BUILDING ON
FIVE
YEARS OF
SUCCESS

FIFTH ANNUAL PROGRAM LIAISONS' SUMMIT

OCTOBER 11-13, 2012 Marriott Hotel at Metro Center | Washington, DC

American Association
of **Colleges of Nursing**

Robert Wood Johnson Foundation

Table of Contents

Acknowledgments

A special thanks to the following organizations and individuals for their generous support and contributions to this program:
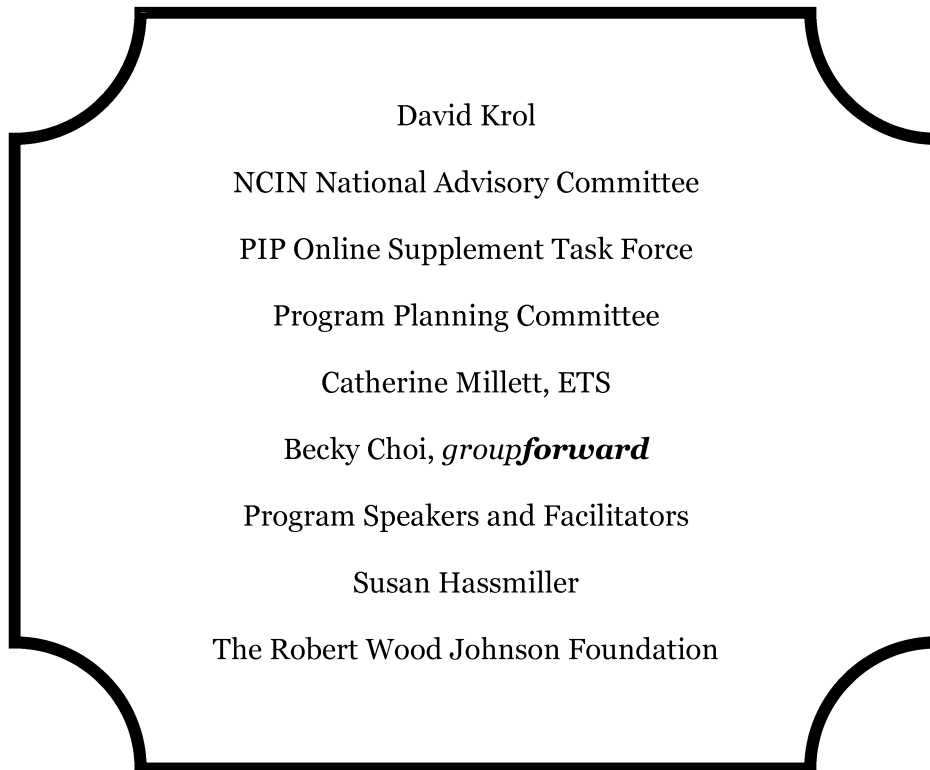
David Krol

NCIN National Advisory Committee

PIP Online Supplement Task Force

Program Planning Committee

Catherine Millett, ETS

Becky Choi, *groupforward*

Program Speakers and Facilitators

Susan Hassmiller

The Robert Wood Johnson Foundation

Agenda

Thursday, October 11, 2012

Noon Conference Registration Opens   **Foyer of Salon B&C**

Posters Available for Viewing

1:00 – 3:30 p.m.   First Session   **Salon B&C**

Moderator: Becky Choi, JD
Founder and Principal
groupforward

Title: **Organizational Culture: Why Diversity Matters**
Best Practices in Academe:
Speaker: Jacinta C. Gauda
Chair, Corporate Communications
Grayling Global

Exemplars:

Title: **Student Recruitment Practices:**
Leslie M. McKeon, PhD, CNL, NEA-BC
Associate Professor and Assistant Dean for Student Affairs
Acute and Chronic Care Department
University of Tennessee Health Science Center

Title: **Diversity in Gender: The Y Factor**
Ernest Grant, MSN, RN
Director of Burn Outreach and Prevention
University of North Carolina Healthcare

3:30 – 3:45 p.m.   Coffee Break   **Salon D&E**

3:45 – 4:15 p.m.   Second Session   **Salon B&C**

Title: **Leadership Development III; Overview of modifications**
Speaker: Becky Choi, JD
Founder and Principal
groupforward

4:15 – 4:30 p.m.   Break

4:30 – 5:30 p.m.   Third Session   **Salon B&C**

Title: **New Grantee Orientation**
Speaker: Vernell DeWitty, PhD, RN
Program Deputy Director
New Careers in Nursing

Gretchen Wright
Vice President, Principal
PR Solutions, Inc.

6:00 – 9:00 p.m.   Dinner Session   **Junior Ballroom**
    6:00 p.m.   Celebrations, Cocktails and Networking
    7:00 p.m.   Dinner Served
    8:00 p.m.   Presentation

        Title: **A Journey of Leadership to Philanthropy**
        Introductions: Catherine Crowley, EdD, RN
        Project Director
        Who Will Care? Initiative

        Speaker: Jan Young, DNSc
        Executive Director
        Assisi Foundation of Memphis, Inc.

Friday, October 12, 2012

7:00 a.m.   Conference Registration Opens   **Foyer of Salon B&C**

    Posters Available for Viewing

7:30 – 8:45 a.m.   Breakfast Session   **Salon D&E**

    Plated Breakfast & Roundtable Discussions
    Please select a topic area that interests you

8:45 – 9 a.m.   Break to move to the main session room

9:00 – 9:15 a.m.   Greetings from Robert Wood Johnson Foundation   Salon B&C

    Moderator: Carolina Huerta, EdD, MSN, RN
    Nursing Department Professor and Chair
    The University of Texas-Pan America

    Speaker: David Krol, MD, MPH, FAAP
    Team Director and Senior Program Officer
    Robert Wood Johnson Foundation

9:15 – 10:45 a.m.   Keynote Session   **Salon B&C**

    Title: **Curriculum Development and Design in Accelerated Degree Programs**
    Speaker: Carole Hruskocy, PhD
    Associate Professor
    Regis University, Denver CO

    Panel Presenters:
        Exemplars of Curriculum Design:

Ann Marie P. Mauro, PhD, RN, CNL, CNE
Clinical Associate Professor
New York University

Kellie Bryant, DNP, WHNP
Director of Simulation Learning
New York University

Elisabeth Shelton, PhD, RN, CNE, ANEF
Associate Dean, Undergraduate Academic Affairs
West Virginia University

Question and Answer Session

10:45 – 11:00 a.m.   Coffee Break available in the Poster Room   **Salon D&E**
Please review the posters and submit your vote.

11:00 a.m. – 12:00 p.m.   Plenary Session   **Salon B&C**

Moderator: Brenda K. Zierler, PhD, RN, FAAN
Professor, Department of Biobehavioral Nursing and Health Systems; Co-Director
Center for Health Sciences Interprofessional Education, Practice and Research;
Associate Director- Institute for Simulation and Interprofessional Studies
University of Washington

Title: **PIP On-Line Supplement**
Lyndon Godsall, EdD, EdS, MEd, Bed
Instructional Designer
University of Miami

Kenya Snowden, DNP, ANP-BC, ACNP-BC
Assistant Professor
University of Miami

Question and Answer Session

12:00 – 1:30 p.m.   Lunch Break
A listing of places to enjoy lunch is in your registration package.
Duplicates are available at the registration desk.

1:30 – 2:30 p.m.   Plenary Session   **Salon B&C**

Moderator: Elias Provencio- Vasquez, PhD, RN, FAAN, FAANP
Dean and Professor
The University of Texas at El Paso

Title: **NCIN Scholar Network: Student Panel**
Co-Facilitators:
Aara Amindi-Nouri, PhD
Director of Diversity/Assistant Professor
Samuel Merritt University

Susan Ward, PhD, RN
Director of Nursing, Special Program
Nebraska Methodist College of Nursing and Allied Health

Panelists: Steering Committee: NCIN Scholar Network

2:30 – 3:30 p.m.   Plenary Session   **Salon B&C**

Title: **NCIN Evaluation: Phase II**
Speakers:
Vernell DeWitty, PhD, RN
Program Deputy Director
New Careers in Nursing

Catherine Millett, PhD
Senior Research Scientist
Educational Testing Services

3:30– 4:00 p.m.   Coffee Break Available in the Poster Room   **Salon D&E**
Please review the posters and submit your vote.

4:00 – 5:00 p.m.   Plenary Session

Moderator: Debra Danforth, RN, BSN
Comprehensive Health Operations Director
Oneida Community Health Center

Title: **The Lived Experience of Practicing Accelerated Degree Nurses**
Speaker: Lisa Hennessy, PhD, MSN, RN, CRRN
Clinical Assistant Professor
University of Texas, El Paso

Title: **What do we know about advanced accelerated degree programs?**
Speaker: Linda Pellico, PhD, MSN
Associate Professor
Yale University

Question and Answer Session

5:00 – 6:00p.m.   Final opportunity to view posters   **Salon D&E**
Poster sessions close promptly at 6pm- All votes are due

6:30 – 8:00p.m.   Committee Dinner
Invitation Only Planning Committee Dinner
Henley Park, 926 Massachusetts Avenue, NW Washington, DC 20001

Saturday, October 13, 2012

7:00 a.m.   Conference Registration Open   **Foyer of Salon B&C**

7:30 – 8:50 a.m.   Breakfast Session   **Salon D&E**

Conference Session & Plated Breakfast

Introductions: Polly Bednash, PHD, RN, FAAN
CEO & Executive Director
American Association of Colleges of Nursing

Title: **The Future of Nursing:** *Campaign for Action*: **Two Years Later**
Speaker: Sue Hassmiller, PhD, RN, FAAN
Senior Adviser for Nursing, Robert Wood Johnson Foundation
Director, Future of Nursing: *Campaign for Action*

8:50 – 9:00 a.m.   Short Break to move to the main session room

9:00 – 9:45 a.m.   Plenary Session   **Salon B&C**

Moderator: Guardia Banister, PhD, RN
Executive Director, Institute for Patient Care
Massachusetts General Hospital

Title: **Interprofessional Education in Accelerated Degree Programs**
Speaker: Brenda K. Zierler, PhD, RN, FAAN
Professor, Department of Biobehavioral Nursing and Health Systems; Co-Director
Center for Health Sciences Interprofessional Education, Practice and Research;
Associate Director- Institute for Simulation and Interprofessional Studies
University of Washington

9:45 – 10:15 a.m.   Poster Winners Announced

10:15 – 10:30 a.m.   Coffee break served in lobbies near break out session.

10:30 – 11:45 a.m.   Break Out Sessions:

   Session One   **Salon 1**
      Diversity Recruitment
      Facilitators:
      Christine Downing, MA
      Research Assistant
      New Careers in Nursing

      Teri Murray, PhD, APHN-BC, RN, FAAN
      Dean, School of Nursing
      Saint Louis University

      National Advisory Committee co-facilitator: Paul C. Gorski, PhD, MAEd
      Associate Professor, Integrative Studies, New Century College
      George Mason University

   Session Two   **Salon 2**
      Curriculum Re-design in Accelerated Degree Programs

Facilitator: Ann Marie Mauro, PhD, RN, CNL, CE
Clinical Associate Professor
New York University

National Advisory Committee co-facilitator: Catherine Crowley, EdD, RN
Project Director
Who Will Care? Initiative

Session Three   **Salon 3**
  Sustaining Self: Strategies for Work/Life Balance
  Facilitator: Tracy Motter, RN, MSN
  Senior Undergraduate Program Director
  Kent State University

  National Advisory Committee co-facilitator: Gaurdia Banister, PhD, RN
  Executive Director, Institute for Patient Care
  Massachusetts General Hospital

Session Four   **Salon A**
  Moving Accelerated Degree Students Forward to Doctoral Education
  Facilitator: Patty Cowan, PhD, RN
  Associate Dean for Academic Affairs and Director, PhD in nursing program
  University of Tennessee Health Science Center

  National Advisory Committee co-facilitator: Elias Provencio- Vasquez, PhD, RN,
  FAAN, FAANP
  Dean and Professor
  The University of Texas at El Paso

Strategic Communication Consultations (By Appointment)   **London II**

11:45a.m. – 12:00 p.m. Break

12:00 – 1:00 p.m.   Closing Session   **Salon B&C**

    Moderator: Debra Danforth, RN, BSN
    Comprehensive Health Operations Director
    Oneida Community Health Center

    Reports from:
    Saturday Break-Out Sessions
    Friday Morning Round Table Discussions

    Closing Remarks

1:00 p.m.   **Foyer of Salon B&C**

    Boxed lunches served in the lobby, please enjoy while you begin your journey home.

<div align="center">

Hotel Check-out: 12:00 PM
Express Checkout-Video Review Billing, Video Checkout

</div>

Welcome Letter

October 11, 2012

Dear Colleague:

We are pleased to welcome you to the fifth annual Robert Wood Johnson Foundation *New Careers in Nursing* Program Liaisons' Summit: *Building on Five Years of Success.*

The *New Careers in Nursing Scholarship Program* (NCIN) seeks to increase the number of professional nurses by recruiting and enrolling students into the profession from groups underrepresented in nursing and economically disadvantaged backgrounds. Through grants to schools of nursing, NCIN invests in scholarships for college graduates with degrees in other fields who wish to transition into nursing through an accelerated baccalaureate or master's nursing program. The program also provides valuable support to grantees and students as they transition from other fields of study into nursing.

This unique partnership, launched in April 2008, has created a community of 119 unique schools of nursing grantees. The NCIN program has achieved a **98 percent success** rate in distributing awarded scholarships. A total of 2,717 scholarships will be awarded by the end of this fifth funding cycle.

This year, the Summit will focus on organizational cultures and innovation in curriculum design for accelerated nursing education. Attendees will participate in sessions to explore best practices for promoting diversity in organizational culture, innovation in curriculum design, and how to implement interprofessional instruction in accelerated nursing education programs. New and recently revised technical assistance products and programs will be introduced during the Summit. Break-out sessions allow participants to engage in more in-depth focus on diversity recruitment, curriculum re-design, sustaining self, and the accelerated student's path to the PhD. The NCIN scholars' panel this year will present the unique and exciting Scholar Network as it is being developed.

For the fifth consecutive year, NCIN will display grantee posters depicting innovative approaches to preparing accelerated degree nursing students.

We welcome you to our growing community and your participation in the Summit. It is our hope that this will be a valuable opportunity to learn more about how we can support students as they enter our profession.

Sincerely,

David M. Krol, MD, MPH, FAAP
Team Leader and Senior Program Officer, Human Capital
Robert Wood Johnson Foundation

Geraldine (Polly) Bednash, PhD, RN, FAAN
Chief Executive Officer and Executive Director
American Association of Colleges of Nursing
National Program Director

Organizational Culture: Why Diversity Matters

Thursday, October 11, 2012
1:00–3:30 p.m.
Salon B & C

Best Practices in Academe Speaker:

JACINTA C. GAUDA
Chair
Grayling Global, Corporate Communications

Jacinta Gauda is chair of Corporate Communications for Grayling, an international communications firm, specializing in diversity and inclusion; change management and professional development.

Jacinta is an executive coach and expert communications trainer. She has developed talent acquisition and global corporate diversity programs for leading corporations. She has been a featured speaker at law conferences and at numerous business forums. A seasoned facilitator, her expertise includes post-merger corporate cultural integration strategies and developing consensus-building programs.

Jacinta is on the faculty of the Fast Company's 30 Second MBA where she is featured among global business leaders addressing timely business issues. She is a member of the Board of Directors of the National Urban Fellows and the Advisory Board for the Quality Education for Minorities (QEM) Network. She has served on the Advisory Board of The Points of Light Foundation. She holds a degree in education from Harris College, St. Louis, Missouri, and has been certified by the MIT-Harvard Public Disputes Program.

Under the leadership of Jacinta, Grayling has developed a top-tier practice with a proven track record for conducting and analyzing best practice research, developing and implementing effective internal and external strategies, and helping organizations through times of crisis.

Session Overview:

Many institutions of higher education attempt to provide students with tools or strategies to succeed in college but fail to consider the influence that organizational cultures have on success. The session will focus on how to create environments that engage underrepresented students intentionally and frequently with diverse others as well as with pedagogies that allow them to collaborate in a learning environment that embraces diversity. Based on a comprehensive meta-analysis of the literature supported by the Robert Wood Johnson Foundation, this session will highlight the best diversity practices in academic environments.

Session Objective:

1. Describe best diversity practices in academic environments.

SESSION SLIDES FOR JACINTA C. GAUDA

Best Diversity Practices in Academe:
Strategies that Shift Organizational Culture

October 2012

Jacinta C. Gauda
Robert Wood Johnson Foundation
Human Capital Diversity Consultant

Overview

Fundamentals	Build the Diversity & Inclusion strategy on a strong foundation
Recruitment	Execute an integrated and targeted outreach program
Retention	Provide relevant benefits and programs of support
Culture	Build a purposeful culture of inclusion

Diversity Matters Community   2

The Fundamentals - Strong Purpose

Ground Diversity & Inclusion within the mission, vision and values

Embedding diversity and inclusion in the administration and culture of the institution ensures that they become part of everything the institution does.

Practice enables:
• Embeds D&I at the most fundamental level
• Builds in sustainability

Best Practice in Action

Diversity and inclusion are core values of the Robert Wood Johnson Foundation, reflected in our Guiding Principles. We value differences among individuals across multiple dimensions including, but not limited to, race, ethnicity, age, gender, sexual orientation, physical ability, religion and socioeconomic status. We believe that the more we include diverse perspectives and experiences in our work, the better able we are to help all Americans live healthier lives and get the care they need. In service to our mission, we pledge to promote these values in the work we do and to reflect on our progress regularly.

~ RWJF Diversity Statement

Diversity Matters Community   3

The Fundamentals

Build a comprehensive strategy on a strong foundation

An effective and sustainable diversity and inclusion strategy is built on certain core fundamentals, which, taken together, exponentially increase the potential for success.

