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Welcome Letter

December 3, 2008

Dear Colleague:

It is our pleasure to welcome you to the first *New Careers in Nursing Program Liaisons' Summit.*

This scholarship program aims to ease the nation's nursing shortage by attracting new students into the profession while enhancing efforts to recruit students from groups underrepresented in nursing. Besides scholarship funding, this program also provides valuable support to students as they transition from other fields of study into nursing.

Over the next two years, the Robert Wood Johnson Foundation has committed to awarding at least 1,000 more scholarships of \$10,000 each to eligible students in accelerated programs. This unique partnership with multiple schools of nursing creates exciting opportunities to explore best practices and examine key success factors for these students.

The conference today will feature research findings from accelerated nursing programs and interactive sessions to engage you in an open dialogue about creative approaches to mentoring and leadership development.

We are glad that you are able to attend and hope that the summit will be a valuable opportunity to learn more about how we can support students as they enter our profession.

On behalf of the Robert Wood Johnson Foundation and AACN, welcome!

Sincerely,

Susan B. Hassmiller, PhD, RN, FAAN RWJF Senior Adviser for Nursing

Rosemary Gibson, MSc Senior Program Officer

Geraldine (Polly) Bednash, PhD, RN, FAAN, Chief Executive Officer and Executive Director, AACN

Agenda

Wednesday, December 3, 2008

8:00 – 9:00 a.m. Conference Registration & Breakfast Buffet Salon E

9:00 – 10:30 a.m. Opening/Welcome/Greetings Salon A/B

Moderator:

Carolina Huerta, EdD, MSN, RN, National Advisory

Committee Chair

Speakers:

Polly Bednash, PhD, RN, FAAN, Chief Executive Officer

and Executive Director, AACN

Sue Hassmiller, PhD, RN, FAAN, Senior Program Officer,

RWJF

Program Session

Comparison of 2nd Degree Student and Traditional

Baccalaureate Graduates

Speaker:

Christine Kovner, PhD, RN, FAAN

Question and Answer Session

10:30 – 10:45 a.m. **Break**

10:45 – 12:00 p.m. Panel Discussions Salon A/B

Moderators:

Phyllis W. Sharps, PhD, RN, CNE, FAAN

Diane Tsukamaki, MS

Characteristics of Accelerated BSN Students

Speaker:

Geralyn Meyer, PhD, RN

Perceptions of Satisfaction with and Effectiveness of

Accelerated Second-Degree Programs

Speaker:

Deborah Raines, PhD, RN, ANEF

Question and Answer Session

Agenda

12:15 – 1:00 p.m. **Luncheon Speaker**

Salon E

Salon B

Moderator:

Donna Thompson, MS, RN

Stressors and Supports for Students Completing Accelerated Programs, Implications for Leadership Development

Speaker:

Marilyn L. Weitzel, PhD, RN, CNL

1:00 – 1:15 p.m. **Break**

1:15 – 2:20 p.m. **Roundtable Group Discussions**

Group One:

Transition from Student to Practitioner Conference Room 3

Discussion Leaders: Frank Hicks, PhD, RN

Margaret Griffiths, MSN, RN

NAC Facilitator: Gaurdia Banister, PhD, RN

Group Two:

Recruitment and Retention: What Works Conference Room 4

Discussion Leaders:

Dawn Kozlowski, PhD, RN, CNE

Peggy Wros, PhD, RN

NAC Facilitator:

Carolina Huerta, EdD, MSN, RN

Group Three:

Building Successful Mentoring Programs Salon A

Discussion Leaders:

Patricia Tabloski, PhD, APRN, BC, GNP

Patricia Ryan Lewis, PhD, RN Lori Escallier, PhD, RN, CPNP

NAC Facilitator:

Daisy Cruz-Richman, PhD, RN

Group Four:

Use of Technology in Curriculum Design

Discussion Leaders:

Kathy Rideout, EdD, APRN, BC, PNP

Patrick Tufford, BA

NAC Facilitator:

Carmen Portillo, PhD, RN, FAAN

Agenda

2:30 – 3:45 p.m. Report of Roundtables

Salon A/B

Speakers:

NAC Facilitators

Next Steps

Speaker:

Vernell DeWitty, PhD, RN, Deputy Executive Director,

New Careers in Nursing

Closing Remarks

Speaker:

Polly Bednash, PhD, RN, FAAN, Chief Executive Officer

and Executive Director, AACN

Session One

Comparison of 2nd Degree Student and Traditional Baccalaureate Graduates

Christine Kovner, PhD, RN, FAAN, Professor, College of Nursing, New York University

Christine Kovner is a Professor at the College of Nursing, New York University and Senior Fellow, Hartford Institute for Geriatric Nursing also at NYU. She is a Faculty Partner, New York University Hospitals Center.

Dr. Kovner's research focuses on the cost and use of health personnel. She is currently the principal investigator of two grants from the Robert Wood Johnson Foundation to study newly licensed registered nurses who will be followed over ten years. She has recently completed two Agency for Healthcare Research and Quality funded grants. One was on nurses' decisions to work and the other was on nurses' working conditions.

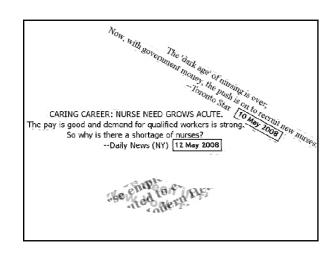
Dr. Kovner is the co-author of the book *Financial Management for Nurse Managers and Executives* now in its 3rd edition. She is a Senior Associate Editor of *Policy, Politics, & Nursing Practice*. Her 2007 published articles include, "Newly licensed RNs' characteristics, work attitudes, and intentions to work" in the *American Journal of Nursing:* "Qualitative analysis of responses of nurses to a survey about job satisfaction and turnover" in *Nurses Forum*; *and* "Work attitudes of older RNs" in *Policy, Politics, & Nursing Practice*.

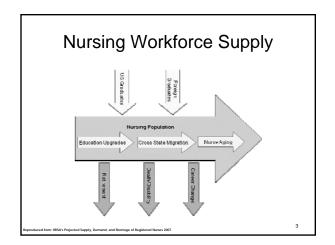
Among Dr. Kovner's many honors is her election to membership in the American Academy of Nursing and her 1999 Best of Image Award in Health Policy for her article "Nurse staffing levels and adverse events following surgery in U. S. hospitals." (*Journal of Nursing Scholarship*)

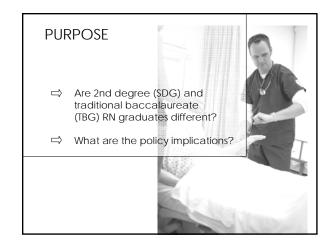
Session Objectives:

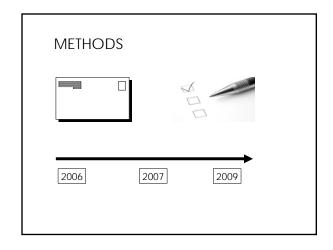
- 1. Describe the similarities and differences between traditional and second degree baccalaureate graduates.
- 2. Analyze the policy implications for similarities and differences between traditional and second degree graduates.

