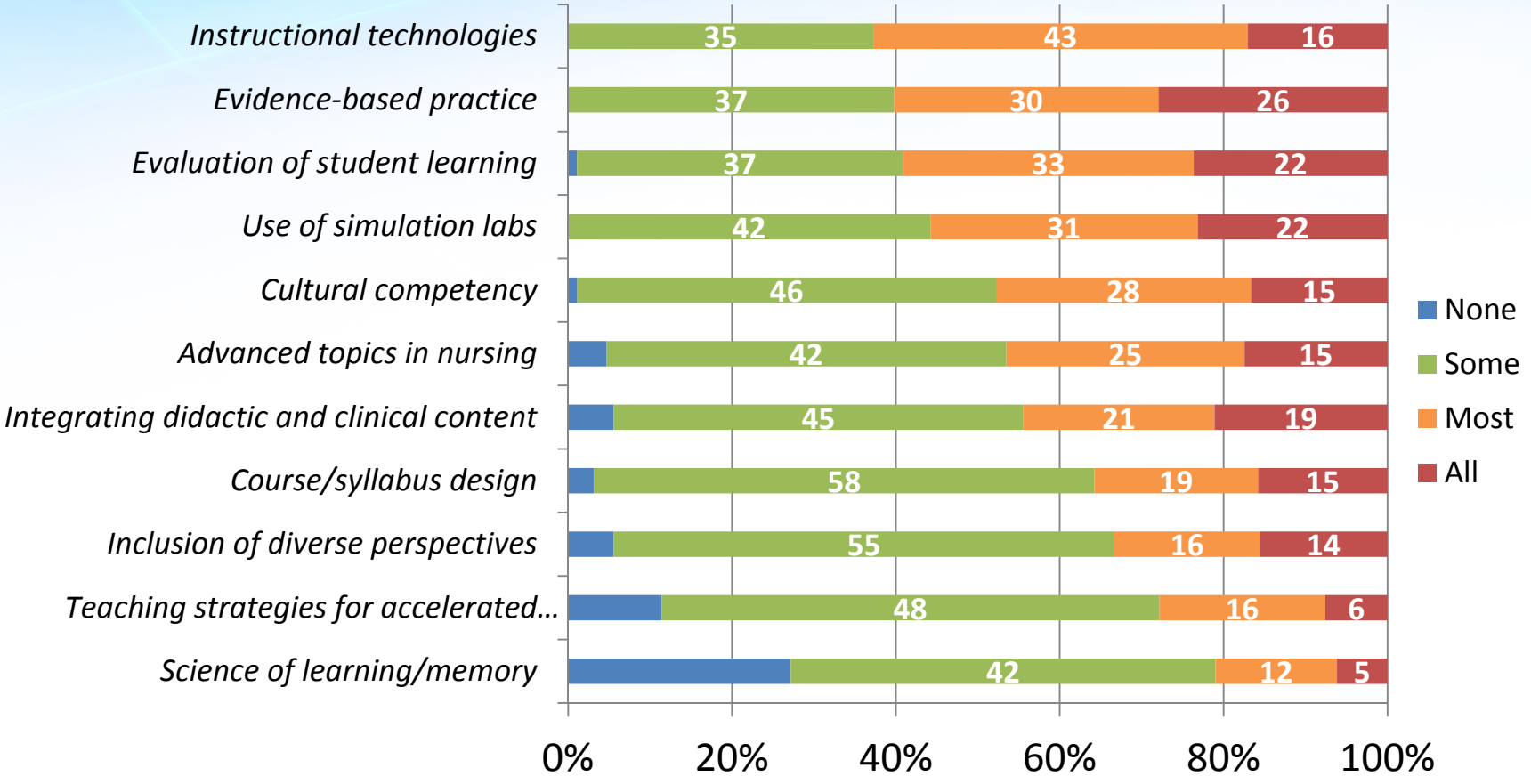
Faculty Participation in Professional Development Topics



Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Professional Development Differs by Interest and Opportunity

- Findings suggests that, overall, faculty select from a variety of professional development offerings according to their interests and needs.
- This interpretation is supported by early findings about instructional strategies for accelerated nursing education (*coming soon!*).
  - Instructional strategies vary by course type, faculty style, and student preferences.
  - Differences in instructional strategies within accelerated courses, faculty, and students appear to be greater than differences between the accelerated and traditional nursing degree programs.
- In **96%** of ABSN programs, professional development is *not* differentiated for accelerated as compared with traditional program faculty.

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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4 POLICIES PROMOTE & RESOURCES CONSTRAIN PROFESSIONAL DEVELOPMENT

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Policies Promote Faculty Participation—Where Available

- The most common theme in responses about policies that promote faculty participation in efforts to improve the accelerated student learning experience was None (**29%**):

  "I don't believe that we have a formal policy, but faculty development is encouraged for many different areas of nursing education."

- Among respondents citing specific policies, Professional development programs (**21%**) and Financial support (17%) were prevalent:

  "We have a very active university-wide faculty development program which works to have faculty share their expertise with each other across disciplines."

  "Around 6 specified development offerings per year are mandatory, plus an additional 15 or so optional ones, not counting attending conferences and professional association meetings."

  "The College of Nursing supports faculty with $1000 per year for faculty development."

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Fostering Faculty Participation

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Resources Limit Participation

- Most ABSN liaisons indicated that no policies inhibit faculty participation in efforts to improve the accelerated student learning experience (**62%**).
- Instead, responses pointed to resource limitations such as little to no financial support (**13%**), constraints on faculty members' time (**13%**), and heavy faculty workloads (**7%**):

> *"The College offers professional development grants that need to be applied for in each case of a faculty member wanting to attend a workshop or conference. Priority is given to faculty who are presenting. This does not encourage learning activities for growth and development."*
>
> *"The lack of funds to support the costs of faculty development. Faculty must pay these costs on their own."*
>
> *"Faculty assigned to the accelerated program also have to teach in other undergraduate programs and advise traditional students, so time is a barrier."*
>
> *"No policies, just time."*

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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Inhibiting Faculty Participation

Source: Survey of Teaching & Learning in Accelerated Nursing Programs.

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In Summary

1. Faculty who teach in NCIN-grantee accelerated BSN programs value student strengths.
2. Accelerated program faculty are core nursing faculty: seasoned, full-time educators who wear many hats for their students and programs.
3. Professional development activities are prevalent and varied, but rarely differentiated for faculty who teach in the accelerated program.
4. Policies promote participation in professional development, while limited resources constrain opportunities to participate.

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