Diversity Matters Community   4

The Fundamentals – Compelling Case

Build a compelling and relevant case

Showing how the Diversity & Inclusion strategy strengthens the organization is key to leadership buy-in. It is essential for adequate resource allocation, and for the energy needed to change and build new behavioral and organizational competencies. The case statement is the strong rationale for a commitment to a sustainable strategy.

Practice enables:
• Shared understanding
• Increased capacity to adapt
• Leadership ownership
• Rationale for investment

Best Practice in Action

"[Diversity] is especially important in the field of population health, for two reasons. First: the issue of health disparities is central to research in population health – why are some population groups less healthy than others, and what can be done to reduce disparities? Recruiting scientists from underrepresented groups into this area of research is vital. Second: as mentioned above, population health research requires the collaboration of people with different kinds of academic and professional training, so we need diversity along disciplinary lines."

~ National Program Co-Director Dr. Christine Bachrach, Health and Society Scholars
PODCAST LINK

Diversity Matters Community   5

The Fundamentals - Leadership Commitment

Demonstrate leadership commitment

Leadership commitment to Diversity & Inclusion is made credible by the actions, pronouncements, and involvement of leaders at all levels. Demonstrated leadership commitment creates an "authorizing" environment.

Practice enables:
• A perception of credible leadership
• Leadership buy-in
• The embrace of D&I as a consistent priority
• A strengthened internal and external reputation

Best Practice in Action

• The CEO leads the Diversity Council
• The Chief Diversity Officer is a direct report to the CEO
• The CEO meets regularly with affinity groups
• Leadership performance evaluations are tied to diversity results
• The leadership signs off on diversity metrics and progress
• The leadership reviews succession plans
• There is consistency in communications, both internally and externally
• The leadership promotes the involvement of the Board and the Advisory Council

Diversity Matters Community   6

The Fundamentals – Investment and Structure

Build a sustainable structure, and allocate resources accordingly

To be effective, all Diversity & Inclusion strategies within the organization must be aligned in support of one overarching goal. To deliver measurable results, the strategy must be supported by the appropriate infrastructure, and must have adequate resources assigned.

Best Practice in Action
- There is an office that is responsible for diversity
- There is a dedicated staff that oversees strategy and influences critical elements such as:
  - budgets
  - diversity metrics
  - Progress and program reporting
  - internal talent movement
  - resources for programs, affinity groups, and university services

Practice enables:
- Clarity of ownership
- Dedicated budget to establish initiatives
- Effective allocation of departmental budget

Diversity Matters Community 7

The Fundamentals – Accountability Throughout

Develop systems of accountability

Systems of accountability ensure collective and individual ownership of the Diversity & Inclusion strategy. These systems ensure that plans translate into behaviors, desired outcomes and measureable results.

Best Practice in Action
- Provision and encouragement of a risk-free system to capture and analyze comments, suggestions and grievances at all levels.
- Engagement and perception surveys graded and analyzed by third parties
- Monitoring of open positions, hiring, and succession planning
- Tracking participation in training and career development programs
- Frequent review of turnover and promotion rates
- Establishment of qualitative and quantitative measures of success
- Development of clear and agreed-upon measures for collecting, analyzing and sharing data across all areas of the institution
- Evaluating the results of work culture and campus climate surveys

Practice enables:
- Informed decision-making
- Awareness of the need for intervention
- Collecting information about gaps in performance
- Development of a baseline for continuous improvement

Diversity Matters Community 8

The Fundamentals - Councils

Establish influential councils

Organizations that follow best practices often create a Diversity & Inclusion Council. Council members are chosen from well-positioned, highly respected, and influential leaders. Members are empowered to oversee the Diversity & Inclusion strategy.

Best Practice in Action
The D&I Council plays a critical role in:
- Shaping a culture of inclusion
- Supporting and advancing the institution's D&I strategy
- Tracking and reporting progress on D&I
- Assuring accountability
- Sustaining Diversity & Inclusion as an organizational priority

Practice enables:
- Leadership involvement in the Diversity & Inclusion strategy
- Institutional knowledge of the level of importance attached to D&I
- The establishment of D&I as a long-term priority
- A public statement of engagement and commitment

Diversity Matters Community 9

The Fundamental - **Communicate the Commitment**

Internal and external communications

The Diversity & Inclusion communications strategy builds the organization's brand, accelerates positive change, and supports outreach and recruitment. It reinforces the organization's commitment to diversity and inclusion, and strengthens its reputation internally and externally.

Best Practice in Action
- Bold and sincere messaging about commitment from the top
- Prime positioning for D&I information on the website (not buried within careers and community or several clicks from the home page)
- D&I information is found in multiple online locations
- D&I information includes more than a requisite statement; there is meaningful, compelling, and relevant information
- Public statements of goals and progress
- Rewards and corporate recognition for successes
- Public access to video testimonials and success stories (mentees and mentors, utilization of employee-resource groups)
- Publicly shared annual diversity report
- Web pages dedicated to resource groups

Practice enables:
- Confidence in the institution's commitment
- Widespread knowledge of D&I accomplishments
- Widespread knowledge of the benefits of D&I
- Inspiration to action and active support
- A vibrant common vision of diversity
- Consistency between internal and external messages

Diversity Matters Community 10

Recruitment

Rethink the Recruiting Strategy

Attracting candidates from underrepresented groups requires the development and execution of a comprehensive diversity recruiting plan that is integrated within an overall recruiting strategy. This plan must include targeted recruiting...

Diversity Matters Community 11

Recruitment – Provide Equal Access to Quality Information

Reduce the power of "Whom you Know"

Equal access to high-quality, consistent, and accurate application and program information removes barriers and reliance on "whom you know." It provides technical information to individuals who may not have access to insiders, or experience applying to such programs.

Best Practice in Action

Health and Society Scholars Users Guide to the Application

"The site is also used as a marketing tool that provides more detailed information about the program and application process to individuals and institutions who may not have much experience in applying to programs like this, thereby potentially increasing our geographic and institutional diversity."

~ Gerard Lebeda
Deputy Director
Health and Society Scholars

Practice enables:
- A clearer picture of the program for applicants
- A better understanding of what the program seeks
- Increased numbers of applications from members of underrepresented groups
- Higher quality applications overall

Diversity Matters Community 12

Recruitment - Relevant Communications

Develop communications that resonate

A compelling value proposition, relevant messages, and representation in marketing materials all welcome candidates from under-represented groups. These things provide re-assuring cues that enhance the attractiveness of the program.

Practice enables:
- A strong message of inclusion
- A focus on program alumni and grantees from underrepresented groups
- The message that "This program can be for me"

Best Practice in Action

Diversity Matters Community — 13

Recruitment – Be Open to Selection Process Innovations

Rethink the Application Strategy

Traditional selection processes are yielding to more innovative approaches. The success of Holistic Review shows that traditional practices are not necessarily the best practices. Encouraging reapplication and allowing candidates to learn from rejection strengthens their future applications and their prospects for a successful candidacy.

Practice enables:
- A second chance for qualified applicants
- A better understanding of pipeline issues
- Integration of points of intervention so as to increase the quality of applications
- Familiarity with the application process for candidates with little prior experience and ineffective networks
- Support for candidates' career development overall

Best Practice in Action

We also provide a "lessons learned" webinar for candidates who were not successful; we talk about issues that came up – generically -- in the applications and interviews, give them feedback on the process and invite them to apply the next year if they are still eligible. We remind them about the webinars, and to get started early. This helps them work through the process. We've had at least two candidates from minority backgrounds who were rejected on their first applications, went through the learning and analysis process, applied again and were accepted.
-- Jacquelyn Campbell, PhD, RN, FAAN
National Director, RWJF Nurse Faculty Scholars
Anna D. Wolf Chair and Professor
Johns Hopkins University School of Nursing

Diversity Matters Community — 14

Recruitment – Use Multiple Channels

Really reach out

A targeted outreach strategy requires a high level of precision. The strategy makes use of advisory board members, strategic partners, and alumni in outreach, development and recruitment efforts. This approach requires meaningful relationships with influencers, connectors, and organizations that provide access to candidates. Strong relationships are necessary to build a pipeline for the future.

Practice enables:
- Enhanced opportunities for word-of-mouth recruiting
- Establishment of a pipeline of interested candidates
- Expanded awareness of the program
- Access to assistance in the recruiting effort

Best Practice in Action

- Ongoing sourcing of passive candidates
- Maintenance of databases of potential applicants from diverse backgrounds
- Relationship building with professional organizations
- Use of referral programs, networks, and affinity groups
- An aggressive internal and external branding campaign
- Use of search firms that specialize in diversity
- Internship programs
- Recruiting events
- Presence at community fairs, job fairs, employer outreach events, etc.

Diversity Matters Community — 15

Retention

Encourage and Support Engagement

The process of engagement starts early on. It improves the prospects for positive Diversity & Inclusion outcomes and for a successful institutional culture of diversity. Engagement is a vital contributor to inclusion, retention, and productivity.

Diversity Matters Community — 16

Retention - Access to Mentoring

Provide multiple channels for mentoring

Members of underrepresented groups benefit from inclusive and cross-racial mentoring. Mentoring, coaching, and sponsoring contribute greatly to career development, retention, promotion, and engagement.

Practice enables:
- An inclusive and supportive experience
- A reduced likelihood of giving up
- A gateway to other helpful programs and services
- The acceleration of acculturation

Best Practice in Action

- Individual coaching and feedback
- Group learning and experience exchanges
- Mentor and mentee training
- Multi-level coaching and career sponsorship
- Innovative practices for orientation and on-boarding
- A defined process for holistic experiential exchange
- An alumni-hosted webinar for potential candidates

Diversity Matters Community — 17

Retention – Benefits and Programs

Support real needs

Understanding the real needs and concerns of those in the program, and developing services and benefits that support these needs, can contribute to the retention of members of underrepresented groups, and of those in the program overall. It can also positively affect the career path of members of underrepresented groups and of others.

Practice enables:
- An inclusive and supportive workplace experience
- A reduced likelihood of giving up
- A gateway to other helpful programs and services

Best Practice in Action

- Financial support
- Crisis support
- Support for family issues and work-life balance
- Help with academic preparation
- Instructor support
- Support for health problems
- Help with faculty issues

Diversity Matters Community — 18

Culture - Culture of Inclusion

Build a Purposeful Culture

Building a culture of inclusion is a process of institutional change. It is driven by the institution's larger strategy for growth, relevance, and leadership. The change management process involves building the "experience of inclusiveness." This requires learning inclusive behaviors, building systems of accountability, establishing methods to evaluate progress, and developing new competencies.

Diversity Matters Community   19

Culture - Building an Inclusive Culture From the Inside Out

Building an inclusive culture requires taking a holistic view and constantly seeking opportunities to demonstrate inclusive behaviors. Institutions seeking to increase diversity and inclusion should ask honest and hard questions about their culture, with an eye toward identifying practices of exclusion and unintended barriers to inclusion.
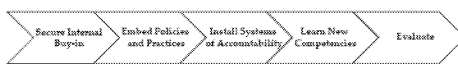
Structural Analysis	Identify Points Of Inclusion	Envision the Culture	Determine Measureable Outcomes	Develop the Strategy
• Ingrained practices • Long-term policies • Established norms • Automatic assumptions	• Admissions • Classrooms • Clinical exercises • Advisors • Faculty • Financial aid • Library • Rotations	• Establish a collective vision for an inclusive experience	• Develop measurable outcomes of inclusivity	• Clarify the inclusive behaviors and practices that apply to people, the workplace environment, programs, and policies

Diversity Matters Community   20

Culture - Building an Inclusive Culture From the Inside Out

With an established vision of the inclusive experience, and supported by standards for measurable outcomes, the organization can begin the hard work of building new competencies, learning inclusive behavior, and embedding inclusive practices in institutional routines. In doing so it must follow transparent policies and construct new cultural norms in the workplace.

Secure Internal Buy-in	Embed Policies and Practices	Install Systems of Accountability	Learn New Competencies	Evaluate
This is an essential step to create advocates and role models for inclusive behaviors	Build awareness and understanding of inclusive practices, transparent policies, required education, and new cultural norms	Hold people accountable for demonstrating inclusive behaviors; and make them aware of the measurable criteria for progress	• Cultural competency • Inclusive leadership • Identification of unconscious bias • Inclusive team building • Fair practices	• Surveys • Comments • Complaints • Retention statistics • Promotion statistics • Culture climate assessment

Diversity Matters Community   21
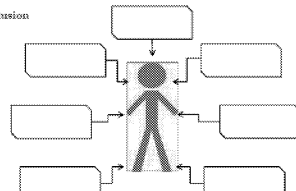
Summary

	Well Established	Needs Improvement	Need to Establish	N/A
The Fundamentals				
• Build a comprehensive strategy on a strong foundation	○	○	○	○
• Ground Diversity & Inclusion within the mission	○	○	○	○
• Build a compelling and relevant case	○	○	○	○
• Demonstrate leadership commitment	○	○	○	○
• Invest in a sustainable structure	○	○	○	○
• Align independent strategies and develop systems of accountability	○	○	○	○
• Communicate internally and externally	○	○	○	○
• Establish influential councils	○	○	○	○
Recruitment				
• Rethink the recruiting strategy	○	○	○	○
• Provide equal access to quality information	○	○	○	○
• Encourage re-applications	○	○	○	○
• Develop communications that resonates	○	○	○	○
• Really reach out	○	○	○	○
Retention				
• Encourage and support engagement	○	○	○	○
• Provide multiple channels for mentoring	○	○	○	○
• Support real needs	○	○	○	○

Diversity Matters Community   22

The Inclusion Experience

Opportunities for Inclusion

Systems of Support

Diversity Matters Community   23

LESLIE M. MCKEON, PHD, CNL, NEA-BC
Associate Professor and Assistant Dean for Student Affairs, Acute and Chronic Care Department
University of Tennessee Health Science Center

Leslie McKeon, PhD, RN, CNL, NEA-BC, is an associate professor and assistant dean for Student Affairs at the College of Nursing. In 2009, she was awarded a grant from the Health Resources and Services Administration to develop and evaluate the Master's Entry Clinical Nurse Leader Program (CNL). Dr. McKeon attended West Chester State College where she received her baccalaureate degree in nursing. She received a master's degree in community health nursing administration from the University of Arizona and her PhD in 2004 from the University of Tennessee Health Science Center. Dr. McKeon has more than 25 years of nursing administrative experience in home health care, hospice, acute rehabilitation, and long term care (CCRC).

Session Overview:
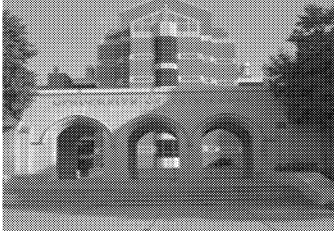
This session will highlight the importance of organizational leadership in the recruitment of a diverse population of students. This presentation will describe various recruitment strategies that have achieved successful outcomes. Participants will have an opportunity to discuss how these modalities may be applied to their unique school environment. The NCIN Recruitment Toolkit will be introduced as a resource to assist program liaisons with their recruitment efforts.

Session Objective:

1. Define the importance of leadership roles in recruiting a diverse student population.

SESSION SLIDES FOR LESLIE M. MCKEON

University of Tennessee Health Science Center
College of Nursing

Leslie McKeon, PhD, Assistant Dean Student Affairs
RWJF NCIN National Program Liaisons' Summit, October 11, 2012

Learning Outcome

- Define the importance of leadership roles in recruiting a diverse student population
  - Campus Leadership
  - Health Professions Leadership
  - College of Nursing Leadership

UTHSC 2nd Degree Nursing Entry Program
Five Years of Recruitment Success
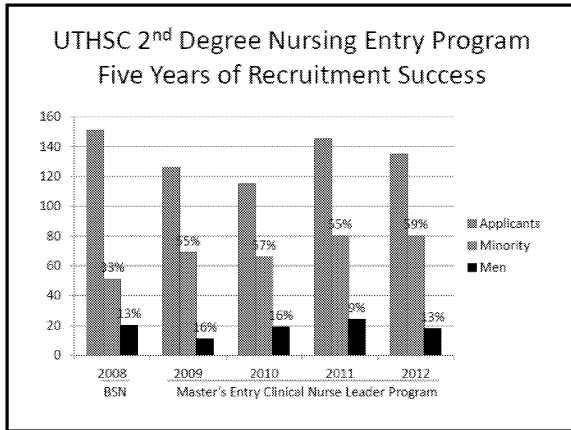
UTHSC Campus Leadership

- Office of Equity and Diversity
- Department of Health Career Programs
- Special Events: Reverend Jesse Jackson

UTHSC Diversity Day

UTHSC Summer Research Scholar
Graduates
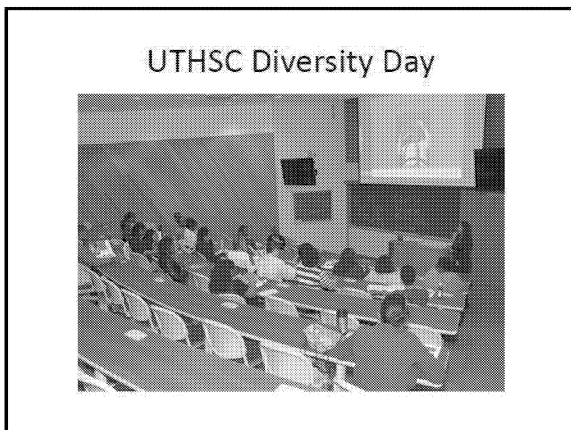
UTHSC Health Careers Program
Nursing Student Volunteers
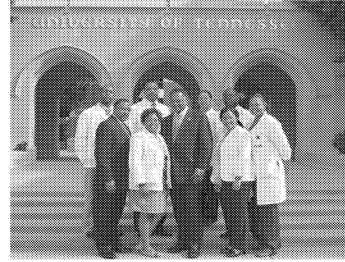
Reverend Jesse Jackson with students and faculty on April 3rd.
"When I look at your faces around this room, I'm encouraged," Rev.
Jackson told those assembled, focusing keenly on UTHSC students.
"The leadership you are looking for is around this room."