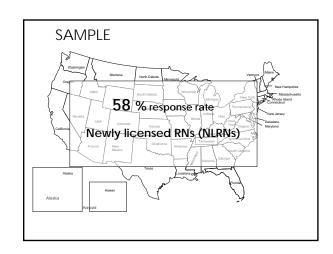












MORE ABOUT SAMPLE



Baccalaureate Graduates

628 traditional graduates (TDG) 94% of entire sample

246 second degree graduates (SDG) 89.7% of entire sample

DIFFERENCES

- □ AGE
- \Rightarrow Percent of Men
- □ CHILDREN LIVING AT HOME

SECOND DEGREE GRADUATES

More likely to be Asian

Less likely to have
English as first language
had an externship
had a job in healthcare

INCOME

SDGs

earned more per year, reported higher spousal income, and considered benefits less important

than TBGs

DIFFERENCES IN WORK ATTITUDES

- 1. Positive affectivity... SDG had a more positive outlook
- 2. Negative affectivity... TDG had a more negative outlook
- 3. Work-group cohesion... TDG had more friends at work
- 4. Family-work conflict... SDG had more conflict

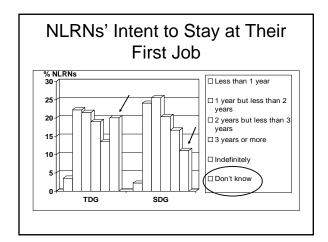
Importance of Variables

Traditional graduates rated the importance of having close **friends** higher





2nd degree graduates rated importance of doing a job well higher



NLRNs' Actual Turnover 2nd graduates 9.6% Traditional graduates 12.4%

Anecdotes versus Research

SDG and TDG are more alike than they are different

...What are the policy implications?

Policy Implications

⇒ SDG may have shorter work lives than TBG

⇒ SDG are less likely to work in hospitals

Policy Implications-Human Capital

 □ SDG' experience and education may contribute to greater work maturity and leadership abilities



Policy Implications



- ightharpoonup SDG are more certain of what their plans are
- ⇔ Hospitals may want to use different strategies to develop and retain the different groups

t1.2 **Table I.** Personal Attitudes of NLRNs (n = 953)

			Possible		S	SDG	F	TBG	t(df) =	
t1.3	Scale	Definition and Example	Range	Ø	n = 309	M (SD)	169 = <i>u</i>	n = 309 M (SD) $n = 691 M (SD)$ value	value	Ь
t1.5	Work–family conflict (Frone, Yardley, &	Degree to which an employee's job interferes with his or her	= never to 5 = five or more	.896 271	271	3.27 (1.27)	829	3.23	t(947) = .64	.64
	Markel, 1997)	family life, e.g., "How often does	days per week							
		your responsibilities at home,								
		such as yard work, cooking, cleaning, repairs, shopping,								
		paying the bills, or child care?"								
9.1.9	t1.6 Family—work conflict	Degree to which an employee's	= never to	.835 271	271	1.63	229	1.51	t(946) = .02	.02
			dans ber mock			(0.5)			7:7	
10		ner Job, e.g., now orten does (did) your homelife interfere	days per week							
		with your responsibilities at								
		work, such as getting to work								
		on time, accomplishing daily								
		tasks, or working overtime?"								
t1.7	Positive affectivity	Degree of the individual's	<pre>l = strongly</pre>	.848 271	271	3.69	629	3.55	t(948) = .01	₽.
	(Watson &	affirmative mood, e.g., "I live	disagree to			(0.64)		(0.70)	2.85	
	Tellegen, 1985)	a very interesting life."	5 = strongly agree							
t1.8	Negative affectivity	Degree of the individual's	<pre>l = strongly</pre>	.850 271	271	2.62	629	2.76	t(948) = .02	9
	(Watson &					(0.88)		(0.86)	-2.25	
	Tellegen, 1985)	irritated at minor annoyances."	5 = strongly agree							
t1.9	Work motivation	Degree to which work is central $I = strongly$	<pre>l = strongly</pre>	.782 269	269	2.01	089	2.10	t(947) = .10	9
	(Gurney, 1990)	to an employee's life, e.g.,				(0.71)		(0.72)	-1.63	
		"The most important things that	5 = strongly agree							
		happen in life involve work."								

 $^{{\}rm t1.10}$ $\,$ * Scale item "Life is worth living only when people get absorbed in work" dropped.

			Possible		SE	G	7	ВС	t(df) =	
t2.3	Scale	Definition and Example	Range	α	n = 309	M (SD)	n = 691	M (SD)	value	P
t2.5	Job satisfaction (adapted from Quinn & Staines, 1979)	Employee's general affective reaction to the job without reference to any specific job facet, e.g., "How satisfied	l = Very dissatisfied	.844	272	4.90 (1.65)	679	5.28 (1.54)	t(949) = -1.62	.11
t2.6	5 questions as listed below	would you say you are with the job you now have?"	7 = Very satisfied							
t2.7	Variety (Gurney, Mueller, & Price, 1997)	Degree to which job performance is repetitive, e.g., "How much variety is there in your job?" *	I = none at all to 5 = a great deal	.672	272	3.42 (0.72)	679	3.412 (0.68)	t(949) = 0.15	.88
t2.8	Autonomy (Gurney et al., 1997)	Degree to which employees	I = none at all to 5 = a great deal	.732	272	3.75 (0.70)	679	3.76 (0.73)	t(949) = -0.18	.86
t2.9	Supervisory support (Gurney et al., 1997)	Degree to which supervisor supports and encourages employee, e.g., "Pays attention to what I am saying"	I = not at all to 5 = to a very great extent	.940	271	3.48 (0.99)	678	3.62 (0.96)	t(947) = -1.01	.31
t2.10	Workgroup cohesion (Gurney et al., 1997)	Degree to which employees have friends in their immediate	I = not at all to 5 = to a very great extent	.882	272	3.96 (0.83)	679	4.17 (0.73)	t(949) = -3.85	.0001
t2.11	Distributive justice (Gurney et al., 1997)	Degree to which the an employee's rewards are related to his or her performance inputs into the organization, e.g., "To what extent are you fairly rewarded considering the responsibilities that you have?"	I = not at all to 5 = to a very great extent	.916	270	2.79 (0.87)	677	2.83 (0.85)	t(945) = -0.57	.57
t2.12	Promotional opportunities (Gurney et al., 1997)	Degree to which career structures within an organization are available to its employees, e.g., "Promotions are regular"	I = strongly disagree to 5 = strongly agree	.791	269	3.30 (0.85)	677	3.38 (0.79)	t(944) = -1.37	.17
t2.13	Procedural justice (Fields, 2002)	Degree to which rights are applied universally to all employees, e.g., "People involved in implementing decisions have a say in making the decisions"	I = strongly disagree to 5 = strongly agree	.806	271	3.26 (0.79)	679	3.29 (0.75)	t(948) = -1.55	.12
t2.14	Organizational commitment (Price, 2001)	Loyalty of employees to their employers, e.g., "I think that my present employer is a great organization to work for"	I = strongly disagree to 5 = strongly agree	.853	271	3.77 (0.80)	680	3.86 (0.75)	t(949) = -1.64	.10
t2.15	Organizational constraints (Spector & Jex, 1998)	Degree to which situations or things interfere employees' job performance, e.g., "How often do you find it difficult or impossible to do your job because of organizational rules and procedures?"	I = never to 6 = 5 or more days per week	.869	269	2.54 (0.89)	680	2.44 (0.86)	t(947) = 1.53	.13
t2.16	Quantitative workload (Spector & Jex, 1998)	Amount of performance required in a job, e.g., "Does your job require you to work very fast?"#	I = never to 6 = 5 or more days per week	.856	271	4.23 (1.10)	680	4.12 (0.97)	t(949) = 1.50	.13

			Possible		SE	SDG	L	TBG	t(df) =	
t2.18	Scale	Definition and Example	Range	α	n = 309	M (SD)	169 = u	$\alpha = 309 \text{ M (SD)} = 691 \text{ M (SD)}$	value	Ь
t2.20	Mentor support	Degree of adequacy of access	= never to	.864 271	271	3.03	629	3.14	t(948) = .08	80.
	(Gurney et al.,	(Gurney et al., to an appropriate experienced $5 = very often$	5 = very often			(0.84)		(0.81)	-1.75	
	(2661	professional to sponsorship,								
		protectorship, and								
		professional benefactorship,								
		e.g., "How often does								
		someone at your workplace								
		show you how to work								
12		successfully within the								
		organization?" **								
t2.21	t2.21 Collegial R	Relationship between nurses	I = strongly	888	888 270	2.87	229	2.86	t(945) = .67	.67
	RN-MD	and physicians, e.g., "Physicians disagree to	disagree to			(0.63)		(0.62)	0.42	
	relations	and nurses have good working $4 = strongly$	4 = strongly							
	(Lake, 2002)	relationships"	agree							

^{*} Scale item "How similar are the tasks you perform in a typical working day?" dropped. † Scale item "How much are you left on your own to do your work" dropped. ‡ Scale item "Easy to approach" dropped. § Scale item "Do you trust individuals in your workgroup?" dropped. || Scale item "There is an opportunity for advancement" dropped.