UTHSC Health Professions Leadership

- Nursing
- Medicine
- Pharmacy
- Dentistry
- Allied Health
  - Physical Therapy
  - Occupational Therapy
  - Laboratory Science
  - Health Information Management
- Graduate Health Sciences

HBCU Regional Recruiting

- Alcorn State University, MS
- Jackson State University, MS
- Tougaloo College, MS
- LeMoyne Owen College, Memphis
- Tennessee State University, Nashville
- University of Arkansas, Pine Bluff
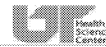
Pre-Health Advisors Weekend at UTHSC

UTHSC Campus Visits
Nursing Simulation Lab

St. Jude Children's Research Hospital Pediatric Oncology Education Program

College of Nursing Leadership

- Recruiting Webinars
- Education Fairs
- Health Fairs
- HRSA Workforce Diversity
  - Pre-Matriculation Program
- Brochures
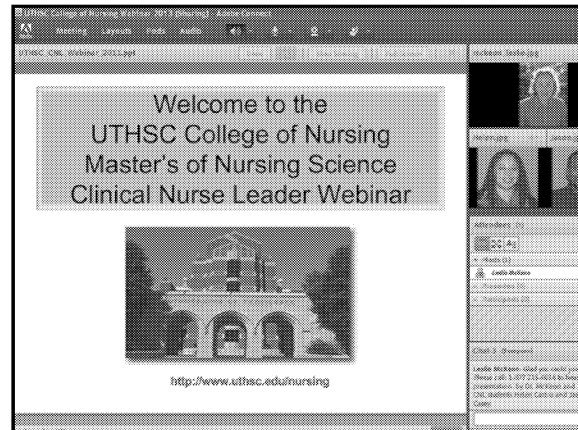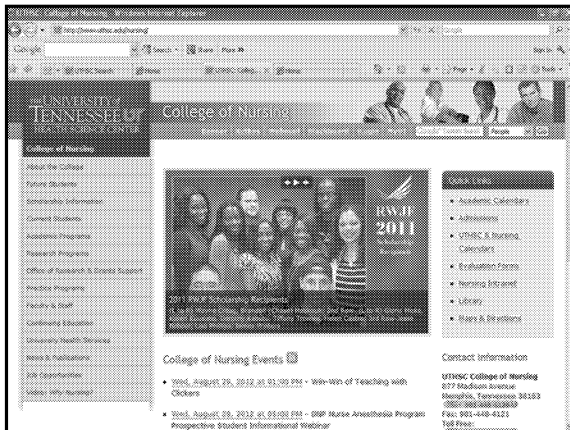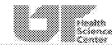
College Education Fairs
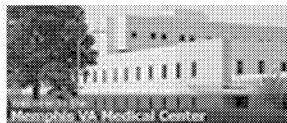
RWJF NCIN Scholars
"El Festival del Día del Niño"

HRSA Workforce Diversity
Pre-Matriculation Program 2012

HRSA Workforce Diversity Students
2011 White Coat Ceremony

MSN CNL Brochure
Prospective Students and College Advisors

MSN CNL Brochure
Prospective Students and College Advisors

UTHSC CON Student Affairs Team

Left to Right: Jamie Garrett, Roylynn Germain, Leslie McKeon, & Josie Owens-Cox

Diversity in Gender: The Y Factor Speaker:

MR. ERNEST GRANT, RN, MSN, FAAN
Director of Burn Outreach and Prevention
University of North Carolina Healthcare

Ernest Grant is the nursing education clinician for the North Carolina Jaycee Burn Center where he has been employed for the past 29 years. In his present role, he is the director of Outreach and Prevention and serves as the Burn Center's liaison for pre-hospital, hospital, allied health professionals, corporate entities, and military personnel. He promotes continuing education on the immediate care of burns, wound care treatment modalities, and the prevention of burn injuries. Ernest serves on several national committees that establish the standards for the care of burns and fire prevention. He has received numerous honors and awards for his work in the prevention of burn injuries, and for his work with nursing students and the nursing profession, including the American Burn Association's Burn Prevention Award, the Governor's Award of Excellence (the highest award given to a state employee) and the 2003 National Nurse of the Year Award sponsored by Nursing Spectrum Magazine. He has written numerous articles for publication in scientific and research journals and chapters for textbooks. He currently serves as a reviewer for journal articles for the *Journal of Burn Care and Research*, the official journal of the American Burn Association. He has recently completed a six- year term on the Board of Directors of the American Nurses Association and is the immediate past President of the North Carolina Nurses Association. In 2011, he was inducted as a Fellow in the American Academy of Nursing. He is currently the Second Vice-Chair of the National Fire Protection Association Board of Directors. Always believing in life-long education, he is currently in pursuit of a PhD in Nursing at the University of North Carolina at Greensboro.

Session Overview:

The degree to which students feel they fit into the fabric of the institution is a crucial component of their decision to stay or leave when faced with challenges. Male nursing students frequently may sense they are in an environment where they might not belong. Being a cultural outsider may lead to a crisis of competence and fears of academic inadequacy. This presentation is a personal narrative of Grant's journey in nursing and identifies the strategies that lead to success. Nursing faculty are key in creating a classroom environment that connects underrepresented students to the campus environment, resulting in higher rates of success.

Session Objective:

1.   Examine the lived experiences of male nurse from diverse backgrounds, and opportunities for developing gender neutral learning environments.

SESSION SLIDES FOR ERNEST GRANT

Diversity in Gender:
The Y Factor

Ernest J. Grant, RN, MSN, FAAN

Historical Perspective

- Typically, most nursing programs start out discussing the history of nursing by talking about Florence Nightingale and her contribution to modern day nursing.

Historical Perspective

- **Ancient Rome** – the Nosocomi were men who provided nursing care in ancient Rome.

- **Early Religious Orders** –
  - St. Benedictine nursing order
  - Knights of Hospitalers
  - Teutonic Knights
  - Knights of St. Lazarus

Source: Men in Nursing Historical timeline retrieved Sept. 8, 2012 from http://allnurses.com/men-in-nursing/men-nursing-historical-96326.html

Historical Perspective

- **Crimean War (1853)** – "orderlies" provided nursing care prior to and after Florence Nightingale's arrival.

- U. S. Civil War – men served as nurses

- The Alexian Brothers in the US

- The Army Nurse Corps

- American Assembly for Men In Nursing

Source: Men in Nursing Historical timeline retrieved Sept. 8, 2012 from http://allnurses.com/men-in-nursing/men-nursing-historical-96326.html

Historical Perspective

- Men only schools of nursing existed until the early 1900's.

- "Nursing must be viewed as a People profession and not a women's profession."

Moving the profession forward
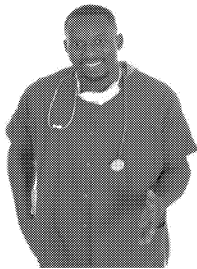
- Nursing must reflect those that we care for regardless of :

- Diversity
- Ethnicity
- Race
- Culture
- Religion

Moving the profession forward

It's a Different World!!
- The "Y" factors to be considered:
  - Historical Precedence
  - Mentorships
  - Male Faculty
  - Role Models
  - Location, Location, Location
  - Diversity

"Y" Factor
Historical Precedence

- There are 2,909,357 Licensed RNs in the US*

- Men comprise approximately 7 % of total nursing population#

- Only 8.0 % of all RNs are under the age of 40*

Source: "Minority Nurse. Nursing Statistics Fact Sheet. Retrieved Sept. 8, 2011, from
   http://www.minoritynurse.com/?q=minority-nursing-statistics.
   # Robert Wood Johnson Foundation: Male Nurses Break Through Barriers to Diversify Profession. Retrieved from
   http://www.rwjf.org/humancapital/product.jsp?id=71184

"Y" Factor
Historical Precedence

- **Historical Precedence**
  - Men were not encouraged to consider nursing as a career

  - In Jordan, 95% of nurses are men

  - Role /gender confusion

  - Suppression of advancement

Sources: O'Lynn, C. E. (2004) Gender -Based Barriers for Male Students in Nursing Education Programs: Prevalence and Perceived Importance. J Nur. Ed
   43:5
   Sullivan, E. J. (2000) Men in Nursing: The Importance of Gender Diversity, J Prof. Nur. 16,5, 253-354

"Y" Factor
Mentorships

- Lacking – discourage men from entering the profession

- Traits associated with nursing

- Media stereotype of the profession
  - Women's work
  - Battle-axes, sex symbols, handmaiden
  - White women, white dress, white cap

"Y" Factor
Mentorship

- Providing long term one-on-one attention
- Should consider including:
  - Counseling
  - Financial planning advice
  - Test-taking /writing skills improvement
  - Heighten faculty awareness and sensitivity
  - Use technology (Dashboard – measure successes and failures)

"Y" Factor
Mentorship

- Facilitators of learning

- Past experiences

- Follow-up

"Y" Factor
Male Faculty

- Men represent only 3.5% of faulty *

- 2.4% of deans* (total of 29)

- Minorities represent only 8.7% of faculty and deans*

*Source: AACN. Effective strategies for increasing diversity in Nursing programs. Retrieved from http://www.aacn.edu/aacn-publications/issues on Sept. 9, 2012

"Y" Factor
Male Faculty

- How to improve representation
  - Presenting an inclusive image
    - Advertising/brochures
    - Language usage
    - Welcoming environment

  - Present at student level
  - Faculty Academy
  - Open-door policy

"Y" Factor
Role Models

- 2010 Institute of Medicine Report
  - Men in nursing provide unique perspectives and skills to the profession.
  - Helps contribute additional diversity to the workforce

  - More visible and powerful male nurse and minority educators
  - When recruiting – make a special effort to consider *qualified* minority candidates

"Y" Factor
Role Models

- Promotion of the profession in elementary and middle schools.

- Active participation in professional associations

- Network/collaboration

- Advertisement
  - Publications (journals, magazines, websites)
  - Social media

"Y" Factor
Role Model

- "Nothing about us, without us"
- Provide specific cultural experiences

"Y" Factor
Location, Location, Location

- Not visible
  - ICU's, OR's and specialty units

  - Research

  - Administration

  - "You don't look like a nurse"

"Y" Factor
Diversity

- Cultural appreciation

- Role differences

- Inclusion

"Y" Factor
Diversity

- "I heard this, what did you hear"

- http://www.youtube.com/watch?v=baSyYyqV2Xo&feature=fvwrel

"Y" Factor

- Questions....

- Comments....

- Critiques......

- Endorsements...

Leadership Development III: Overview of Modifications

Thursday, October 11, 2012
3:45 - 4:15 p.m.
Salon B & C

BECKY CHOI, JD
Founder and Principal
groupforward, LLC

Becky Choi is the founder of groupforward, LLC, and has been helping organizations and leaders understand and leverage their individual and group dynamics since 1991. Since 2001, groupforward, LLC has been helping organizations build efficient, productive, high performing teams, and strong leaders who achieve sustainable results. She brings a unique blend of experience in organization development, business, law, and human resources to her clients. With a Certificate in Organization Development from Georgetown University and Doctorate of Jurisprudence from the University of Texas at Austin, she has a solid understanding of how best to help people and organizations move forward to achieve their goals.

Session Overview:

The purpose of this activity is to enable the learner to understand the revisions to the Leadership Development Toolkit and begin to formulate thoughts on how to implement a more robust leadership development plan in his or her own school in order to impact the culture of the school.

General review of meaning of organizational culture, how to shift culture, and how to identify cultural changes. Review of generational differences chart and discussion of how to address them within the leadership development context. Review aspects of social media and how it relates to privacy issues associated with delivering health care as a nursing professional. Review new plans in Leadership Development Toolkit.

Session Objectives:

1. Describe Leadership impact assessment as a tool for identifying changes in a school culture.

2. Differentiate generational differences with activities that support understanding these differences.

3. Discuss behaviors necessary to responsibly use social media in the context of leadership in the nursing profession.

4. Discuss revisions to the prior leadership development plans.

New Grantee Orientation

Thursday, October 11, 2012
4:30 - 5:30 p.m.
Salon B & C

VERNELL DEWITTY, PHD, MBA, MSN, RN
Program Deputy Director
New Careers in Nursing

Vernell DeWitty is deputy program director for NCIN. She was previously employed by the Center for American Nurses where she served as their director of programs. She has an extensive background in program development and health care and nursing administration. She has served in various administrative capacities in university teaching hospitals as well as community based hospitals; she is a nurse educator, served as guest lecturer for the George Washington University School of Medicine and School of Public Health and is currently an adjunct faculty member at the George Mason University College of Health and Human Services.

She earned her doctoral degree from George Mason University and her master's in Business Administration from Howard University, where she was selected as a member of the Beta Gamma Sigma Business Honor Society. While attending the Catholic University of America, where she earned her master's degree in Nursing, she was selected as a member of Sigma Theta Tau National Nursing Honor Society. She is also a Fellow in the American College of Healthcare Executives.

GRETCHEN WRIGHT
Vice President, Principal
PR Solutions, Inc.

Gretchen Wright is vice president and a principal at PR Solutions, a full-service communications firm that for more than 20 years has supported non-profit organizations working on health, education, women's and human rights, and other social justice issues. The firm's clients include foundations, national advocacy groups, think tanks and associations. At PR Solutions, Wright manages numerous projects for a variety of organizations, developing communications and media strategies, planning and promoting events, writing media materials, pitching stories, and conducting media training sessions. She has developed and implemented communications plans and activities that address a range of issues including nurse education, practice and safety, drug and alcohol prevention, student debt, toxins in children's toys and the U.S. food supply, paid sick days, and more.

Session Overview:

This session is designed to present an overview of basic NCIN operations for new grantees and persons who are just beginning a role as program liaison. This open dialogue will allow new grantees to ask questions and seek clarification regarding expectations of the Robert Wood

Johnson Foundation and the National Program Office. The overall goals and objectives of NCIN will be presented with an emphasis on the role of grantees in helping to meet program objectives. A demonstration of the NCIN website will provide grantees an enhanced understanding of how to access resources at their desktops. Participants will be encouraged to discuss challenges with program implementation and identify support needed to meet these challenges. The session will conclude with a discussion of program evaluation and data collection methodologies.

Session Objectives:

1. Discuss the goals and objectives of the NCIN program.

2. Develop two to three strategies to use online resources to assist with grant implementation.

3. Identify NCIN evaluation and data collecting processes and procedures.

Dinner Presentation: "A Journey of Leadership to Philanthrophy"

Thursday, October 11, 2011
6:00–9:00 p.m.
Junior Ballroom

Introduction:
CATHERINE CROWLEY, EdD, RN
Project Director
Who Will Care? Initiative

Speaker:
JAN YOUNG, DNSc
Executive Director
Assisi Foundation of Memphis, Inc

Jan Young, executive director of The Assisi Foundation of Memphis, has had a distinguished career in education, health care, the military and philanthropy. She received her Doctorate of Nursing Science with honors, and is recipient of the Faculty Award. Recently, she received the Distinguished Alumna Award from both the University of Memphis and the University of Tennessee Colleges of Nursing. Prior to joining the Assisi Foundation in 1995, Dr. Young served as Senior Vice President of Operations with leadership accountability for clinical and support services at St. Joseph Hospital. In addition, she has worked as a management consultant, served as adjunct faculty for the University of Tennessee and University of Memphis, and maintained a private clinical practice. In May of this year she retired from the Air National Guard as a Major General, with final assignments in the Office of the Surgeon General for Medical Force Development and Nursing Services and at Air Education and Training Command.

Session Overview:

The purpose of this activity is to enable the learner to identify strategies to mentor and influence students and peers to develop and respond to personal and professional leadership opportunities.

Session Objectives:

1. Describe significant events and leadership opportunities leading to current work in philanthropy.
2. Discuss the importance of mentoring for new nurse as a component of nursing education.
3. Identify attributes of successful nurse faculty.

Breakfast Roundtable Discussions

Friday, October 12, 2012
7:30–8:45 a.m.
Salon D & E

Session Instructions:

Participants should select a breakfast table based upon their interests. Please use the worksheets on the following pages to facilitate your discussion. Each table will have a designated facilitator responsible for taking notes to share during the Roundtable Report.

Session Facilitator: Elizabeth Speakman

Session Overview:

Program discussion forums are designed to provide an opportunity for conference participants to engage in dialogue with program liaisons regarding challenges and successes recruiting students from diverse backgrounds, implementing the Pre-Entry Immersion Program, Mentoring, and Leadership Development.

Session Objectives:

1. Discuss successes and challenges NCIN grantees have encountered when implementing the Pre-Entry Immersion Programs

2. Describe the outcomes of approaches to recruitment and enrollment of a diverse student body.

3. Discuss successes and challenges of NCIN grantees in implementing mentoring programs.

4. Discuss success and challenges of NCIN grantees in creating leadership development activities.

Pre-Entry Immersion Program (PIP)

Moderators: Amy Cosimono and Cory Ann Boyd

Discussion Points:

1. Discuss your experiences with implementing the PIP program:

    a. What were the outcomes of your offering?

    b. What challenges did you encounter? How did you manage these?

2. What suggestions do you have for improving the PIP as it currently exists?

3. Have you used any on-line strategies, and what were student responses?

NCIN Mentoring Program

Moderators: Ann Marie Mauro, Lori Escallier and Aara Amidi-Nouri

Discussion Points:
1. Discuss your experiences with implementing the mentoring program.

2. What approaches to finding mentors in your community have been most successful?

3. What have been your students' responses to the mentoring programs?

4. What challenges did you encounter? How did you manage them?

5. What recommendations would you make to new NCIN grantees offering a mentoring program for the first time?

Leadership Development Program

Moderators: Sheryl Sandal, Tina Martin and Tracy Motter

Discussion Points:

1. How is the leadership program that you offer for NCIN scholars different from the leadership courses that are part of your curriculum?

2. Has the NCIN leadership requirement changed your course in any way?

3. What were the outcomes of your leadership development activities?

4. How have students responded to these activities?

5. Did you limit participation only to NCIN scholars or do you include all your students in these activities?

6. What challenges have you encountered and how have they been managed?

Diverse Student Recruitment

Moderators: Joan Masters and Patricia Cowan

Discussion Points:

1. What recruitment approaches have been most effective for your school?

2. In your opinion what were the most meaningful aspects of the recruitment discussion on Thursday afternoon?

3. What challenges do you face in recruitment of diverse students?

4. How could the NCIN program office best assist you with recruitment?

5. What have you tried that has not worked, and what are you planning to do?

Curriculum Development and Design in Accelerated Degree Programs

Friday, October 12, 2012
9:15–10:45 a.m.
Salon B & C

Speaker:
CAROLE HRUSKOCY, PHD
Associate Professor
Regis University

Carole Hruskocy has been in the education field for over 25 years. The focus of her studies has been elementary education, curriculum and instruction, instructional design, and educational technology. She has ten years of teaching experience at the K-12 level. At Regis University she was an instructional designer for five years working with accelerated online degree programs. For the past four years she was a faculty member in the School of Education and Counseling where she oversaw two accelerated master degree programs, Curriculum, Instruction, and Assessment and Instructional Technology. She also served as the Curriculum Coordinator for Teacher Education. She is currently Faculty Chair of the Teacher Education master's programs.

Session Overview:

Nursing faculty are often challenged by the volume and pace of accelerated education and the breadth of content to be presented in relatively short time period.

This session will describe successful strategies and approaches for designing accelerated programs. Hruskocy will discuss the characteristics of adult learners that influence approaches to curriculum design and instruction with an emphasis on strategies for designing effective instruction.

Session Objectives:

1. Describe essential elements of curriculum design in accelerated education.
2. Compare and contrast characteristics of adult learners that influence approaches to curriculum design and instruction.
3. Describe strategies for designing effective instruction.
4. Identify tools that facilitate adult learning principles.

SESSION SLIDES FOR CAROLE HRUSKOCY

Innovations in Curriculum Development & Design in Accelerated Degree Programs

Dr. Carole Hruskocy
Regis University
chruskoc@regis.edu

Regis University

- Jesuit University located in Denver, Colorado
- Offer an 8-week accelerated course model
- Involved with Distance Learning for 25 years
- Online programs include: 4 graduate degrees, 4 undergraduate majors, and several master's degrees in Teacher Education

---

Goals

- Advance knowledge and skills relative to curriculum design
- Recognize how adult learning principles and characteristics impact curriculum design
- Understand key considerations in the design of effective instruction
- End the day with at least one new consideration, idea, strategy, or lesson learned

---
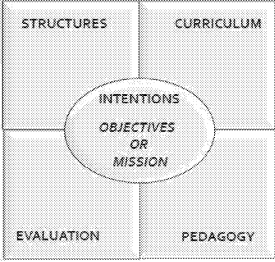
Agenda

- Essential considerations for curriculum design
- Characteristics of adult learners
- Designing effective instruction
- Reflection and questions

Essential Considerations for Curriculum Design

Objective 1
Describe essential elements of curriculum design
in accelerated education

Cultural Considerations

STRUCTURES	CURRICULUM
INTENTIONS OBJECTIVES OR MISSION	
EVALUATION	PEDAGOGY
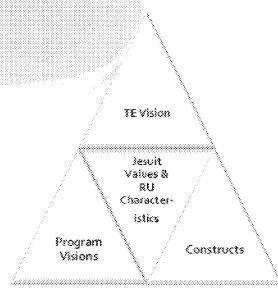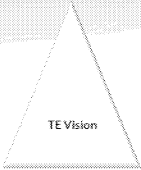
SEC Mission
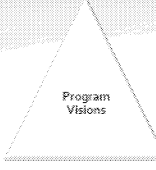
The Education and Counseling divisions of the School of Education and Counseling share a vision to develop accomplished, compassionate educators and counselors who seek to transform the landscape of their disciplines with a fresh focus on academic rigor, passionate learning and building a more socially just and humane world.

INTENTIONS

OBJECTIVES OR MISSION

Special Education

TE Vision

Jesuit Values & RU Character- istics

Program Visions

Constructs
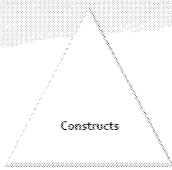
TE Vision

All education students will complete their programs able to demonstrate both the proficiencies of accomplished teaching and additional competence in 21st century education areas of emphasis.
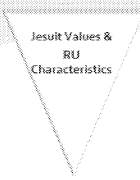
TE Vision

Program Vision

The special education teacher preparation programs seek to develop effective teachers through transformative experiences that utilize multiple approaches and partnerships to create collaborative and compassionate educators who integrate research-based practices to serve the unique and diverse needs of students with disabilities and their families.

Program Visions

Constructs

Regis 9

- Critical Thinking
- Learning Theory
- Professionalism
- Assessment
- Instruction
- Technology
- Values
- Communication
- Discipline Knowledge

Constructs

Jesuit Values

- Magis
- Social Justice
- Unity of Heart and Mind
- Contemplatives in Action
- Inclusiveness
- Leadership

Characteristics of RU Teacher Ed

- Relevant and Applicable
- Research Based
- Unified and integrated
- 21st Century Responsive

Jesuit Values & RU Characteristics

Curriculum Design Considerations

A stair-step diagram, bottom to top:
- Mission
- Program Vision
- Program Outcomes
- Program Framework
- Learning Progressions
- Degree Plan
- Course Outcomes
- Begin Course Design

Program Framework
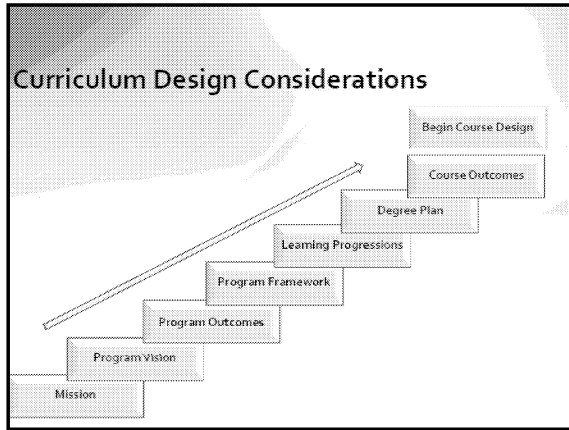
A table with columns EDSP 643, EDSP 651, EDSP 664, EDSP 665, EDSP xxx (SPED Law), EDSP 668, EDSP 669, EDSP 692, EDFD 687, with rows: Regis 9; CEC Standards; Jesuit Themes; Writing/research development; Access Skills (to the Colorado Content Standards); Post secondary & workforce Readiness; TaskStream component (key assessment).

Learning Progressions

Regis 9
- Critical Thinking (CT)
- Learning Theory (LT)
- Assessment (A)
- Instruction (I)
- Technology (T)
- Values (V)
- Communication (C)
- Discipline Knowledge (DK)

Jesuit Themes
- Magis (M)
- Finding God in All Things (FG)
- Unity of Hearts and Mind (U)
- Contemplatives in Action (CIA)
- Care of the Whole Person (CWP)
- Men and Women for Others (MWO)

CEC Standards
1. Foundations
2. Development and Characteristics of Learners
3. Individual Learning Differences
4. Instructional Strategies
5. Learning Environments/Social Interactions
6. Language
7. Instructional Planning
8. Assessment
9. Professional and Ethical Practice
10. Collaboration

Learning Progressions

"I" – introduce; "D" – developing; and "P" – proficient.

Essential Course Design Elements

- Course outcomes
  - Provide an overview of the key skills, behaviors, dispositions
- Unit objectives
  - Describes student performance to be demonstrated at the end of the learning experience as evidence of learning (Gronlund and Waugh, 2009)
    - State each in performance terms
    - Start each with an action verb
    - Consider range of cognitive processes (Bloom's)
- Assessments
  - Formative assessments
  - Summative assessments
- Learning Activities
  - Support Program and Course Outcomes (Vision, Mission)

#1 Challenge in Course Design

A puzzle diagram with pieces labeled:
- Course Outcomes
- Unit objectives
- Assessments
- Learning Activities
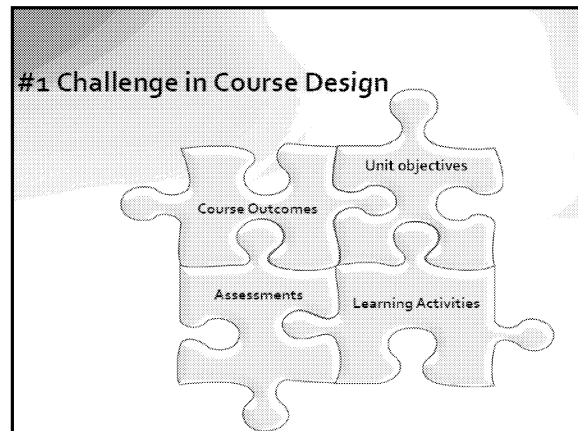
Characteristics of Adult Learners and Curriculum Design

Objective 2
Compare and contrast characteristics of adult learners that
influence approaches to curriculum design and instruction

Principles of adult learning

- Internally motivated and self-directed
- Bring life experiences and knowledge to learning experiences
- Goal oriented
- Relevancy oriented
- Practical
- Like to be respected

Knowles, 1984

Designing Effective Instruction

Objective 3 and 4
Describe strategies for designing effective instruction
Identify strategies and tools to facilitate adult learning

Effective Instructional Material

- Consistent design
  - Supports the outcomes and assessments
- Decreases extraneous cognitive load
  - Eliminates nonessential material
  - Applies appropriate multimedia design
- Improves application and increases transfer
- Promotes relevancy of learning
- Includes scaffolding
- Considers sequence or timing of information

Strategies to Facilitate Adult Learning

- Competency-based
- Student-centered; student-directed
- Flipped classroom
  - Teacher created videos to supplement instructional time
  - Worked examples
- Case scenarios
- Real world projects

Tools to Facilitate Learning

- Screen-cast-o-matic http://screencast-o-matic.com/
  - http://screencast-o-matic.com/watch/cIj33asrg
  - http://screencast-o-matic.com/watch/cIjocjs3D

- Animoto - http://animoto.com/
  - http://animoto.com/play/7UdSo2AI7iuPK6GjokpZkA
  - http://animoto.com/play/xdXRM3oTnPQ4RHhgK99hcw

- Yodio - http://yodio.com
  - http://yodio.com/yo.aspx?cardId=6NLvxhQbqQ6879XRK8dYR3

- Voice Thread – https://voicethread.com/

- Voki – http://voki.com

Reflection and Questions

- List lessons learned
- Ideas to consider
- Strategies and concepts to explore further

Panel Participants:

ANN MARIE P. MAURO, PHD, RN, CNL, CNE
Clinical Associate Professor
New York University

Ann Marie Mauro is clinical associate professor and fellow in the Hartford Institute for Geriatric Nursing at New York University College of Nursing. She is program liaison and principal investigator for the Robert Wood Johnson Foundation/American Association of Colleges of Nursing *New Careers in Nursing* Scholarship Program at NYU. Her baccalaureate degree in nursing and master's degree in nursing education are from Seton Hall University. Her PhD is in Research and Theory Development in Nursing Science from New York University. She is Chairperson of the NYU College of Nursing Curriculum Committee and is Course Coordinator for the Adult and Elder Nursing II and Leadership and Management in Nursing courses. In 2011, she received the inaugural NYU College of Nursing Teaching Excellence Award. She has expertise in curriculum development and simulation learning and has worked with faculty and students at the baccalaureate, master's and doctoral levels. With more than 11 years' experience in higher education, she has held various leadership roles in colleges, universities, professional, and community organizations. She is a certified nurse educator (CNE) and clinical nurse leader (CNL) with expertise in adult health and cardiovascular nursing. Her research focuses on uncertainty, adjustment, and support needs of cardiovascular populations. She has presented her work nationally and internationally and has publications in a variety of scholarly journals, including the *American Journal of Cardiology*, *Archives of Internal Medicine*, *Heart and Lung*, *International Journal of Nursing Studies*, *Journal of Cardiovascular Nursing*, *Nursing Education Perspectives*, *Progress in Cardiovascular Nursing*, and *Teaching and Learning in Nursing*.

Session Overview:

The purpose of this activity is to enable the learner to explore an innovative accelerated nursing curriculum that addresses the unique needs of accelerated nursing students, as well as the dynamic changes in health care environments. The session will also include a description of high quality clinical experiences using simulation.

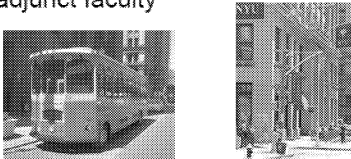## Session Objective:

1. The learner will be able to implement integrative learning strategies that increase accelerated nursing students' critical thinking skills and address the health needs of an aging population in changing health care environments.

KELLIE BRYANT, DNP, WHNP
Director of Simulation Learning and Assistant Clinical Professor
New York University

Kellie Bryant is currently the director of Simulation Learning and assistant clinical professor at NYU College of Nursing where she oversees and coordinates more than 75 simulation sessions a week for both the undergraduate and graduate programs. Her role is to assist faculty in the development, implementation, and integration of simulation activities for undergraduate and graduate nursing students. She has ten years of teaching experience working as an Associate Professor teaching in the undergraduate and graduate programs for SUNY Downstate and Long Island University before coming to NYU. She received her Associate degree in nursing from Hudson Valley Community College. She then continued her education at SUNY Stony Brook where she received her Bachelor in Nursing and Master's Degree as a Women's Health Nurse Practitioner. In 2006 she completed her Doctorate of Nursing Practice (DNP) from Case Western Reserve University. She has recently received her certificate in simulation from Drexel University.

Session Overview:

The purpose of this activity is to enable the learner to explore an innovative accelerated nursing curriculum that addresses the unique needs of accelerated nursing students, as well as the dynamic changes in health care environments, and provides high quality clinical experiences using simulation.

Session Objective:

1. The learner will be able to fully integrate high quality clinical experiences into an accelerated nursing curriculum using an A-B clinical model with 50 percent traditional clinical and 50 percent high fidelity clinical simulation experiences.

SESSION SLIDES FOR ANN MARIE MAURO AND KELLIE BRYANT

NYUNursing

**Exemplars of Curriculum Design:
The NYU Nursing BS Model**

Ann Marie P. Mauro, PhD, RN, CNL, CNE
Clinical Associate Professor
Senior Clinical Faculty Associate,
Hartford Institute for Geriatric Nursing

Kellie D. Bryant, DNP, WHNP-BC
Clinical Assistant Professor
Director of Simulation Learning

RWJF NCIN 2012 National Program Liaisons' Summit 10/12/12

Learning Outcomes

The learner will be able to:
1. Implement integrative learning strategies that increase accelerated nursing students' critical thinking skills & address the health needs of an aging population in changing health care environments.
2. Fully integrate high quality clinical experiences into their accelerated using an A-B clinical model with 50% traditional clinical & 50% high fidelity clinical simulation experiences.