Scale items "poor equipment or supplies," "other employees," and "inadequate training" dropped. Response item edited for logical consistency.

[#]Scale item "How often is there a great deal to be done?" dropped. Response item edited for logical consistency. ** Scale item "Listens to your ideas" dropped. t2.27 t2.28 t2.29

Table 3. Work Plans of Working NLRNs (n = 953)t3.2

			Possible		1S	SDG	1	TBG	#(df) =	
t3.3	Scale	Definition and Example	Range	σ	n = 309	n = 309 M (SD)	169 = <i>u</i>	M (SD)	value	Ь
t3.5	Intent to stay (Price, 2001)	Degree of positive affect that an individual has toward the idea of voluntarily leaving the employ of an organization, e.g., "I would like	l = strongly disagree to 5 = strongly agree	.887	270	3.24 (1.01)	629	3.31 (0.97)	t(947) = -0.94	.35
9. £3.0	Local job opportunity (Price, 2001)	Likelihood of obtaining jobs in local area as good, worse, or better than current job, * e.g., "How easy or difficult would it be for you to find a job with another employer in the local job market in which you work on live that is as good as	l = very difficult to 6 = very easy	.923	268	3.28 (1.23)	779	3.30 (1.23)	t(943) = -0.26	8.
t3.7	Nonlocal job opportunity (Price, 2001)	the one you have now?" Likelihood of obtaining jobs in nonlocal area as good, worse, or better than current job, * e.g., "How easy or difficult would it be for you to find a job with another employer outside the local job market in which you work on live that is as good as the one you	। = very difficult to 6 = very easy	.950	564	3.61	529	3.58 (1.32)	t(937) = 0.36	27.
t3.8	Search behavior (Price, 2001)	Degree to which employees are looking for other jobs	= strongly disagree to 5 = strongly agree	.773 269	269	2.83 (0.41)	629	2.84 (0.43)	t(946) = -0.36	.72
t3.9		* Altered response scale from "not easy at all" to "very difficult," "not very easy" to "quite difficult," and added "somewhat difficult."	ry difficult," "no	t very	easy" to "	quite diffic	ult," and ad	ded "some	what	diffic

^{&#}x27; Altered response scale from "not easy at all" to "very difficult," "not very easy" to "quite difficult," and added "somewhat difficult."

Table 4. Demographic Characteristics of NLRNs (n = 953); Categorical Variables

t4.3	Variable	Response Options	SDG (n = 309)	TBG (n = 691)	Chi-square (df, t ratio) = P
t4.4	Sex	Male	12.13	4.85	(1, 16.01) < .0001
t4.5		Female	87.87	95.15	,
t4.6	Ethnic background	White non-Hispanic	77.99	83.46	(4, 9.91) = .04
t4.7	-	White Hispanic	1.87	1. 4 8	, ,
t4.8		Black non-Hispanic	0	0	
t4.9		Black Hispanic	5.97	5.91	
t4.10		Asian	9.70	4.43	
t4.11		Other	4.48	4.73	
t4.12	English first language	No	13.24	7.81	(1, 6.75) = .01
t4.13		Yes	86.76	92.19	, ,
t4.14	Current marital status	Married	55.15	35.94	(2, 56.08) < .0001
t4.15		Widowed, divorced, separated	7.72	2.06	,
t4.16		Never married	37.13	62.00	
t4.17	Children living at home	No children/none living at home	68.52	83.51	(3, 28.32) < .0001
t4.18	Ğ	All less than 6 years old	12.22	7.66	,
t4.19		All 6 years or older	15.19	6.48	
t4.20		Some less than and some 6 or older	4.07	2.36	
t4.21	Health status	Poor	0.00	0.29	(4, 1.79) = .78
t4.22		Fair	3.69	4.55	,
t4.23		Good	25.09	24.96	
t4.24		Very good	42.07	43.76	
t4.25		Excellent	29.15	26.43	
t4.26	Nonnursing degrees	None	0.00	100.00	(2, 697.00) < .0001
t4.27	0 0	Baccalaureate	88.24	0.00	(, , ,
t4.28		Masters or doctoral	11.76	0.00	
	Previous work experience:	No	65.44	41.85	(1, 43.30) < .0001
t4.30	summer, occasional part time	Yes	34.56	58.15	, ,
t4.31	Previous work experience	No	46.32	81.79	(1, 120.42) < .0001
t4.32	(job not in health care)	Yes	53.68	18.21	, ,
	Previous work experience	No	44.12	29.66	(1, 18.15) < .0001
t4.34	(job in health care)	Yes	55.88	70.34	,
t4.35	Extern	No	74.26	54.63	(1, 31.30) < .0001
t4.36		Yes	25.74	45.37	(, , ,
	Length of time planning to	Less than I year	2.22	3.54	(5, 13.00) = .02
t4.38	stay in first job	I year but less than 2 years	24.07	22.27	, ,
t4.39	•	2 years but less than 3 years	25.56	21.53	
t4.40		3 years or more	20.37	19.03	
t4.41		Indefinitely	16.67	13.57	
t4.42		Do not know	11.11	20.06	

Table 5. Demographic and Work-Related Characteristics of NLRNs (n = 953); Continuous Variables t5.2

			SDG*		TBG†		
t5.3	Variable	n = 609	M (SD)	n = 309	M (SD)	t(df) = value	P
t5.5	Demographic						
t5.6	Age	267	33.31 (7.75)	672	25.71 (4.34)	t(937) = 19.02	<.0001
t5.7	Yearly income	268	\$48,439 (\$11,638)	674	\$46,807 (\$10,769)	t(940) = 2.05	.04
t5.8	Work related						
t5.9	Spousal income	157	\$55,690 (\$43,264)	289	\$37,185 (\$22,071)	t(444) = 5.98	<.0001
t5.10	Income from other sources	224	\$1,475 (\$8,472)	591	\$710 (\$5203)	t(813) = 1.55	.12
t5.11	Months worked since passing NCLEX	272	10.64 (4.57)	680	9.50 (4.40)	t(950) = 1.88	.06
t5.12	Number of RN jobs since graduating	260	1.177 (0.43)	658	1.14 (0.40)	t(916) = 1.34	.18
t5.13	Hours actually worked	272	38.38 (6.60)	681	39.63 (6.94)	t(951) = -2.55	.01
t5.14	Hours of mandatory overtime worked	272	0.65 (2.63)	676	0.68 (2.63)	t(946) = -0.21	.84
t5.15	Hours of voluntary overtime worked	271	3.32 (4.83)	673	3.53 (4.69)	t(942) = -0.60	.55
t5.16	Patient load	271	5.15 (3.90)	676	4.74 (3.72)	t(945) = 1.51	.13

 $[\]begin{array}{c} t5.17 \\ \hline t5.18 \\ \end{array} \begin{array}{c} \hline \text{* Second-degree baccalaureates.} \\ \end{array}$

Table 6. Work Setting Characteristics of NLRNs (n = 953); Categorical Variables t6.1

(;	•		TBG	ø
t6.3	Variable	Response Options	SDG (n = 309)	(n = 691)	(df, t ratio) = P
t6.4	Type of work setting	Academic or medical center	38.15	32.49	(3, 5.98) = .11
t6.5		Community teaching hospital	38.15	36.51	
t6.6		Nonteaching hospital	19.63	26.83	
t6.7		Other	4.07	4.17	
t6.8	Orientation: supervised with patients	°Z	23.11	15.59	(1, 6.98) = .008
t6.9		Yes	76.89	84.41	
t6.10	Orientation: organizational policies	°Z	19.12	12.44	(1, 6.54) = .01
t6.11	and procedures	Yes	80.88	87.56	
t6.12	Unit spent most of the working time	Intensive care bed unit	22.14	27.29	(10, 8.88) = .54
t6.13		Step-down transitional bed unit	11.07	11.36	
t6.14		General/Special unit	43.17	37.76	
t6.15		Operating room	2.21	87.	
t6.16		Postanesthesia recovery unit	0.37	0.15	
t6.17		Labor/Delivery room	5.17	6.19	
t6.18		Emergency department	6.27	5.75	
t6.19		Physician's office	0.00	0.15	
t6.20		Outpatient department	0.74	0.15	
t6.21		Nonclinical nurse setting	00.00	0.15	
t6.22		Other	8.86	9.88	
£6.23	Job title	Position: manager	1.12	0.44	(2, 10.09) = .007
96.24		Position: direct care	96.28	99.12	
t6.25		Position: other	2.60	0.44	
t6.26	Magnet group	Nonmagnet zip code	85.59	87.28	(1, 0.41) = .52
t6.27		Magnet zip code	14.41	12.72	
t6.28	Belong to a union	Yes	68.15	72.05	(1, 1.42) = .23
t6.29		°Z °	31.85	27.95	
t6.30	Type of shift	8-Hour shifts	11.03	13.97	(4, 3.38) = .50
t6.31		10-Hour shifts	1.84	1.47	
t6.32		12-Hour shifts	78.68	78.53	
t6.33		Flexible schedule	6.62	14.4	
t6.34		Other	1.84	1.62	;
t6.35	Work schedule	Day	31.11	28.30	(3, 3.56) = .31
t6.36		Evening	9.63	×	
t6.37		Night	39.26	45.93	
t6.38		Rotating	20.00	17.63	
t6.39	Importance of benefits	Not important at all	6.99	3.09	(3, 8.07) = .04
t6.40		Not very important	8.82	8.39	
t6.41		Somewhat important	34.19	33.28	
t6.42		Very important	20.00	55.23	
t6.43	RN benefit: paid time off	°Z :	3.31	2.35	(1, 0.69) = .40
t6.44		Yes	69.96	97.65	
t6.45	RN benefit: medical insurance	°Z	 88.	04 	(1, 1.07) = .30
t6.46		Yes	98.12	98.96	

Session Two

Characteristics of Accelerated Students

Geralyn Meyer, PhD, RN, Associate Professor, School of Nursing, St. Louis University

Geralyn Meyer is the Coordinator of the Accelerated Option at Saint Louis University School of Nursing, the oldest Accelerated Option program in the US. She has held that position since 1994. She teaches Fundamentals of Nursing, Nursing Research and Leadership and Management to the Accelerated Option students. She is pleased to be here to discuss one of her favorite topics—the education of second degree nursing students.

Session Objectives

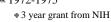
- 1. Describe demographic characteristics of one program's Accelerated BSN graduates (ABSN).
- 2. Explore personal characteristics that seem to be common among ABSN students.
- 3. Describe career plans of recently graduated ABSN nurses.

Characteristics of Accelerated BSN Students

Geralyn A. Meyer, PhD, RN Saint Louis University School of Nursing



** Saint Louis University accepted 10 students into the nation's first Accelerated BSN Program in 1971 ** 1972-1975





That was then...

- ** Requirements of the first ABSN program
 - Baccalaureate or higher degree—most recent within the past 5 years
 - •3.0 GPA unless otherwise recommended by admissions committee
 - Prerequisites completed
 - Chemistry (4 hrs), Anatomy & physiology (4 hrs), Microbiology (3 hrs), Social behavioral science (9 hrs)

That was then. . .

- * 84 students in 1972-1975
 - ♦14 men (17%)
 - Mean age 26
 - Previous degrees
 - 32% Social Science
 - 21% Physical science
 - •25% had previous healthcare experience
 - Described as "highly motivated, close knit and achievement oriented"

This is now. . .

- ≈ 205 Accelerated BSN Programs in 2007
 - *37 in planning stages
 - Growth
 - 1987—10 programs
 - 1990—31 programs
 - 2003—129 programs
- **★** 56 Accelerated Masters Programs in 2007
 - ♦13 in planning stages

This is now. . .

- - ◆7% of all entry level BSN enrollees
- \$5881 ABSN graduates in 2007
 - ♦14% of all entry level BSN graduates
- ★ Accelerated Masters Programs
 - **4**303 enrolled, 1032 graduated in 2007
 - ◆7% of all masters enrollees, graduates

Who are Current ABSN Students?

- ** Describe demographic characteristics of one program's recent ABSN students.
 - Compare & contrast with other programs
- ★ Explore personal characteristics that seem to be common among ABSN students.
- Discuss recent ABSN graduates' plans for a career in nursing.

Sources of Data

- ** AACN Fact Sheets on Accelerated Programs
- ** AACN 2007-2008 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing

Sources of Data

- ** Saint Louis University (SLU) Program Data
 - ◆Evaluation of Accelerated Option Program 2004-2008
 - •"Help Us Get to Know You" sheets, 2006-2008
 - Where do you see yourself in 1 year? 5 years?
 - Who are the most important people in your life?
 - What 3 words best describe you?
 - Thoughts after 18 years of teaching ABSN students

ABSN Program at SLU

- 12 month (May to May program)
- Primarily designed for college graduates
 - Started admitting a limited number of nondegree students beginning in May 1999.
- ★ ~300 applicants a year
- * Last year 147 admitted; 69 enrolled in 5/08

Sources of Data

- **** CINAHL** literature search
 - *Terms used
 - Accelerated students, accelerated programs, accelerated BSN, second degree programs, second degree students, accelerated baccalaureate students, accelerated baccalaureate programs
 - *Limited to research, nursing journals, years 2000 >, programs in USA

Sources of Data

- ***** Cangelosi 2007
 - •George Mason University, Leesburg, VA
- * Hamner & Bentley, 2007
 - Auburn University, Auburn, AL
- * Heege & Larson, 2008
 - South Dakota State University, Aberdeen, SD
- **™** Mullen, 2007
 - •Regis University, Denver, CO

Sources of Data

- **≭** Raines, 2007
 - · Florida Atlantic University, Boca Raton, FL
- Seldomridge & DiBartolo, 2005, 2007Salisbury University, Salisbury, MD
- * Suplee & Glasgow, 2008
 - Drexel University, Philadelphia, PA
- ₩ Utley-Smith, Phillips & Turner
 - Duke University, Durham, NC
- ★ Walker, Martin et al., 2007
 - University of Mississippi, Jackson, MS

Who Are ABSN Students in the 21st Century?

★ Age

SLU Current Class

- Mean 27.34 (SD 7.72)
- Age range of second degree students = 21-62

•SLU Class entering in 2003

- Mean 28 (SD 7.45)
- Age range of second degree students = 22-51

Consistent with literature

 Mean age 30.6 at Salisbury, MD in classes entering 2003-2006

Who Are ABSN Students in the 21st Century?

****** Gender

- *SLU
 - Current class 9% male (n=6)
 - 2003-2007 entering classes average 16% male
- *AACN—all BSN programs 10.5% male
- •In the Literature
 - Auburn 33% male from 1994-2005
 - Others 16-22% male

Who Are ABSN Students in the 21st Century?