2

Setting

- Urban, research-intensive university
- 960+ students in nursing BS program
- 80% accelerated second degree students
- Approximately 30 full-time BS faculty & 60 BS adjunct faculty

3

Background: Educational Priorities

- Promote critical thinking & contextualize learning (Benner et al., 2010)
- Increase focus BS nursing education & practice on healthy & frail older adult (AACN, 2008, 2010)
- Keep up with changing knowledge & technology to improve outcomes for aging population with complex health needs (IOM, 2010)

4

Background: Simulation Learning

- High fidelity patient simulation provides realistic clinical experiences for students
- Attain cognitive, psychomotor & affective competencies (Mauro, 2009)
- Delivery of quality, safe nursing care for improved patient outcomes (Jeffries, 2007, 2008)
- Safe learning environment without patient risk (Jeffries, 2007, 2008)

5

BS Curriculum Redesign

- A-B Clinical Model (Richardson et al., 2012)
- Enhance integration of geriatric content into BS curriculum (Mauro et al., 2012)
- Develop competencies for patient-centered, evidence-based, culturally competent care for older adults in diverse settings (Mauro et al., 2012)
- Implement innovative, integrative learning strategies to develop clinical decision making skills (Mauro et al., 2012)
- New Genetics & Genomics summer 2012

6

Resources

- Educating Nurses: A Call for Radical Transformation (Benner et al., 2010)
- Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008)
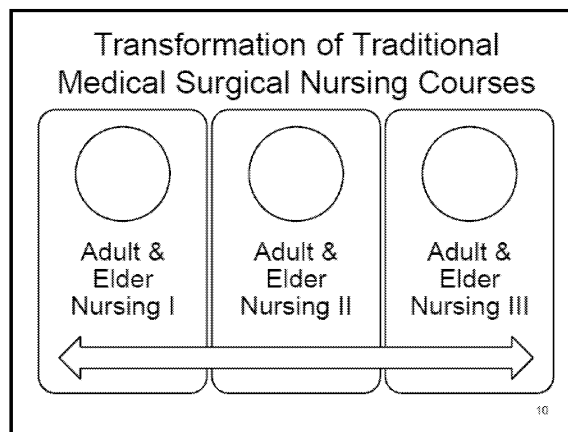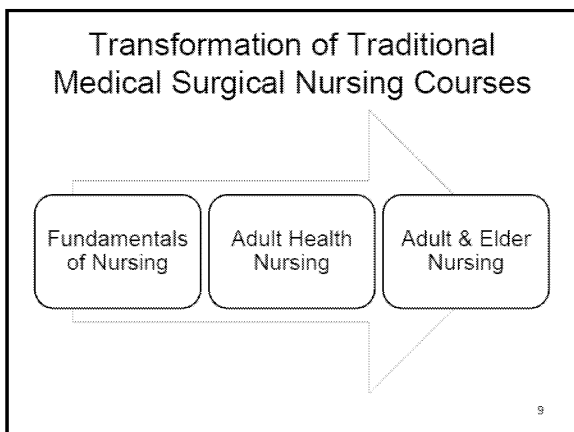- Recommended Baccalaureate Competencies & Curricular Guidelines for Nursing Care of Older Adults (AACN, 2010)

7

Resources

- Quality & safety education for nurses (QSEN) competencies (Cronenwett et al., 2007)
- Purnell's Model for Cultural Competence (2002)
- Healthy People 2020 Objectives (HHS, 2011)

8

Transformation of Traditional Medical Surgical Nursing Courses

| Fundamentals of Nursing | Adult Health Nursing | Adult & Elder Nursing |

9

Transformation of Traditional Medical Surgical Nursing Courses

| Adult & Elder Nursing I | Adult & Elder Nursing II | Adult & Elder Nursing III |

10

Integrative Learning Strategies

- Clinical examples
- Unfolding cases
- Audience response devices (clickers)
- Virtual patients
- Podcasting
- A-B clinical model
  - ➢ 50% traditional clinical experiences
  - ➢ 50% on campus high fidelity simulation
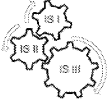
11

Hartford Institute for Geriatric Nursing NYU College of Nursing Try This® Assessment Tools
(http://www.hartfordign.org/Practice/Try_This/ & http://consultgerirn.org/resources)

Try This® Series Title	Description
Fulmer SPICES: An Overall Assessment Tool for Older Adults (Fulmer, 2007)	Assesses common syndromes of the elderly requiring nursing intervention: Sleep Disorders; Problems with Eating or Feeding; Incontinence; Confusion; Evidence of Falls; Skin Breakdown
Katz Index of Independence in Activities of Daily Living (ADL) (Wallace & Shelkey, 2007)	Assesses functional status as a measurement of the client's ability to perform activities of daily living independently
Mental Status Assessment of Older Adults: The Mini-Cog (Doerflinger, 2007)	Tool is composed of three item recall and the Clock Drawing Test; can be used to detect dementia quickly in various settings. Assesses registration, recall and executive function.
The Geriatric Depression Scale (GDS) (Kurlowicz & Greenberg, 2007)	The Short Form GDS consists of 15 questions and was developed from questions on the Long Form GDS.
Predicting Pressure Ulcer Risk (Ayello, 2012)	Discusses Braden Scale for Predicting Pressure Sore Risk in six areas: sensory perception, skin moisture, activity, mobility, nutrition and friction/shear.
Pain Assessment for Older Adults (Flaherty, 2007)	Describes the most commonly used pain intensity scales for older adults: the Numeric Rating Scale (NRS), Verbal Descriptor Scale (VDS) and Faces Pain Scale-Revised (FPS-R).
Fall Risk Assessment for Older Adults: The Hendrich II Fall Risk Model (Gray-Micek, 2007)	Tool is used in the acute care setting to identify adults at risk for falls.
Assessing Nutrition in Older Adults (Amella, 2007)	Discusses the Mini Nutritional Assessment (MNA®) is used to identify older adults (> 65 years) at risk of malnutrition.

12

Integrative Seminars

- Series of 3 sequential seminars
- Taken concurrently with A&E I, II, & III
- 6 faculty led unfolding case studies
- 6 student led cases from actual clinical experiences
- Acute care, sub-acute rehabilitation, long term care, & community settings
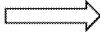
13

Clinical Experiences

14

A-B Clinical Model

Week 1

Group A

Group B

15
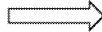
A-B Clinical Model

Week 2

Group A

Group B

16

Student/Faculty Ratios

- A&E I, II, & III, pediatrics, & community
  - 1:6 ratio off-campus
  - 1:12 ratio on-campus
- Leadership & Management
  - 1:5 ratio off-campus
  - 1:10 ratio on-campus
- Maternity
  - 1:8 off-campus
  - 1:8 on-campus

17

Off-Campus Clinicals

- 8 hour clinicals provide diverse clinical experiences ranging from maternity to geriatrics
- NYUCN has affiliations with 100+ outstanding major medical centers & health care facilities
- Include NYU Langone Medical Center; NY Presbyterian; Mt Sinai Hospital; NYC public health facilities; centers for elderly care & community-based agencies
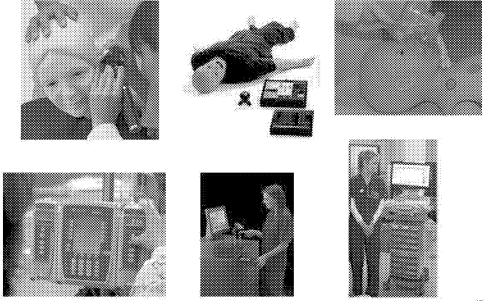
18

Clinical Simulation Learning Center

- 6 rooms

19

Equipment

20

Format of On-Campus Clinical

Preconference
30 minutes

▽

Simulation
90 minutes

▽

Debriefing
60 minutes

21

Scenarios

Adult & Elder II	Adult & Elder III	Leadership & Management
• Orientation • Chest tube • Chest pain • Chronic CHF • GI Bleed • DKA	• Dementia/Sepsis • CVA • COPD • Osteomyelitis • End of life • Chemotherapy complication	• Pediatric asthma • PP hemorrhage • Closed head injury • Acute heart failure • Multiple patients • Acute MI

Low Complexity ────────────────► High Complexity

22

Adult & Elder Nursing Courses

- Off campus clinical
  - A&E I & II: 6 acute care
  - A&E III: 5 acute & 1 sub acute rehab
- On campus clinical
  - A&E I (5 hours) demo skills, practice, & sim

23

Leadership & Management in Nursing Course

- Clinicals focus on leadership concepts:
  - Time management
  - Prioritization
  - Teamwork & collaboration
  - Delegation

24

Maternity Course

- 5 off-campus inpatient clinical days
- 1 on-campus clinical simulation
  - Pre-eclampsia

25

Pediatric Course

- 3 off-campus inpatient clinical days
- 2 off-campus outpatient clinical days
- 1 on-campus clinical simulation
  - RSV & Sickle Cell Anemia

26

Acute Psychiatric Nursing

- 3 consecutive outpatient community clinical days
- 3 consecutive on-campus clinical days
  - Standardized patients played by adjuncts
  - Scenarios: therapeutic communication, depression, anxiety, bipolar, & schizophrenia
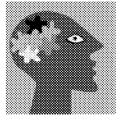
27

Community Nursing

- # of student per groups varies by site, e.g., NYUCN Mobile Health Van, VNS, NORC
- 11 weekly off-campus clinicals
- 1 on-campus simulation
  - Standardized patient played by adjunct faculty member
  - Home care patient recently D/C from hospital with Type I DM & foot ulcer

28

Open Simulation Practice Sessions

- Available every day
- Practice skills
- Mini simulations
- Remediation

29

HARTFORD INSTITUTE FOR GERIATRIC NURSING

Faculty Development

- Workshops & training each semester
- On site & on-line
- Required completion of 2-3 Hartford Institute for Geriatric Nursing on-line education modules
  - How to incorporate older adult care into clinical teaching
- Simulation training
- Site visits & peer evaluation

30

Slide 31 — NYU Nursing — Outcomes

- Positive student feedback
- Positive clinical partners feedback
- NCLEX-RN 1st Time Pass Rate
  - ➤92% to 95%

31

References (Slide 32)

Amella, E. J. (2007). Assessing nutrition in older adults. *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 9). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_9.pdf

American Association of Colleges of Nursing. (2008). *The essentials of baccalaureate education for professional nursing practice.* Washington, DC: Author.

American Association of Colleges of Nursing. (2010). *Recommended baccalaureate competencies and curricular guidelines for the nursing care of older adults. A supplement to the essentials of baccalaureate education for professional nursing practice.* Washington, DC: Author.

Ayello, E. A. (2012). Predicting pressure ulcer risk. *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 5). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_5.pdf

Benner, P., Sutphen, M., Leonard, V., & Day, L. (2010). *Educating nurses: A call for radical transformation.* San Francisco, CA: Jossey-Bass.

Cronenwett, L., Sherwood, G., Barnsteiner, J., Disch, J., Johnson, J., Mitchell, P., Sullivan, D. T., & Warren, J. (2007). Quality and safety education for nurses. *Nursing Outlook, 55*(3), 122-131. doi:10.1016/j.outlook.2007.02.006

Doerflinger, D. M. C. (2007). Mental status assessment of older adults: The Mini-Cog. *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 3). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_3.pdf

32

References (Slide 33)

Fulmer, T., & Wallace, M. (2012). Fulmer SPICES: An overall assessment tool for older adults. *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 1). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_1.pdf

Gray-Miceli, D. (2007). Fall risk assessment for older adults: The Hendrich II Fall Risk Model. *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 8). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_8.pdf
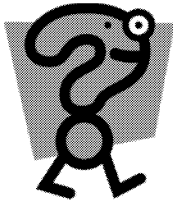
Institute of Medicine. (2010). *A summary of the February 2010 forum on the future of nursing: Education.* Washington, DC: The National Academies Press.

Jeffries, P. R. (2007). Simulation in nursing education: From conceptualization to evaluation. New York, NY: National League for Nursing.

Jeffries, P. (2008). Getting in S.T.E.P with simulations: Simulations take educator preparation. *Nursing Education Perspectives, 29*(2), 70-73. doi:10.1043/1094-2831(2008)29[5:B70%3AQRGISW%5D2.0.CO%3B2

Kurlowicz, L., & Greenberg, S. A. (2007). The Geriatric Depression Scale (GDS). *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 4). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_4.pdf

Mauro A.M.P. (2009). Jumping on the simulation bandwagon: Getting started. *Teaching and Learning in Nursing, 4* (2), 30-33.

Mauro, A.M.P., Hickey, M.T., McCabe, D.E., & Ea, E. (2012, May-June). Attaining baccalaureate competencies for nursing care of older adults through curriculum innovation. *Nursing Education Perspectives, 33*(3), 187-190.

33

References (Slide 34)

Purnell, L. (2002). The Purnell Model for Cultural Competence. *Journal of Transcultural Nursing, 13*(3), 193-196. doi:10.1177/10459602013003006

Richardson, H., Gilmartin, M. J., Fulmer, T. (2012, April). Shifting the clinical teaching paradigm in undergraduate nursing education to address the nursing faculty shortage. *Journal of Nursing Education, 51*(4), 226-231. DOI: 10.3928/01484834-20120210-04

U.S. Department of Health and Human Services. (2011a). *Healthy People 2020 objective topic areas and page numbers.* Retrieved from http://www.healthypeople.gov/2020/topicsobjectives2020/pdfs/HP2020objectives.pdf

Wallace, M., & Shelkey, M. (2007). Katz index of Independence in Activities of Daily Living (ADL). *Try This®: Best Practices in Nursing Care to Older Adults* (Hartford Institute for Geriatric Nursing, New York University, College of Nursing, Issue No. 2). Retrieved from http://consultgerim.org/uploads/File/trythis/try_this_2.pdf

34

Slide 35 — Questions??

35

ELISABETH SHELTON, PHD, RN, CNE, ANEF
Associate Dean for Undergraduate Programs
West Virginia University

Elisabeth N. Shelton, PhD, RN, CNE, ANEF, is associate dean for Undergraduate Programs and an Associate Professor in the School of Nursing. She is a certified nurse educator and a Fellow in the NLN Academy of Nursing Education. She has led curriculum revisions at three institutions for associate, baccalaureate, and master's degree programs, and is an on-site evaluator for the Commission on Collegiate Nursing Education. She teaches courses in nursing education in the MSN and PhD programs at West Virginia University, and has published articles on student retention and faculty support.

Session Overview:

The purpose of this activity is to enable the learner to gain an understanding of different models of curricula that can promote success in an accelerated nursing program.

Session Objective:

1.   Compare and contrast several models of curricula used in accelerated nursing programs.

SESSION SLIDES FOR ELISABETH SHELTON

WEST VIRGINIA UNIVERSITY SCHOOL OF NURSING

BS/BA TO BSN CURRICULUM

BS/BA TO BSN PROGRAM

- ❑ BS/BA to BSN program established in 2001
  - ▪ 8 students
  - ▪ Now approved to admit up to 40 students each year
- ❑ Over 300 students have graduated from the program
- ❑ NCLEX pass rate is 95-100%

STUDENT CHARACTERISTICS

- ❑ 1st generation college students
- ❑ Rural
- ❑ Financially disadvantaged
- ❑ Previous degrees:
  - ▪ Regent degree
  - ▪ Multidisciplinary studies
  - ▪ Social sciences
  - ▪ Exercise physiology

CURRICULUM

- ❑ 5 semesters
- ❑ Accelerated sophomore year
- ❑ Junior and Senior years are the same as basic BSN program
- ❑ Progresses from foundational courses to nursing care across the lifespan to complex systems
- ❑ For courses that have didactic and clinical components, must be successful in both components

---

PREVIOUS BS/BA TO BSN CURRICULUM

Sophomore Summer 1	Basic Concepts didactic	3 credits
	Basic Concepts clinical	3 credits
	Health Assessment	3 credits
		Total 9 credits
Junior 1 Fall or Spring	Adult Health didactic and clinical	3/2 credits
	Mental Health didactic and clinical	3/2 credits
	Pharmacology	3 credits
		Total 13 credits
Junior 2 Fall or Spring	Maternal Child didactic and clinical	2/2 credits
	Pediatrics didactic and clinical	2/2 credits
	Ethics	3 credits
		Total 11 credits
Senior 1 Summer or Fall	Community Health didactic and clinical	3/6 credits
	Intro. to Nursing Research	3 credits
		Total 12 credits
Senior 2 Summer or Fall	Critical Care didactic and clinical	3/1 credits
	Leadership didactic and clinical	2/5 credits
	Preparation for Licensure	1 credit
		Total 12 credits

CURRICULUM REVISION

- ❑ Effective Spring 2012 for BS/BA to BSN program
- ❑ Changed Start Date to January from May
- ❑ Changed Graduation Date to August from December
- ❑ Combined didactic and clinical courses
- ❑ Set progression sequence
- ❑ Increased time for Health Assessment/Communication and Adult Health
- ❑ Decreased time in specialty courses
- ❑ Greater emphasis on leadership
- ❑ Greater emphasis on evidence based reasoning

CORE COMPETENCIES/KEY CONCEPTS

Core Competency	Key Concepts
Critical Thinking	Scholarship Evidence-Based Reasoning
Nursing Interventions	Safety and Quality Patient Care Technology Health Promotion/Disease Prevention Health Restoration and Maintenance
Professional Role	Professionalism Organization and Systems Leadership Health Care Policy, Finance, and Regulation
Caring	Cultural Sensitivity Ethics
Communication	Information Management Professional and Therapeutic Communication

LEADERSHIP AND DIVERSITY KEY CONCEPTS

- Professionalism
- Organization and systems leadership
- Health care policy and regulation
- Professional communication
- Cultural sensitivity

REVISED BS/BA TO BSN CURRICULUM

Sophomore Spring 2012	Health Assessment/Communication Foundations of Nursing Practice Evidence Based Practice & Research	6 credits 6 credits 3 credits Total 15 credits
Junior 1 Summer 2012	Adult Health 1 Women's Health Pharmacology	6 credits 4 credits 3 credits Total 13 credits
Junior 2 Fall 2012	Adult Health 2 Pediatrics Ethics and Health Policy	6 credits 4 credits 3 credits Total 13 credits
Senior 1 Spring 2013	Mental Health Community Health	4 credits 7 credits Total 11 credits
Senior 2 Summer 2013	Critical Care Leadership Preparation for Licensure	4 credits 7 credits 1 credit Total 12 credits

PIP On-line Supplement

Friday, October 12, 2012
11:00 a.m.–12:00 p.m.
Salon B & C

Panel Participants:
LYNDON GODSALL, EDD, EDS, MED, BED
Instructional Designer
University of Miami

Lyndon Godsall graduated from Nova Southeastern University with a terminal degree in Instructional Technology and Distance Education. In 1986 he started working in the Birmingham Public School System UK as a classroom teacher, went on to become a Vice Principal, and eventually entered higher education as a Senior Lecturer in Teacher Education at Bilmingham University UK. He has extensive experience teaching online courses in the fields of Criminal Justice, Graduate Education and Technology. He specializes in working with returning students and mentoring them back into academia. He has authored online academic strategies courses for a number of universities. Most recently he has been working with the School of Nursing and Health Studies at UM as senior instructional designer to project manage the movement of traditional courses to hybrid and online formats.

KENYA SNOWDEN, DNP, ANP-BC, ACNP-BC
Assistant Professor of Clinical/ Faculty/ Program Director RWJF Scholars Program
University of Miami

Kenya Snowden is the program director for the University of Miami's School of Nursing and Health Studies(SONHS) RWJF Scholars Program where she oversees the RWJF PIP, Mentorship and Leadership programs. She is an assistant professor of clinical at University of Miami SONHS teaching in the undergraduate traditional and accelerated BSN nursing programs as well as serving as a faculty advisor to the schools National Student Nurses Association (NSNA).

She is AACN certified adult/acute care nurse practitioner and works part-time as an ACNP for South Miami Hospital, part of Baptist Health Systems of South Florida. She is also working in the areas of obesity management for African Americans and other minorities facing health disparities.

Session Overview:

The purpose of this activity is to enable the learner to plan and implement an online "pre-immersion" preparatory course for use with accelerated baccalaureate students.

Session Objectives:

1. The learner will be able to identify purpose, benefits, and rationale for online pre-immersion course.

2. The learner will understand how to implement the generic online PIP into their current school's curriculum.

*Plenary Session:
PIP On-Line

Kenya Snowden DNP, Adult/ACNP-BC
Lyndon Godsall Ed.D, Ed.S, M.Ed,
University of Miami
School of Nursing and Health Studies

UNIVERSITY OF MIAMI
SCHOOL of NURSING
& HEALTH STUDIES

BSN Accelerated Program

Launched in May 2004, the accelerated BSN program was developed to address our nation's nursing shortage. Applicants to the 12-month, full-time program must hold baccalaureate degrees; however, many also hold graduate degrees and/or have many years of professional experience in health-related or other relevant professions, providing us with a highly diverse and educated applicant pool.

2

Preparation

University of Miami
School of Nursing and Health Studies
Accelerated Option Students Pre-Immersion Course
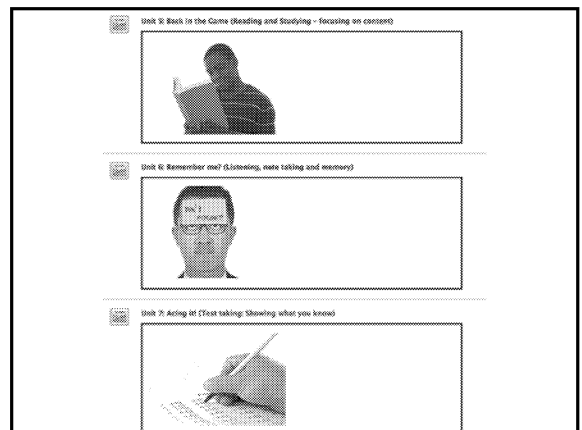
3

Home Page

Robert Wood
Johnson
Pre-Immersion
Program
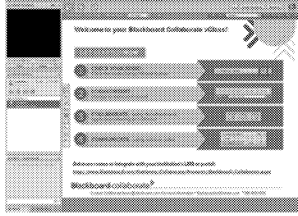
We had regular weekly meetings with the students who were scattered across the country.

Student Feedback

Great way to network

Building Bridges

Felt like we had already begun

Students were already an established group when they arrived on campus. They already knew someone and bonded as a group.
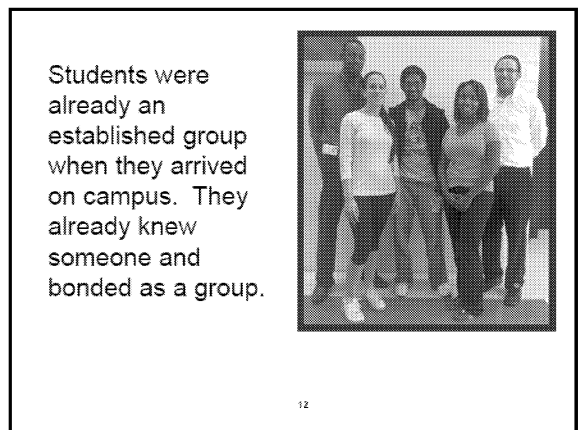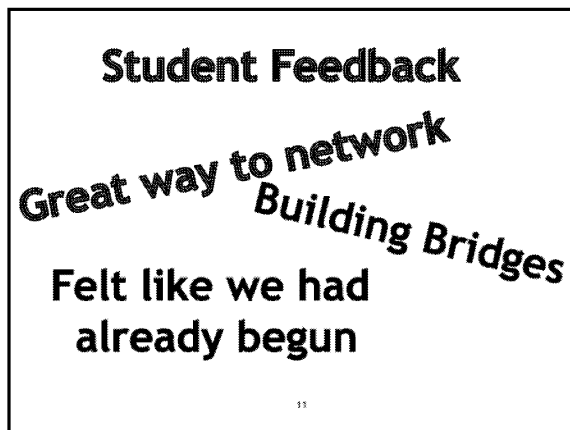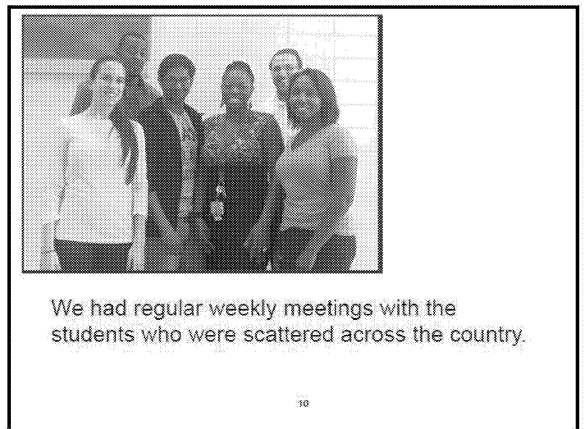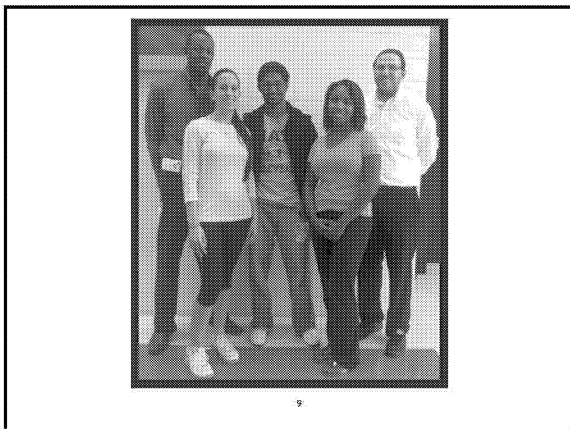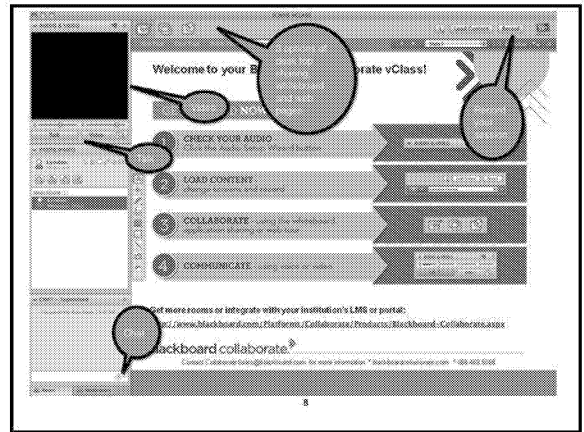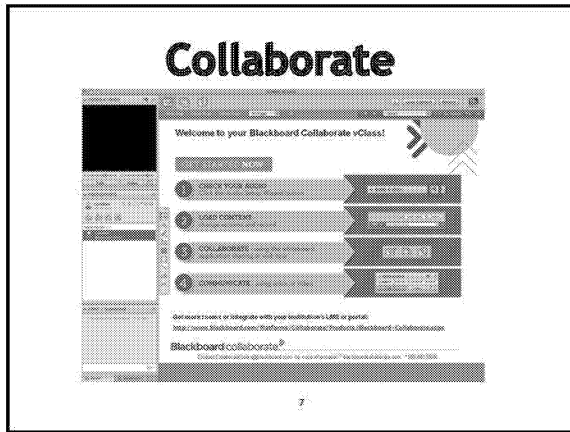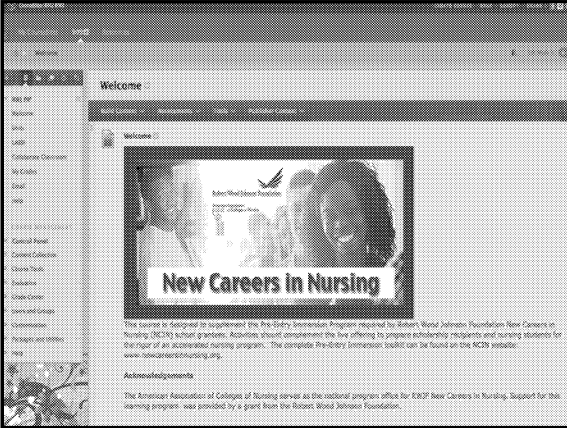
It was very convenient to use Collaborate. Students and faculty were using a range of computers and devices and had no issues with the technology.
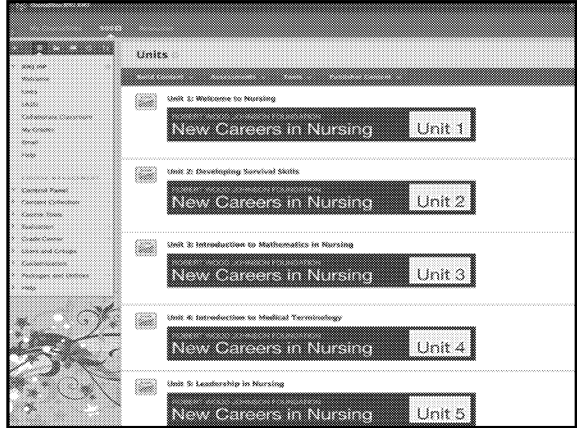
Mentors meet regularly with their mentees and had the option of using Collaborate as an alternative to meeting face to face.
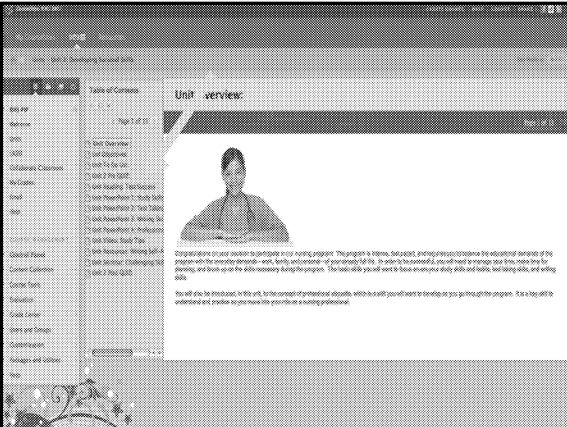
Conclusion

Collaborate and Blackboard has allowed us to do things that were not possible in the past. The technology we have available now allows us to address the U.S. nursing shortage which is projected to reach 260,000 registered nurses by 2025 and will be unrelenting as the aging population is compounded with a shortage in nurse faculty.

Any Questions?
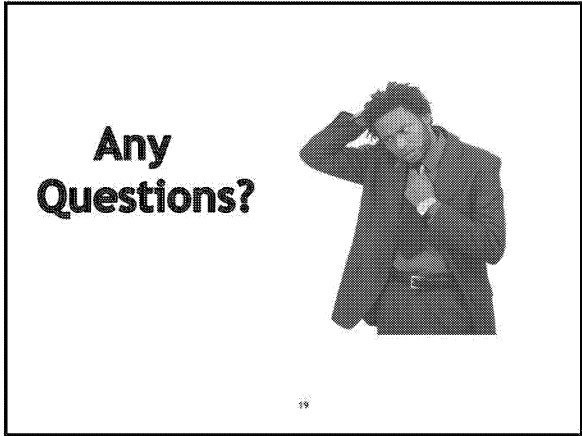
NCIN Scholar Network: Student Panel

Friday, October 12, 2011
1:30–2:30 p.m.
Salon B & C

Co-Facilitators:

AARA AMIDI-NOURI, PHD
Director of Diversity/Assistant Professor
Samuel Merritt University

SUSAN WARD, PHD, RN
Director of Nursing, Special Program
Nebraska Methodist College of Nursing and Allied Health

Session Overview:

The *New Careers in Nursing* Scholars Network was initiated as a result of expressed desire from scholars to promote interconnectivity among RWJF NCIN scholars. During 2011, a steering committee was formed to begin planning for the Network. The first face-to-face meeting of this steering committee was held prior to the Summit. This presentation by scholars will describe their vision for the future of the Network, and goals and objectives, along with the activities they have planned to meet those goals and objectives. The work of the Network is supported by the National Program Office and two faculty advisors who represent NCIN grantees. It is envisioned that this Network will provide a platform for sharing resources and skill sets, allowing the group to advance and focus on a specific cause as a whole.

Session Objectives:

1. Describe the proposed structure of the NCIN Scholars Network.

2. Discuss the benefits of the Network for both students and their nursing programs.

3. Identify roles and responsibilities of NCIN program liaisons in supporting the Network.

Scholar Network Members in Attendance:

Frank Cammarata, ABSN, University of Maryland, Baltimore

Chris Fogarty, ABSN, Kent State University

Cattleya Buranasombati May, AMSN, Boston College

Sue No, ABSN, University of South Florida

Onome Henry Osokpo, ABSN, SUNY Stony Brook University

John Pederzolli, ABSN, Kent State University

Beret Ravenscroft, ABSN, Southern Connecticut State University

Chad Roath, ABSN, University of Detroit Mercy

Blake Smith, ABSN, Nebraska Methodist College

Luis Sanchez, ABSN, New York University

Darlene Lamb, ABSN, Norfolk State University

Natasha Leland, ABSN, Samuel Merritt University

If your students are interested in being members of the
Scholar Network tell them to find us on Facebook! Just search for
NewCareersinNursing.

NCIN Evaluation: Phase II

Friday, October 7, 2011
2:30–3:30 p.m.
Salon B & C

Speaker:

CATHERINE MILLETT, PHD, EDM
Senior Research Scientist
Policy Evaluation and Research Center, Educational Testing Services

Catherine Millett is a senior research scientist in the Policy Evaluation and Research Center at Educational Testing Service. Her research focuses on educational access, student performance and achievement, educational equity, and student financing for various population groups in the United States at the postsecondary educational level.

Millett directs the evaluation of the NCIN program. She co-led the evaluation of the Goldman Sachs Foundation's signature initiative "Developing High-Potential Youth." She is co-author of the book *Three Magic Letters: Getting to Ph.D.* which is based on a research study of more than 9,000 doctoral students at 21 universities.

Millett received her BA degree in economics from Trinity College, Hartford, CT; her Ed.M. in administration planning and social policy from the Harvard Graduate School of Education; and her PhD in public policy in higher education from the University of Michigan. Millett is a member of the Millhill Child and Family Development Corporation Board of Trustees.

Session Overview:

This session will provide the learner with more information about what the NCIN program has accomplished and the evaluation plans for the next two years.

Session Objectives:

1. Know what the NCIN program accomplished in the first four years.

2. Know what the NCIN evaluation activities are for the next two years.

The RWJF New Careers in Nursing Scholarship Program

The ETS Evaluation

2012 NCIN National Program Liaisons Summit
Building on Five Years of Success
American Association of Colleges of Nursing
Washington, DC
October 12, 2012

Catherine M. Millett, Ph.D.

Goals For Our Time Together

1. Review findings from the January 2012 ETS Evaluation Report (Phase I)
2. Describe plans for Phase II of the ETS Evaluation

Part I

THE ETS EVALUATION REPORT

My Charge from RWJF

- *Which* colleges and universities are partners?
- *Who* are the individuals receiving scholarships and the faculty who mentor these students?
- *What* are the desired outcomes of the scholarship program and are they being achieved?
- *What* policies, practices and systems changed at the institutional level because of the NCIN scholarship program and the accelerated degree program?
- *When* is the scholarship most effective? Does it help with recruitment? Is it a more attractive funding resource because it can be used at the students' discretion (timing and purpose)?
- *Where* is the scholarship making a difference?
- *Which* programs are successful in their work with scholarship recipients compared to their work with non-scholarship recipients?
- *What* are the short-term and long-term careers of the graduates of the NCIN Scholarship Program?
- *What* steps have programs taken to secure new scholarship support when the RWJ Foundation NCIN scholarship program comes to an end?

Demand for NCIN Scholarships Continues to Exceed the Supply

- Demand has remained high over the grant period.
- Years 1 and 2 are funded at equivalent levels.
- Years 3, 4, and 5 have been funded at lower levels.

RWFJ Will Have Awarded $27,170,000

- Nursing Schools have requested $95,300,000 for scholarships.

Over 35% of Nursing Schools with Accelerated Programs Apply Annually for a NCIN Grant

- 291 Schools of Nursing offer ABSN and/or AMSN programs.
- Over the span of 5 funding rounds, 216 (70%) of these schools have applied for NCIN funding at least once.

	Round 1 (2008-2009)	Round 2 (2009-2010)	Round 3 (2010-2011)	Round 4 (2011-2012)	Round 5 (2012-2013)
NS Applicants	113	103	124	116	116
NS Grantees	58	52	63	52	55

NCIN Schools of Nursing Profile (n= 119)
Avg. # scholarships = 23, (Max = 68, Min = 5)

- 76% (91) of schools awarded NCIN scholarships to ABSN students, 19% (23) awarded scholarships to AMSN students, and 4% (5) to both ABSN and AMSN students.
- 53% are public universities.
- 53% are Carnegie-classified as research universities.
- 33% are in the South, 29% in the Midwest, 23% in the Northeast, and 15% in the West.
- 75% are in locations characterized as cities.
- 4 schools of nursing are Historically Black Colleges or Universities (HBCUs); 8 are Hispanic Serving Institutions (HSIs).
- NCIN schools of nursing span 41 states and the District of Columbia.

NCIN Student Profile (n= 1,817)

- 61% of NCIN scholars are female.
- 61% are members of under-represented groups.
- 35% are 25-29 years old.
- 30% are married.
- 37% relocate to enroll in their nursing programs.
- 27% have been out of college 3-5 years.
- 46% earned their first bachelor's degree at a selective college or university.
- 30% majored in the physical sciences.
- 63% earned an undergraduate GPA of 3.25 or higher.
- 94% plan to pursue graduate study at entry.

Source: NCIN Entry Survey (respondents in years 1-4).