※ Ethnicity

- **SLU** 2008-2009 class
 - 84% White, non-Hispanic
 - 13% African American
 - 6 born and raised outside of USA
 - Korea. Peru, Hungary, Nigeria, Jamaica, Haiti
- **SLU** 2003-2004 class
 - 4% African American

Who Are ABSN Students in the 21st Century?

***** Ethnicity

- *AACN data
- 74% White, 12% African American, 6% Latino
- Other reports in literature
 - Auburn U-92% White
 - Florida Atlantic U-36% non-Caucasian
 - Salisbury—80% White, rise in International students
 - Drexel-66% white, 11% African American

Who Are ABSN Students in the 21st Century?

** Previous Academic Degrees

- **SLU** 2008-2009 class—63 students
 - 23 physical sciences (36.5%)
 - 10 social sciences (15.9%)
 - 8 health related fields (12.7%)
 - 5 have graduate degrees

•SLU 2003-2004 class

- Physical Sciences 30.2%
- Social Sciences 22.6%

Who Are ABSN Students in the 21st Century?

- ** Previous Academic Degrees
 - *Auburn
 - Human / social science 24%, Science 16%
 - Salisbury
 - Science 47%, liberal arts 33%
 - Drexel
 - Biology 16%, psychology 15%, business 10%

Who Are ABSN Students in the 21st Century?

- ★ Time since first degree
 - **SLU** 2008-2009 class
 - Mean time since graduation 4.43 years
 - 35% 1 year or less prior to enrollment
 - 9 graduated in 2008
 - 19% graduated >5 years ago
 - **\$SLU 200-2004 class**
 - Mean time since graduation (3.7 years)
 - 38% graduated < 1 year prior to enrollment

Who Are ABSN Students in the 21st Century?

- **™** Time since first degree
 - *Florida Atlantic U--7.4 years
 - •Salisbury U—7.5 years
 - 25% returning after more than 10 years
 - •Regis U
 - 30% 1-3 years from 1st degree
 - 50% more than 5 years

ABSN Students Tend To. . .

- ** Have a variety of reasons for choosing nursing as a career
 - Describe themselves as
 - Compassionate
 - Caring
 - Helpful
 - Kind

Reasons	for	Che	ocina	N	urgina	2004
Reasons	IOI	CII	osme	IN	ursing	<i>2</i> 004

	Total N (%)	Second degree N (%)	Non- Degree N (%)
Opportunities/ Flexibility in nursing	18(30.5)	17(37.8)	1(7.1)
Rewarding nature of nursing as a career	13(22)	12(26.7)	1(7.1)
Dissatisfaction with previous career field	9(15.3)	9(20)	1(7.1)
Always wanted to be a nurse	8(13.6)	8(17.8)	
Personal experience with health care/nursing	6(10.2)	6(13.3)	
Other	3(5.1)	3(6.7)	

ABSN students tend to. . .

- ****** Be very selective in deciding on a nursing program
 - Consider school's
 - Reputation
 - · NCLEX pass rate
 - Program duration
 - Location
 - Cost

ABSN students tend to. . .

**** Change their mind about attending school**

- ◆ SLU--147 admitted in 2008, ~100 confirmed, 69 enrolled
- Students frequently defer admission
 - · Can't finish prerequisites
 - · Family circumstances
 - · Financial concerns
- Auburn reported 28 student admitted, 19 actually enrolled in 2005

ABSN students tend to. . .

* Have a history of academic success

- Most programs have minimum GPA requirements
 - SLU current class, Mean GPA = 3.38
 - SLU 2003-2004, Mean GPA = 3.28
- Previous degrees may foster "black & white" learners
- •Are often very grade conscious

ABSN students tend to. . .

** Have very definite plans for their future in nursing

- Where do you see yourself in 1 year?
- Only 7 of 69 unsure of area they wanted to work in
- 28 of 69 express interest in ICU/ER
- ◆ 75% take jobs in area they originally planned
- Interested in graduate education
 - 62% of current SLU students plan on graduate school
 - At graduation, 90% interested in graduate school

ABSN students tend to. . .

■ Be highly motivated

- Describe themselves as passionate, focused, determined, dedicated, hardworking
- •Self-directed, needing little external motivation

ABSN students tend to. . .

**** Have high expectations for the program** and the faculty

- *In the classroom
 - Little tolerance for disorganization
 - "Tell me what I need to know"
 - Love stories from faculty about clinical experiences
 - Appreciate faculty who love what they do
 - Make clinical world real
 - Case studies

ABSN students tend to. . .

**** Have high expectations for the program** and the faculty

- •In the clinical area
 - · Demand clinical competence in faculty
 - · Help them connect the dots
 - Individualize learning

ABSN students tend to. . .

***** Have little tolerance for "busy work"

- Time is most precious commodity
- Papers, assignments, projects, clinical that waste time create anger, frustration
 - "There were a lot of unnecessary assignments that just stressed people out and didn't really produce any knowledge."
- · Meaningful clinical time is desired
 - Public health & psychiatric mental health clinicals often unappreciated.

ABSN students tend to. . .

- **★** Desperately seek feelings of confidence and competence in practice of nursing
 - "We all want to learn to be really good nurses in a short period" Cangelosi, 2007
 - Focused on skills and actual practice in clinical area
 - Current SLU students--only 15 of 69 have previous health care experience

ABSN students tend to. . .

₩ Be Stressed!!!!

- Academically
 - Large amount of material to be mastered in short time frame
 - "the insanity of the work—very intense, no relief"
 - · Perceived need to do well to go on to graduate school
 - · Competition among students
 - ESL students often particularly stressed

ABSN students tend to. . .

₩ Be Stressed!!!!

- Financially
 - · Students encouraged not to work
 - Approximately 40% of 2008 SLU grads worked
 - 4 hours per week in spring semester
 - 30-36 hours per week to support self/ family
 - · Loans primary source of funding
 - Tuition support from health care institutions presents opportunities/ challenges

ABSN students tend to. . .

■ Be Stressed!!!!

- Personally
 - Other commitments in their lives
 - SLU 19% have children
 - Regis 21% have children
 - "Did school work seven days a week."; "Not enough time to do things."
 - · Balance is tenuous
 - Some students seem to add stressors to their lives

Conclusion

- * Back to the future
 - Like 1970s classes, current students
 - Described as highly motivated, achievement oriented
 - · Come from physical and social science backgrounds
 - · Typically do not have previous HC backgrounds
 - •Unlike 1970s classes
 - \bullet Trending older, $\ensuremath{\Uparrow}$ time since last degree
 - · Personal, financial stress increasing
 - 1972 tuition \$2890/ year

Conclusion

- * ABSN students need balance of
 - Intellectual ability
 - Time management and organizational skills
 - · Personal support
 - Emotional fortitude

Conclusion

- *ABSN faculty need to be
 - •Able to differentiate need to know from nice to know.
 - Willing to kill sacred cows when necessary
 - Keeping in mind that students don't always know what they need to learn to become nurses

Conclusion

- ** ABSN programs are not for every student (or for every faculty member) but they serve a real need for some.
- *As one 2008 SLU graduate stated,
 - •"I had a great experience. Met wonderful people. Learned a lot. Got a job. Can't ask for much more."

Session Three

Perceptions of Satisfaction with and Effectiveness of Accelerated Second-Degree Programs

Deborah Raines, PhD, RN, ANEF, Professor, Florida Atlantic University

Deborah Raines is a Professor of Nursing at Florida Atlantic University in Boca Raton Florida. She received a BSN from Syracuse University, a MSN from the University of Pennsylvania and a PhD from The Medical College of Virginia at Virginia Commonwealth University. From 2004-2006 she was Co-Pl and Program Director for an Accelerated Career Entry Second Degree Bachelors of Science in Nursing Program, funded by Tenet Health Care Foundation. She developed a 12-month program of study using an innovative education-practice partnership – The CAN-Care Model.

Dr. Raines has given numerous presentations and interviews on this model of accelerated nursing education. In addition studies of the satisfaction, outcomes and stories of the accelerated students' journey and the role of the nurse expert/nurse learner were approved by the university IRB. The results of these program evaluation studies and evaluation of the Can-Care Model are being published in the nursing literature. In addition to her role in the College of Nursing, Dr. Raines has developed an online community experience for the university's 2,500 incoming freshman students as a strategy to enhance the student's preparation for and transition to life as a member of the Florida Atlantic University Community. The online community experience includes a common freshman reading dialogue and culminates with a University-wide convocation to celebrate the student's arrival and to signify their becoming part of the academic community. She is also a leader of a freshman learning community and has had a proposal accepted to design an a service-learning freshman living learning community for pre-nursing students in 2009. This will be an action-research project in collaboration with a community partner.

Dr. Raines has received a number of awards including the Sigma Theta Tau's Outstanding Dissertation Award (regional), AWHONN's Medallion of Excellence, Sigma Theta Tau International's Innovations in Clinical Research Award, Virginia Commonwealth University: Medical College of Virginia's Outstanding Alumni Award, Excellence in On-Line Teaching Award. at E-College's International Educator Conference, Palm Healthcare Foundation's Community Partner Award, The TIAA-CREF Faculty Service Award, and The Florida Atlantic University Distinguished University Teacher of the Year, among others. In addition, she is a Distinguished Practitioner in the National Academies of Practice and is a Fellow in the Academy of Nursing Education.

Session Objectives:

- 1. Discuss design strategies to enhance program effectiveness and student satisfaction.
- 2. Outline strategies to measure program effectiveness and student satisfaction.
- 3. Examine factors students identify as important to an accelerated program of study.

Perceptions of Satisfaction with and Effectiveness of Accelerated Second-Degree Programs

Deborah Raines, PhD, RN, ANEF Professor Florida Atlantic University ...or have we found...

A diamond in the rough... or just a hunk of glass?







Objectives:

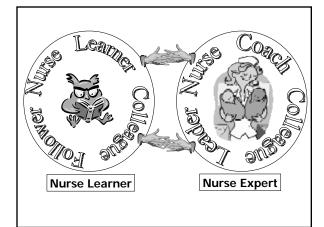
 Discuss design strategies to enhance program effectiveness and student satisfaction.

•Outline strategies to measure program effectiveness and student satisfaction.

•Identify factors students identify as important to an accelerated program of study.

Design Strategies to Enhance Program Effectiveness

- Preparation and Expectations
 - Interview
 - Community
- Academic-Practice collaboration
 - "CAN-Care" model
 - Meaning of being a nurse
 - Immersion learning
 - Nurse expert/nurse learner dyad



Design Strategies to Enhance Program Effectiveness

- Technology
- Curricular themes:
 - Sequential, integrated and continuous
 - Nursing knowledge
 - -Didactic Theory
 - Nursing situations
 - -Practice
 - · Nursing professionalism
 - -Accountability and active contribution

Strategies to Measure Satisfaction and Effectiveness

• Satisfaction - Three components:

- Response: cognitive and emotional

- Focus: expectations of the experience

- Time: point of measurement



Strategies to Measure Satisfaction and Effectiveness

- Effectiveness: the competencies that drive performance in a job, role or function
 - Fundamental knowledge, clinical ability, performance and attitude
 - A dynamic process that grows through experience and the extent of an individual's motivation to learn and adapt.
 - Self reflection is an integral process to recognizing and assuring competency.

Strategies to Measure Satisfaction and Effectiveness

- · Outcome measures:
 - Satisfaction with program of study
 - Satisfaction with preparation for nursing practice
 - Development of Caring abilities
 - Perceived level of nursing practice competency
 - Benefits of an immersion learning experience
 - Experts evaluation of graduates practice competency
 - Description of work activities
 - Traditional measures:
 - End of program testing, Graduation rate, NCLEX pass rate

Factors important to students

"Well today I felt like a NURSE.

I had 6 patients, all of who had problems...I hung IV bags, made a bed, watched an IV insertion and completed a full health assessment.

Lucky for me my patient was understanding and at some points I think he enjoyed his assessment. ...

I felt a little nervous in the morning but in a few hours I was walking the floors like a regular nurse.

That was really neat!

Thanks for this wonderful opportunity"

"I had the pleasure of being guided by a truly EXTRAORDINARY nurse...and now she is my colleague. From the first day she was friendly, but most importantly, knowledgeable and caring -of the patient and me as a nurse learner"

Words of Wisdom From Our Students

- "Organize, organize and organize some more"
 - "Be flexible"
 - "Listen"
 - "Do everything"



Reflection....

"who are you and...
what do you want to become"



Published Papers

Raines, D.A & Sipes, A. (2007). One year later: Reflections and Work Activities of Accelerated Second-Degree BSN Graduates.

Journal of Professional Nursing, 23(6) 329-334.

Raines, D.A. (2007). Caring abilities of students in an accelerated program of study: a program evaluation_study. International Journal for Human Caring, 11 (3): 45-9.

Raines, D. (2007). Accelerated Second-Degree Program Evaluation:
Perception of Satisfaction and Effectiveness of Preparation at
Graduation and One Year Later. Nurse Educator.32(4):183-186.

Raines, D. (2007). Blackboard...more than a course site. The Journal of Nursing Education 46 (5) 243-244.

Raines, D. (2006). An Innovative Model of Practice-Based Learning: CAN-Care Model. International Journal of Nursing Education Scholarship. Vol 3 Article 20.

Papers in press/under review

Raines, D. A. (in press). Nursing Practice Competency of Accelerated BSN Program Students. *Journal of Professional Nursing*. Scheduled for Sept/Oct 2009

Additional Resource

This Time, I Choose Nursing. Available at: <u>http://www.medhunters.com/articles/secondDegreeNurses.html</u>

Parsons, J. (2005). Reflections: A fish out of water. *The Journal of the National Student Nurse's Association*, 52(5), 38-39.



Session Four

Stressors and Supports for Students Completing Accelerated Programs, Implications for Leadership Development

Marilyn L. Weitzel, PhD, RN, CNL, Assistant Professor and Director of Nursing Graduate Program, School of Nursing, Cleveland State University

Dr. Weitzel had maintained an interest in nursing education since the early 1990's. Her master's thesis was titled, "Characteristics of student nurses". Her doctoral dissertation was titled, "Metaphor use by Asian-American nursing students vs. mainstream American nursing students". She believes that nursing faculty can be more effective when they understand the differences in learners. Dr. Weitzel formerly taught at the University of South Alabama College of Nursing where she had her first acquaintance with this unique cohort of accelerated second degree nursing students. She currently teaches at Cleveland State University School of Nursing and continues to explore the uniqueness of this cohort of nursing students.

Session Objectives

- 1. Discuss stressors reported by accelerated second-degree nursing students.
- 2. Describe support resources reported by accelerated second-degree nursing students and implications for instruction.