The NCIN Process

Program Improvement & Development

NCIN – 3 Key Ingredients
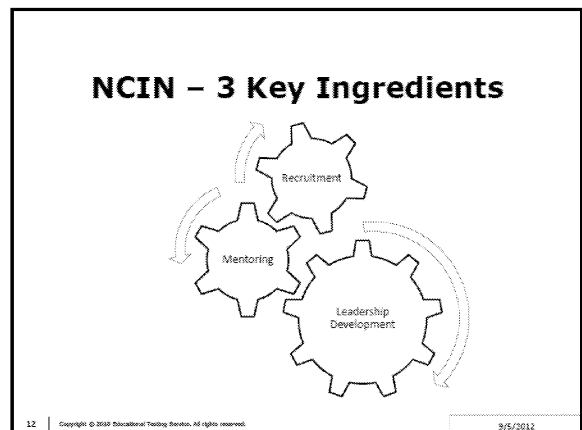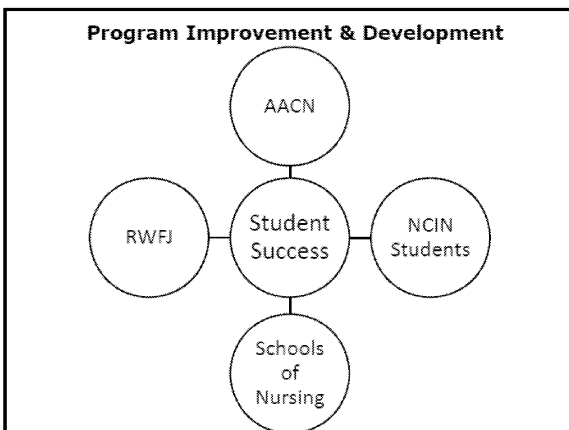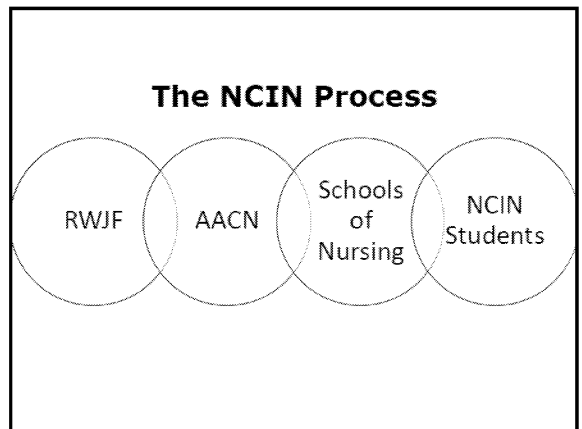
Part II
ETS EVALUATION, PHASE II

9/5/2012

ETS
NCIN Evaluation, Phase II

Teaching & Learning	Alumni	Nursing School Culture
Survey	Survey	Case Studies
NCIN Program Liaisons	NCIN Alumni	School of Nursing Community
Survey in October 2012	Survey in March 2013	Campus Visits in Spring 2013

9/5/2012
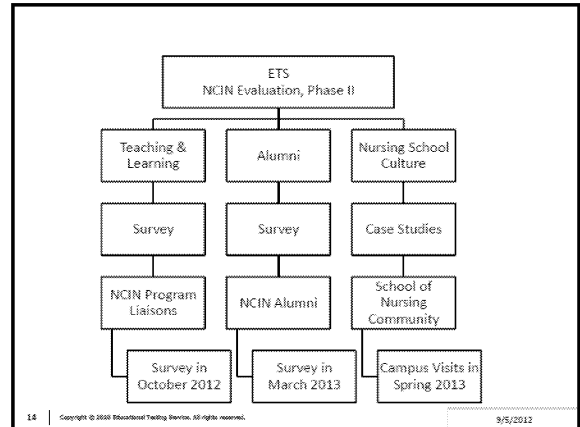
NCIN Evaluation, Phase II
Three Studies

Study #1:
What are the experiences of NCIN alumni in the formative, post-degree years?

Study #2:
How are faculty prepared to teach second-degree students in an accelerated degree program?

Study #3:
How has NCIN influenced the nursing school culture? What has changed at NCIN schools to accommodate diverse, non-traditional students?

9/5/2012

TEACHING AND LEARNING

9/5/2012

Teaching and Learning Study:
Overview

- More research is needed on the teaching and learning practices in accelerated nursing programs to illuminate the strategies, challenges, professional development needs, and promising practices of these growing programs.

- The Teaching & Learning Study builds upon the *Evaluating Innovation in Education 2011 Call for Proposals*.

- Teaching & Learning Survey looks at teaching strategies, curriculum design, program organization and course blending, faculty roles, faculty professional development, and student experiences in accelerated nursing programs.

9/5/2012

Teaching and Learning Study:
Execution

- ETS has developed the Teaching & Learning Survey with valuable contributions from AACN and from nurse leaders from the NCIN Summit Planning Committee who generously volunteered their time.

- The Teaching & Learning Survey will be delivered electronically to Program Liaisons of the approximately 120 NCIN grantee schools of nursing.

- Expect an email on October 23, 2012 with a link to the online survey.

9/5/2012

ALUMNI STUDY

9/5/2012

Alumni Study Overview

- Approximately 1,300 students from underrepresented groups have received NCIN scholarships and are on track to graduate by the end of 2012.
- ETS will survey NCIN alumni about the program's influence on their experiences and aspirations in the formative post-degree years.
- Alumni Survey questions will address:
  1. Reflections on NCIN program
  2. Early career work experiences
  3. Mentoring
  4. Leadership
  5. Educational debt
  6. Post-NCIN education
  7. Personal circumstances

9/5/2012

Alumni Study Execution

- Delivered electronically to scholars from NCIN Rounds 1 & 2 beginning in March 2013.

- Execution Challenges:
  1. Quality of contact information
  2. Alumni motivation to participate (modest incentive of $5 gift card)

- We value your assistance to improve response rates
  - Provide updated email information for alumni
  - Help get the word out that the NCIN alumni survey is coming (outreach strategies, social media, etc.)

9/5/2012

SCHOOL OF NURSING CULTURE

9/5/2012

Case Studies of Culture Change: Overview

- Qualitative analyses from the Phase I evaluation confirm that efforts to support and enhance the success of diverse scholars has also influenced the culture of participating schools of nursing.

- NCIN grantees have evolved to promote more inclusive perspectives and culturally competent skills.

- Case studies will examine program changes, inclusion of diverse perspectives, recruitment strategies, leadership development and mentoring practices, and other student supports in grantee ABSN and/or AMSN programs and in the larger schools of nursing overall.

9/5/2012

Case Studies of Culture Change: Execution

- ETS will conduct on-site case studies of 8-10 schools of nursing, selected in collaboration with RWJF and AACN, between June 2013 and July 2014.

- Schools will be selected to represent a variety of institutional characteristics and experiences with the NCIN program.

- Case study activities will include interviews with faculty, students, nursing administrators, institutional leaders, and other stakeholders such as clinical partners.

9/5/2012

The Lived Experience of Practicing Accelerated Degree Nurses

Friday, October 12, 2012
4:00–5:00 p.m.
Salon B & C

Panel Participants:

LISA HENNESSY, PHD, MSN, RN, CRRN
Clinical Assistant Professor
University of Texas, El Paso

Lisa Hennessy has been a nurse for over 30 years and has spent most of her career in nursing education. She joined the UTEP School of Nursing in 2005 and taught/directed the Fast Track accelerated second degree program until May of 2012. She is currently an assistant clinical professor, teaching in the traditional BSN program at UTEP. She recently completed a PhD in Nursing from New Mexico State University and is presenting the results of her dissertation research at this conference.
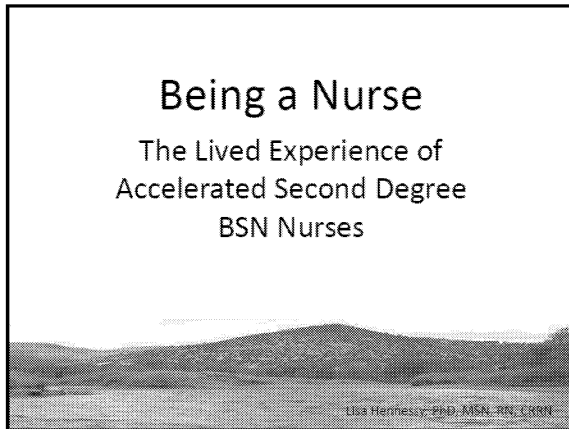
Session Overview:

This session will present findings from an interpretive phenomenological research study aimed at exploring the lived experience of nurses educated in accelerated second degree bachelor of science in nursing (ASD-BSN) programs. The method used to investigate the phenomenon was based on the philosophy of Martin Heidegger, as articulated by Patricia Benner (1994) and Marlene Zichi Cohen, David L. Kahn, and Richard H. Steeves (2000). The sample for this study was purposive in nature and drawn from registered nurses practicing in the southwestern United States who were educated in an ASD-BSN program. The results included the emergence of four major themes and a model of ASD-BSN nursing practice. The themes which emerged were the Headwaters, Tributaries and Turbulence, the Rolling River, and the Delta. This study adds to professional nursing's understanding of how ASD-BSN prepared nurses experience their careers as professional nurses in terms of their motivation to become nurses, how they experience their nursing practice, and how they interact with the nursing profession. Based on this understanding, indications for ASD-BSN education, employment orientation, management, and career progression were identified.

Session Objectives:

1. Review existent nursing literature regarding RNs educated in accelerated second degree bachelor of science in nursing (ASD BSN) programs.

2. Relate the demographic characteristics of the sample which was studied in this research project

3. Discuss the four domains of Hennessy's River System Model of Accelerated Second Degree BSN nursing practice.

4. Identify implications for professional nursing arising from this research, and areas for future nursing research related to accelerated second degree BSN nursing practice.
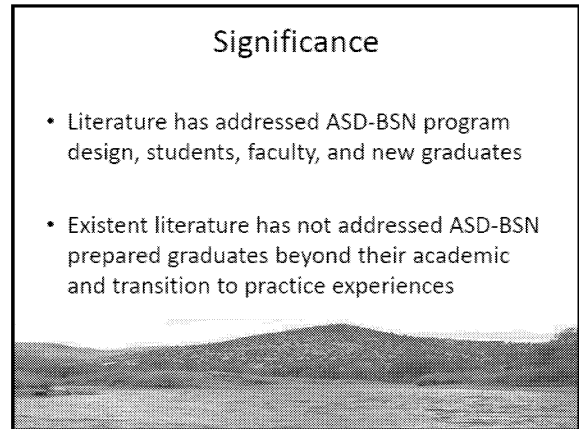
Session slides- LISA HENNESSY,
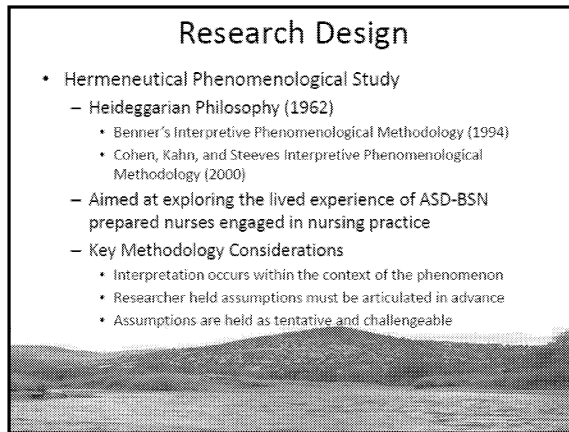
Being a Nurse
The Lived Experience of
Accelerated Second Degree
BSN Nurses

Lisa Hennessy, PhD, MSN, RN, CRRN
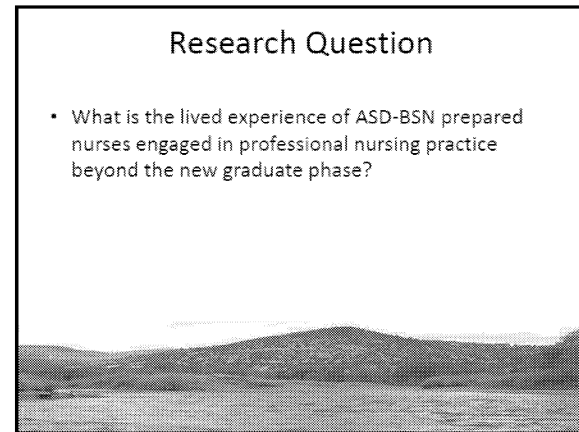
Significance

- Literature has addressed ASD-BSN program design, students, faculty, and new graduates

- Existent literature has not addressed ASD-BSN prepared graduates beyond their academic and transition to practice experiences
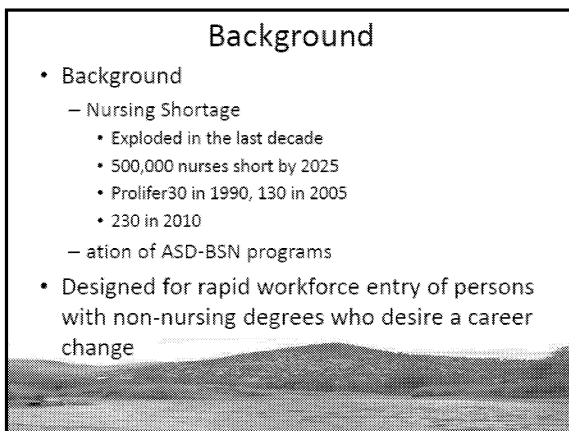
Research Design

- Hermeneutical Phenomenological Study
  - Heideggarian Philosophy (1962)
    - Benner's Interpretive Phenomenological Methodology (1994)
    - Cohen, Kahn, and Steeves Interpretive Phenomenological Methodology (2000)
  - Aimed at exploring the lived experience of ASD-BSN prepared nurses engaged in nursing practice
  - Key Methodology Considerations
    - Interpretation occurs within the context of the phenomenon
    - Researcher held assumptions must be articulated in advance
    - Assumptions are held as tentative and challengeable
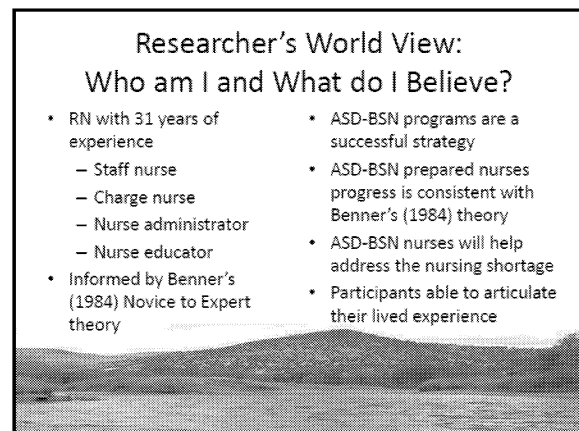
Research Question

- What is the lived experience of ASD-BSN prepared nurses engaged in professional nursing practice beyond the new graduate phase?

Background

- Background
  - Nursing Shortage
    - Exploded in the last decade
    - 500,000 nurses short by 2025
    - Prolifer30 in 1990, 130 in 2005
    - 230 in 2010
  - ation of ASD-BSN programs
- Designed for rapid workforce entry of persons with non-nursing degrees who desire a career change

Researcher's World View:
Who am I and What do I Believe?

- RN with 31 years of experience
  - Staff nurse
  - Charge nurse
  - Nurse administrator
  - Nurse educator
- Informed by Benner's (1984) Novice to Expert theory

- ASD-BSN programs are a successful strategy
- ASD-BSN prepared nurses progress is consistent with Benner's (1984) theory
- ASD-BSN nurses will help address the nursing shortage
- Participants able to articulate their lived experience

Sampling Process

Inclusion Criteria
-Nurses for 2-7 years
*Competent/Proficient
-2 years in first degree field

Exclusion Criteria
-did not do nursing straight from first degree
-did not graduate from my program

- CNO's/Hospitals — 0
- Faculty Colleagues — 1
- Alumni Director — 1
- RWJ Colleague — 4
- Former Program Director
- 1, 1, 2, 3, 1, 2, 3, 1, 2
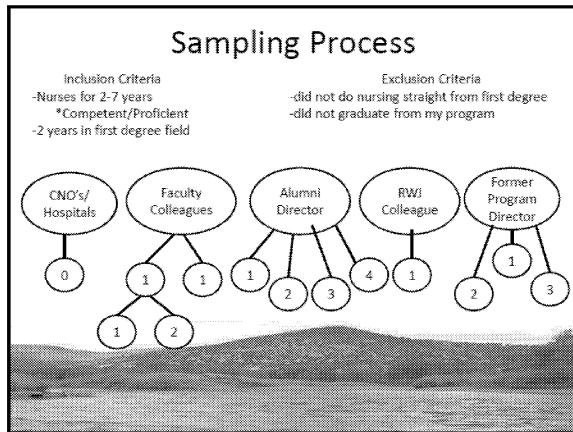
Sample Demographics

- 12 participants
- 5 different ASD-BSN programs
- 7 different communities
- 75% female, 25% male
- Mean age 35
- Mean 8 years experience in first degree field
- Mean 4 years nursing experience

Interview Process

- Informed Consent
- Historical Context Question
  - What brought you to nursing?
- Grand Question
  - You've been a nurse for X years now. Please describe your experience as an ASD-BSN prepared nurse.
- Follow Up Questions/Probes Determined by Conversation
- Final Question
- Interviews lasted 50-90 minutes
- $30 Pre-paid Visa Card

Data Analysis/Saturation

- Listened to interview
  - Within 24-36 hours
- Transcribed interview
  - Preferably before next interview
  - Numbered lines
- Iteratively read transcriptions

- Coded
  - Emergent understandings
- Data Matrix
  - Spreadsheet
  - Cells with line numbers
  - Codes and Participants
- Stories
  - Created narratives

Stories

- **Altruism/Wanting to Help/Spirituality**

I have a history of volunteer work, I've always felt like that was very important. I had gone to Hurricane Katrina with the Red Cross and I worked with the Red Cross in wildfires and various other things but when I went to Katrina, it was such a huge disaster and there was so much of a need, especially for the medical field. [Another thing I did] before I got into nursing was big brothers/big sisters. [I am also] very interested in animal rescue. I have a big history in animal rescue and animal type activities. [I have volunteered with things like] the local humane society, the humane society of the United States, ASPCA. And, when I was working in the English field, I did volunteer service and I taught ESL. [So, I] became very taken with the idea of helping people who were in dire need of any kind of medical assistance. I spent almost a year in the ED [as a student] and I decided that there was a huge need in the mental health field and there are not a lot of people who want to do it.