Evaluating the Second Degree Baccalaureate Nursing Program

Marilyn Weitzel PhD, RN, CNL Assistant Professor

Cheryl P. McCahon PhD, RN Undergraduate Program Director Associate Professor

Overview

- Accelerated Option Programs: Historical Perspective
- Influence of Workforce Shortage
- Cleveland Health Care Mecca
- Impetus for Cleveland State University School of Nursing / Cleveland Clinic Foundation

The Cleveland State University and Cleveland Clinic Foundation Partnership

- Description of Cleveland State University School of Nursing
- Description of Cleveland Clinic Foundation



THE CLEMELAND CLINIC

The Cleveland State University and Cleveland Clinic Foundation Partnership

- Partner Responsibilities
- Partner Contributions
- · Partner Benefits
- Length of Partnership



Program Characteristics

- Description
- Candidates
- Length of study
- Best & brightest



Rationale for Curriculum Plan

- · Size and number of cohorts
- Clinical sites
- Incorporation with basic students
- Practicum



Rationale for Study

- Need for formal evaluation of program: initial cohort graduated - entry of second class
- Anecdotal evaluation re: program and students from faculty perspective
- Student evaluations indicate diverse perceptions of program

Study Development

- · Review of literature
- Quantitative questionnaire with demographics use of Likert Scale
- Development of structured interview for thoughts not addressed in quantitative tool

Quantitative Findings

- Stressors
 - -General
 - -Instructional
 - -Faculty behaviors
- Resources



General Stressors

Pace of program = too fast 69%

Breaks = few to none . . . 59%

Workload = too heavy 88%

Family responsibilities = not a problem . . 74%

Family problems = not too many . . 63%

Stressors: Instructional Strategies

- Classroom
 - Good experience/not so bad . . . 74%
- Cohort
- Online vs. classroom
 - Classroom without online 48%
 - Classroom with enhancement . . 44%

Stressors: Instructional Strategies

- Reading assignments
 - Too much 85%
- · Class discussions
 - Out of control 40%Too much 15%
- · Amount of lecture
 - Too much 44%
 - Just right 44%

Stressors: Instructional Strategies

Effectiveness of lecture ... 89%
Writing requirements

Overwhelming ... 92%

Projects

Overwhelming ... 59%
Just right ... 37%

Group assignments

Not helpful ... 56%

Perception of Clinical Experience

• Too little. 59%



• Just right 30%



Stressors: Faculty Behaviors

Availability
Just rightFairness with studentsJust right or somewhat fair70%
Speaking ability
Just right / professional78%
Personal behavior
Just right/professional74%



Stressors: Faculty Behaviors

Attitude of faculty

· What should faculty attitude be?

Instructional facilitator 41%Colleague/peer 30%Professional educator 26%

RESOURCES



- Just right 67%

RESOURCES



- Are faculty helpful?
 - Just right/ somewhat 70%
- Peer support
 - Just right 70%

Summary - Stressors

- · Program was too fast paced
- Too many assignments
 - Reading, projects, group work, online
- · Heavy workload

Summary - Stressors

- · Discussion classes
- Totally online classes
- · Not enough clinical experience
- Preferred collegial relationship with faculty

Summary - Resources

- Preferred
 - Classes enhanced with online
 - Lectures/presentations
 - More clinical time
- · Felt supported by

 - Individual faculty members . . .



Qualitative Comments

- 1. Overall felt good about the program
- Pleasantly surprised with patient acceptance
- Negatively surprised with amount of work
- 4. Preferred peer relationship with faculty

Qualitative Comments

- Image of nursing changed. More realization of the role of patient advocacy
- 6. All except one (n=19) would come back to this program
- Overwhelmingly wanted less paperwork and more clinical time

The discussion groups are designed to facilitate dialogue among the participants representing program sites. The purpose is to identify and discuss best practices, challenges, issues, and strategies to address four dimensions of the New Careers in Nursing Program. Each group will be assigned discussion leaders and a facilitator.

Discussion leaders will be asked to prepare and present a brief, not more than two (2) minutes, overview of the group charge and direction.

Each participant will self-select the group of choice for participation. At the conclusion of the discussion, each facilitator will present a brief, 5-minute report of the group work. The morning and lunch presentations provided recent research findings and build a common base of information to assist the discussion groups in accomplishing their charge.

Each group will address these three questions in relation to their topic:

- 1. What are the best practices, challenges, and strategies to address this program dimension?
- 2. What issues need to be addressed and what are the gaps?
- 3. What are the strategies to address the gaps?

Roundtable Groups

- I. Transition from student to practitioner
- II. Recruitment and Retention: what works
- III. Building successful mentoring programs
- IV. Use of technology in curriculum design

Roundtable Format

Dialogue and processing will be one of the most important aspects of the conference. It is recommended that the group discussions follow this format:

Introduction

- 1. Introduce the group and overview of the topic areas. Comments should come from the two discussion leaders.
- 2. Allow time for group members to introduce themselves.

Discussion

- 3. Each discussion leader will prepare and present a brief overview of their experiences in the area of interest. (2-3 min)
- 4. Allow each group member to add from their own school/work experience on the same topic

Dialogue

- 5. Engage the group in dialogue regarding:
 - What works well?
 - What was tried but was not successful?
 - What was successful and why?
- 6. Ask the group if they are able to identify best practices
- 7. Ask the group to identify challenges
- 8. Ask the group to describe next steps

Roundtable discussions begin at 1:15 pm in assigned locations.

Group I

Transition from Student to Practitioner

Conference Room 3

Discussion Leaders:

Frank Hicks, PhD, RN, Rush University
Margaret Griffiths, MSN, RN, Assistant Dean, School of Nursing, University
of Pennsylvania

NAC Facilitator:

Gaurdia Banister, PhD, RN, Executive Director, Institute for Patient Care, Massachusetts General Hospital

Description

Discussion of factors that affect the success of accelerated students as they transfer to the work environment. Particular attention will be given to how programs can better prepare students for this transition. To identify and discuss curriculum strategies relevant to the school-to-work transition. What type of collaboration with prospective employers will assist students during this transitional process.

Group II

Recruitment and Retention: What Works Conference Room 4

Discussion Leaders:

Dawn Kozlowski, PhD, RN, CNE, Assistant Dean, School of Nursing, University of Medicine & Dentistry of New Jersey

Peggy Wros, PhD, RN, Associate Dean and Professor, School of Nursing, Linfield College

NAC Facilitator:

Carolina Huerta, EdD, MSN, RN, Professor and Chair, University of Texas Pan American

Description

Discussion of special considerations in recruitment of second-degree students, specifically addressing men and minority students. Includes consideration of program development strategies that make an accelerated curriculum plan appealing to the target population.

Group III

Building Successful Mentoring Programs

Salon A

Discussion Leaders:

Patricia Tabloski, PhD, APRN, BC, GNP, Associate Dean for Graduate Studies, School of Nursing, Boston University

Patricia Ryan Lewis, PhD, RN, Associate Dean for Clinical Nursing Practice Studies, College of Nursing, University of Illinois at Chicago

Lori Escallier, PhD, RN, CPNP, Clinical Associate Professor, School of Nursing, Stony Brook University

NAC Facilitator:

Daisy Cruz-Richman, PhD, RN, Dean and Professor, College of Nursing, State University of New York, Downstate Medical Center

Description

Mentoring is a tool that organizations can use to nurture and grow their people. It can be an informal practice or a formal program. This session will focus on various approaches and opportunities for mentoring accelerated students as they progress through their educational programs. Mentors demonstrate, explain and model. The following assumptions form the foundation for a solid mentoring program.

Successful mentoring means sharing responsibility for learning. Regardless of the facilities, the subject matter, the timing, and all other variables. Successful mentoring begins with setting a contract for learning around which the mentor, the protégé, and their respective line managers are aligned.

Roundtable Discussion Groups

Group IV

Use of Technology in Curriculum Design

Salon B

Discussion Leaders:

Kathy Rideout, EdD, APRN, BC, PNP, Associate Dean for Academic Affairs, School of Nursing, University of Rochester,

Patrick Tufford, BA,Manager School of Nursing Graduate Entry Program, University of Washington

NAC Facilitator:

Carmen Portillo, PhD, RN, FAAN, Professor, School of Nursing, University of California-San Francisco

Description

A white paper released by AACN on technology in education states that "technology affords increased collaboration among nursing faculties in teaching, practice, and research. Careful use of technology in education may well enhance the profession's ability to educate nurses for practice, prepare future nurse educators, and advance nursing science in an era when the number of professional nurses, qualified nurse faculty and nurse researchers is well below national need." This session will address technology-mediated teaching strategies as applied to the accelerated student learning experience. Discussion will focus on how these strategies may change the quality of educational programs and what is required to support student learning

Lori Escallier, PhD, RN, CPNP

Clinical Associate Professor, School of Nursing, Stony Brook University

Dr. Lori Escallier is a Clinical Professor and the Director of Grant Development and Management at Stony Brook University School of Nursing. She received her bachelor's degree from Salve Regina University in Newport, Rhode Island, a master's degree from Stony Brook University, and a doctor of philosophy degree from Adelphi University. She is certified as a Pediatric Nurse Practitioner through the Pediatric Nurse Certification Board. In addition to her administrative responsibilities, Dr. Escallier teaches in the doctor of nursing practice program, maternal child health graduate programs, registered nurse baccalaureate program, and basic baccalaureate program. She is recognized as a leading authority in curriculum development at the undergraduate and graduate levels and serves as a site evaluator for the Commission on Collegiate Nursing Education. Her research interests include infant colic, child abuse and neglect and other clinical issues affecting the health and well being of infants, children and families.

Margaret Griffiths, MSN, RN

Assistant Dean, University of Pennsylvania

Margaret Griffiths is Professor Emeritus at Thomas Jefferson University. Currently she is the Assistant Dean for Curricular Initiatives at the University of Pennsylvania School of Nursing. In this role, she has worked to streamline the admissions process for the accelerated baccalaureate program. In her prior role at Thomas Jefferson University, she was instrumental in the development of the two accelerated baccalaureate options: the two-year program and the expedited one-year program. Along with colleagues at Jefferson, she conducted a research study that examined the accelerated students' perceptions of their transition to independent practice as well as the employers' perceptions of their competence in assuming an independent practice role.

Frank Hicks, PhD. RN.

Program Director, College of Nursing, Rush University,

Dr. Frank Hicks is a member of the faculty of Rush University College of Nursing. He is an Associate Professor in Adult Health Nursing and Director of Generalist Education. In that role, his is responsible for the oversight of the Advanced Generalist Curriculum, which has a pre-licensure and post-licensure track. Dr. Hicks was chosen as a 2008-2009 Fellow in the AACN's Leadership for Academic Nursing Program, and is a CCNE reviewer for Nurse Residency programs. His scholarly and research interests include theory development and utilization, provider and patient decision-making, and the use of simulation to improve educational outcomes and as a measure of clinical judgment and performance.

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Dawn Kozlowski, PhD, RN, CNE

Assistant Dean, University of Medicine and Dentistry

Dr. Dawn Kozlowski is Assistant Dean and Assistant Professor of Prelicensure Programs at the University of Medicine and Dentistry (UMDNJ) School of Nursing in Newark, New Jersey. She is the Program Liaison for the Robert Wood Johnson Foundation and American Association of Colleges of Nursing (AACN) *New Careers in Nursing Scholarship Program*. The purpose of this scholarship grant is to help alleviate the nursing shortage by encouraging underrepresented students to apply for an accelerated nursing program. Dr. Kozlowski received funding from the New Jersey Department of Higher Education (fiscal 2006-2007) for the creation and implementation of a student enrichment program designed to increase student retention and success. She has 18 years of teaching and administrative experience in associate degree, accelerated BSN and RN-BSN programs. Dr. Kozlowski is a Certified Nurse Educator (CNE).

Patricia Ryan Lewis, PhD, RN

Associate Dean, University of Illinois at Chicago

Dr. Lewis is the Associate Dean for Nursing Clinical Practice Programs in the College of Nursing at the University of Illinois at Chicago. She teaches in the area of Public Health Nursing and Nursing Administration. Dr. Lewis' practice work has focused most recently on work with programs in HIV/AIDS prevention. She is also the president of her Local Board of Health.

Recent work with the College of Nursing's programs includes the creation of a Graduate Entry Program at the master's level and the new Doctor of Nursing Practice Program at UIC. Dr. Lewis has also been a co-investigator in training and workforce grants focused on public health nursing workforce and public health nursing education.

Kathy Rideout, EdD, PNP-BC, FNAP

Associate Dean, University of Rochester

Kathy Rideout is the Associate Dean for Academic Affairs at the University of Rochester School of Nursing (URSON). She is also a Senior Pediatric Advanced Practice Nurse at the Golisano Children's Hospital at Strong Memorial Hospital, specializing in pediatric ostomy care. The University of Rochester's Accelerated Program for Non-Nurses (APNN) opened in 2002 after the school's long-standing generic baccalaureate program was closed. Since its inception, applications and enrollment has steadily increased. This past year the program received over 300 applications and accepted only 112 students. The university and the URSON have made a commitment to double this enrollment over the next 5 years, recognizing the need to expand the nursing workforce.

Patrick Tufford, BA

Manager, School of Nursing Graduate Entry Program, University of Washington

Patrick Tufford is the Program Manager for the Graduate Entry Program in Nursing (GEPN) at the University of Washington - Seattle. This Graduate Entry Program is an accelerated entry option for new nurses seeking to eventually earn a Master of Nursing (MN) or Doctor of Nursing Practice (DNP) degree.

Patricia Tabloski, PhD, APRN, BC, GNP

Associate Dean for Graduate Studies, School of Nursing, Boston University

Dr. Tabloski has committed her career to the teaching, practice, administration and research of gerontology since 1978. Dr. Tabloski teaches graduate and undergraduate courses in gerontology, end-of-life care, pharmacology and pathophysiology. She works with undergraduate, master's and doctoral students. Her current clinical skills and over 20 years experience as an advanced practice nurse enrich her teaching expertise. While at the University of Massachusetts, she developed the first multi-disciplinary course on normal aging open to nursing, medical, social work and psychology students from the Worcester area. Students from all disciplines and levels of study have worked with Dr. Tabloski in the classroom, clinic, and nursing home.

Dr. Tabloski was selected to serve as a faculty mentor and scholar at the John A. Hartford Foundation Institute for Geriatric Nursing at New York University in June, 2002. Additionally, she was a Visiting Research Fellow at the University of Leeds, School of Nursing in Manchester, UK. She has lectured on gerontology in Budapest, Hungary and Zhejiang Province, China. She serves on review panels for top-tier nursing journals, is a grant application reviewer, and maintains certification as an advanced practice gerontological nurse through the American Nurses Credentialing Center. She is a member of Sigma Theta Tau, the national honor society of nursing, and the American Geriatrics Society, serving on the Professional Education Committee for three years. She has been a member of the Gerontological Society of America since 1985 and was awarded fellowship status in 2002.

Peggy Wros, PhD, RN

Associate Dean and Professor, Linfield College

Dr. Peggy Wros is associate dean and professor of nursing at the Linfield-Good Samaritan School of Nursing, Linfield College in Portland, Oregon. She is the project director for a Nursing Workforce Diversity Grant from the Human Resources and Services Administration, Bureau of Health Professions, currently in its fifth year, which funds recruitment and retention of students from populations underrepresented in nursing, in particular Hispanics. She is the co-chair of the steering committee for the Oregon and southwest Washington Regional Nursing Workforce Diversity Initiative, and has written successful grant applications for regional diversity projects, including one from the Oregon Workforce Investment Board to build a database of applicants to nursing programs and another from the Robert Wood Johnson Foundation, Partners Investing in Nursing's Future program to improve cultural competence among nurses. Dr. Wros' research has focused on cross-cultural values identification in nursing ethics. She has collaborated on published studies and presentations comparing values and ethical concerns of nurses in the U.S. and Japan and describing the values and ethical concerns of Hispanic nurses and nursing students in the U.S. Her philosophy of education includes the belief that it is the responsibility of faculty to support the learning of all students, no matter their learning style, educational preparation, and personal background.

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(listed alphabetically by state)

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