--Kristin Lines 1, 20-26, 5, 45 and 62-65

Rigor

- Reflexive Journal
  - Notes on process
  - Notes on interviews
  - Preliminary understandings
- Copies of my marked up transcripts
- Serial copies of the data matrix
- Serial copies of the stories
- Audit Trail

Hennessy's River System Model of ASD-BSN Nursing Practice
The Themes and Sub-Themes

Hennessy's River System Model of ASD-BSN Nursing Practice

© Lisa Hennessy, 2012
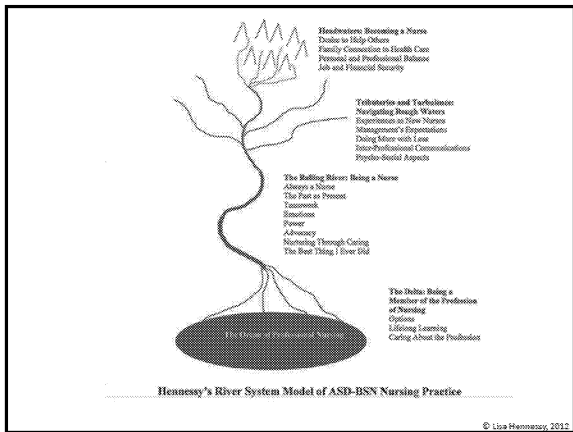
The Paradigm Case of the ASD-BSN Educated Nurse

- ASD-BSN prepared nurses are just that – nurses
- Drawn to nursing and experience nursing in much the same manner as nurses educated in other types of programs
- Are better able to deal with challenges by virtue of their previous careers and professional maturity
- Consider themselves to be members of a honored and trusted profession
- Well socialized into the profession of nursing

Implications

- Nursing Education
  - Programs need to continue
    - Address nursing shortage
    - Provide rapid work-force entry
- Nursing Administration
  - Individualized orientations
    - To capitalize on professional maturity and previous skills sets
    - Don't compromise on the basis of professional maturity
  - Recognize likelihood of rapid professional advancement
- Nursing Practice
  - Track this population of nurses in order to study their impact

Limitations

- My inexperience in phenomenological research

- Qualitative studies lack generalizability

- Solicitation of participants and voluntary participation may have excluded
  - Those who have left nursing
  - Those who are unhappy in nursing

Areas of Future Research

- ASD-BSN nurses' career trajectories, educational accomplishments, longevity in the profession

- Develop/adapt instruments to measure attributes of model
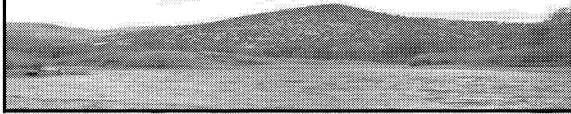
Thank you

Questions????
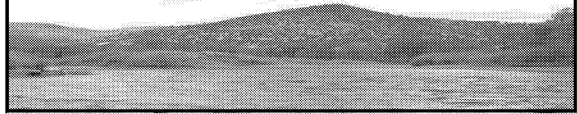
LINDA HONAN PELLICO, PHD, MSN
Associate Professor
Yale University School of Nursing

Linda Honan Pellico is an associate professor in the Yale University School of Nursing and program director of the Graduate Entry Prespecialty in Nursing Program. She has taught in this program since 1989, served as curriculum coordinator, and been a consultant nationally to graduate entry programs in other universities. She obtained her nursing diploma from the Meriden-Wallingford Hospital School of Nursing, a BS in Nursing from Southern Connecticut State University, and her MSN from Yale University School of Nursing as a general surgery Clinical Nurse Specialist. She received her PhD from the University of Connecticut where she studied the experiences of students enrolled in Graduate entry programs. Her research interests are the education of adult learners, creative teaching strategies and narrative inquiry. She is recipient of the Annie W. Goodrich Award from the graduating classes of 1996 and 2005 at Yale University School of Nursing, for Excellence in Teaching, the highest honor a member of the Yale School of Nursing faculty can receive. She was recently honored by the Connecticut Nurses Association with The Josephine S. Dolan Award for Outstanding Contributions to Nursing Education.

Session Overview:

This session will describe the research findings regarding the process of moving from non-nurse to nurse and then to APRN. The presentation will discuss the dearth of research (27 research studies in 45 years), and the near silent voice of students regarding curricular design. Student outcomes such as NCLEX scores, specialty certification exam, and years in practice will challenge the notion that students are not aligning with the nursing profession. The integrative literature review will be supplemented with current and recent research on this specific population. Specific suggestions will include: challenging the notion of pre-requisites, the adherence to "sacred cows" of nursing education such as "doing a year in hospital nursing," and the challenge in finding faculty who are a "good fit" for this specific population of students.

Session Objectives:

1. Discuss research findings on the backgrounds of accelerated advanced-practice students.

2. Identify effective EBP (evidence-based practice) teaching-learning strategies for accelerated advanced-practice students.

3. Examine the research basis for advanced-practice accelerated program curricular revision.

SESSION SLIDES FOR LINDA HONAN PELLICO

What do we know about accelerated advanced practice programs for non-nurse college graduates?

Linda Honan Pellico, PhD, MSN, CNS-BC, RN
Associate Professor, Yale University
School of Nursing

The numbers....
Sui Generis-1974
Six schools in 1980's
12 schools in 1990's
28 schools in 2000
36 with 18 in the planning stages in 2004
68+ in 2012
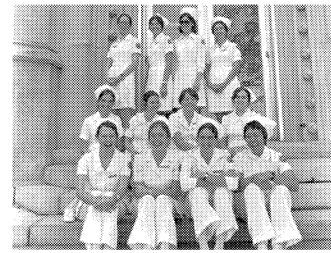
The raw product
Graduate entry students are primarily:
White women, but higher percentages of men are observed when compared to undergraduates rates.
Mean age of these students varied but ranged from 23 to 26.6 years.
Students are young but academically and experientially gifted (well traveled, bilingual, Peace Corps , etc.), highly motivated, self-directed, flexible, assertive, educated individuals who are dedicated to helping people, populations, or systems.
Predominantly single
Graduate entry programs attract students from out of state or from other countries .
Met opposition from family, friends, and counselors when they decided on nursing as a professional goal.
59% needed financing for their education.
GRE scores higher than traditional nursing students, high GPAs
Undergraduate preparation varied across the programs

The journey
The only shared prerequisite was a bachelor's degree, predicated on the notion that college graduates are expected to have achieved a basic level of competency in processes such as analyzing complex material, transferring learning, decision making capability, communicating, and leadership ability
Wide variability existed related to requirements for prerequisite coursework (0-78 credits), but regardless of variability the schools without requirements reported student success
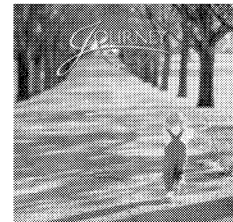
Undergraduate degrees varied- YSN-77% BA; 75% McGill

Class size range from 20 to 84 students annually

Journey continues...
 Faculty list:
Clinical expert
Open
Patient
Sense of humor
Flexible
Challenging and motivating students while supporting them
Communicating a passionate interest in the profession
ready for ?'s, ?'s and more ?'s!

 This is Different!
Students need reassurance
Increased clinical hours added to curriculum
Kinesthetic challenges
Interesting
Want to be treated as colleagues
Need to be stimulated
Want balanced criticism
Demanding
Harsh criticism of faculty
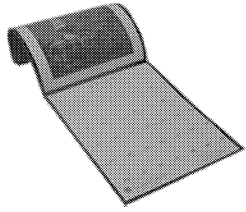
What works?
Case studies
Clinical stories
Clinical immersion
Reflective journaling,
Role-playing seminars
Simulation
Skills laboratory training
Emphasis on research, dialogue, and development of specific materials appropriate for these students
Enduring merit of clinical experiences

Not many years ago I began to play the cello. Most People would say that what I am doing is "learning to play" the cello. But these words carry into our minds the strange idea that there exists two very distinct processes (1) learning to play the cello; and (2) playing the cello. They imply that I will do the first until I have completed it at which point I will stop the first processes and begin the second. In short I will go on "learning to play" until I have "learned to play" and then I will begin to play. Of course, this is nonsense. There are not 2 processes, but one. We learn to do something by doing it. There is no other way.

John Holt

The year!

Six studies
demonstrated at no
differences noted
between Gepn and
traditional RNs at the
one year mark.

Programs...
Admission rates of 31-
41% in the 1980's 14%
in 2011
Full time programs
primarily, one 2 years
and one summer
session
Expensive to run
1:5 clinical faculty
ratio
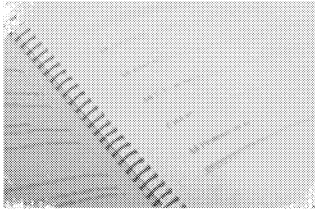
The end product
How do you measure
success?
NLN Test Scores
Mosby Assess Test
RN Licensure
Certification Exams
GPA
Definitions of Nursing
Employee satisfaction

Interesting notions
They defend their choice of nursing as
a career goal
They stay in nursing (97%) compared
to 89% traditional RNs, and have high
career choice satisfaction
5 year career goal pertained to patient
care vs. administration or education
In White et al. (2000)-14% working as
RN's, but 83% did not think it was
necessary
67% first position as NP's compared to
49% of traditional graduate students
60% wanted FNP positions compared
to 30% of traditional graduate
students who sought that option

Rich (2005): significant negative
correlation between years as an RN
and NP skills as evaluated by NP's
collaborating MDS

Questions to consider?
1. Pre-requisites- Can you really "farm
out these courses?" What of the cost in
terms of dollars and time?
2. The Year
3. Issue of increasing the diversity at
Master's level
4. Can they find us?
5. Faculty must be adept at general and
advanced practice nursing- It is a
challenge
6. Dramatic increase in program
development-contemporary pushes to
move nursing to this academic level

The Future of Nursing Campaign for Action: Two Years Later

Saturday, October 13, 2012
7:30–8:50 a.m.
Salon D & E

SUE HASSMILLER, PHD, FAAN, RN
Senior Adviser for Nursing and Director, Future of Nursing: Campaign for Action
Robert Wood Johnson Foundation

Susan Hassmiller, Ph.D., R.N., F.A.A.N., is the Robert Wood Johnson Foundation Senior Adviser for Nursing and Director of Future of Nursing: *Campaign for Action.*

Previously, Hassmiller was with the Health Resources and Services Administration, where she was the executive director of the U.S. Public Health Service Primary Care Policy Fellowship and worked on other national and international primary care initiatives. She also has worked in public health settings at the local and state level, and taught public health nursing at the University of Nebraska and George Mason University in Virginia. Hassmiller is a member and fellow in the American Academy of Nursing and a member of The Joint Commission Nursing Advisory Council and the New York Academy of Medicine. She is also the recipient of numerous awards, including the 2009 Florence Nightingale Medal, the highest international honor given to a nurse by the International Committee of the Red Cross.

Session Overview:

Participants will identify implementation efforts currently in progress and determine how they may contribute to implementation of IOM recommendations within their geographic regions.

Session Objective:

1. Describe major initiatives for implementation of IOM Future of Nursing recommendations.
2. State actions that may be taken by individuals and schools of nursing that will contribute to implementation of described initiatives.

Slide 1

FUTURE OF NURSING™
Campaign for Action

New Careers in Nursing Annual Meeting
October 13, 2012
Susan B Hassmiller, PhD, RN, FAAN, RWJF Senior
Advisor for Nursing and Campaign for Action Director

FUTURE OF NURSING™
Campaign for Action

AARP

Slide 2

Diversity is a Path to Wholeness

FUTURE OF NURSING™
Campaign for Action

Diverse nursing workforce is
crucial to improving:

⟹ access to health care services

⟹ patient quality and care outcomes

⟹ Lowering costs for people who
are uninsured, isolated or
medically vulnerable

NCIN making workforce more diverse and advancing
academic progression

Slide 3

Campaign for Action Pillars

FUTURE OF NURSING™
Campaign for Action

Advancing Education
Transformation

Removing Barriers to
Practice and Care

Nursing Leadership

Interprofessional Collaboration

Diversity

DATA

Slide 4

Success: Education

FUTURE OF NURSING™
Campaign for Action

Magnet Hospitals:

• In 2013, all nurse managers and
nurse leaders will be required to
have BSNs or higher at time of
application
• Need plan showing how to
achieve an 80% workforce by
2020

Slide 5
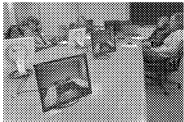
Success: Education

FUTURE OF NURSING™
Campaign for Action

Academic Progression in
Nursing Program

⟹ Nine states selected

⟹ Up to $300,000 over two years

⟹ Use promising models to get
nurses to earn BSN/higher degree

⟹ Diversity requirement part of
selection criteria

Slide 6
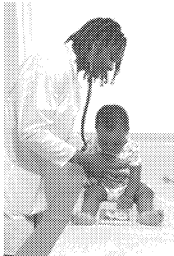
Progress: Practice

FUTURE OF NURSING™
Campaign for Action

Senate Commerce Committee
directed Federal Trade
Commission to review state
practice laws and regulations to
see whether all nurses can
practice to full extent of education
and training

Success: HRSA's Center for IPE and Collaborative Practice

RWJF, Josiah Macy Jr. Foundation, Gordon and Betty Moore Foundation and John A. Hartford Foundation

Mission: accelerate teamwork and collaboration among health professionals

Goal: Go to coordinating and connecting body for efforts to promote IPE and collaborative practice; convene key stakeholders; identify and disseminate best practices and lessons learned; and develop and evaluate IPE programs

Success: Leadership

Leapfrog Group: nurses need to be integrated into governance positions to attain Magnet status

MAGNET RECOGNIZED
AMERICAN NURSES
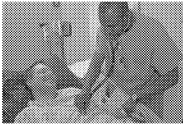
Success: Data

States are collecting, analyzing and publishing nursing workforce data

National Council of State Boards of Nursing and Forum of State Nursing Workforce Centers jointly collecting nursing workforce data

Report to be published next year

Progress: Diversity

⇨ Diversity Steering Committee guiding Campaign

⇨ Nursing *with* diversity, not nursing + diversity

Committee will advise Campaign on:
- Diversity strategies
- National diversity action plan
- Developing targeted TA to states

Success: Strong Infrastructure

⇨ National infrastructure and grassroots organization in 49 states

⇨ Diverse partners, including business, health care organizations, foundations and consumers

Campaign capturing best practices, tracking lessons learned and identifying replicable models

RWJF's State Implementation Program

Goal: Boost statewide commitment toward implementing recommendations while building sustainable infrastructure

Provide grants of up to $150,000 each over two years to ACs to implement up to two priority IOM recommendations

Preference to ACs with diversity plans

Get Involved!

FUTURE OF NURSING™
Campaign for Action

In Your State's Action Coalition

- Need your voices, time and talents to succeed

Go to:
www.thefutureofnursing.org

Get Involved!

FUTURE OF NURSING™
Campaign for Action

– Teach IOM report in your classrooms
– Encourage students to continue their education
– Identify, mentor and encourage talented students to pursue PhDs
– Conduct research to bolster IOM recs
– Make sure your school is fostering IPE
– Integrate leadership and business theory across your curriculum
– Partner with practice

Campaign Resources

FUTURE OF NURSING™
Campaign for Action

Visit us on the Web
http://campaignforaction.org
http://thefutureofnursing.org
http://championnursing.org

Follow us on twitter
www.twitter.com/futureofnursing
http://twitter.com/championnursing

Join us on Facebook
http://facebook.com/futureofnursing
http://www.facebook.com/championnursing

Interprofessional Education in Accelerated Degree Programs

Saturday, October 13, 2012
9:00–9:45 a.m.
Salon B & C

BRENDA K. ZIERLER, PHD, RN, FAAN
Professor, Department of Biobehavioral Nursing and Health Systems
Co-Director Center for Health Sciences Interprofessional Education, Practice and Research
Associate Director- Institute for Simulation and Interprofessional Studies
University of Washington

Brenda Zierler's research explores the relationships between the delivery of health care and outcomes at both the patient and system levels. Her primary appointment is in the School of nursing at the University of Washington, but she holds three adjunct appointments- two in the School of Medicine and one in the School of Public Health. As co-PI of a Macy Foundation-funded study, She leads a group of interprofessional faculty and students in the development of a simulation-based, team training program to improve collaborative interprofessional communication both within teams and with patients. She was the co-planning lead for the Collaborating Across Borders (CAB) Ill meeting in Tucson, Arizona (November 2011) and is a member of the planning committee for the 2013 Collaborating Across Borders Interprofessional meeting in Vancouver, BC. She is the co-director for the UW Center for Health Sciences Interprofessional Education, Practice and Research and associate-director of the UW Institute for Simulation and Interprofessional Studies (ISIS) in the School of Medicine. She is the co-PI of a Josiah Macy Foundation grant focused on faculty development for interprofessional education and collaborative practice. She also leads a HRSA training grant focusing on faculty development in the use of technology across a five-state collaborative. She is a board member of the American Interprofessional Health Collaborative, a member of the IOM Global Forum on Innovation in Health Professional Education, and is on the Advisory Committee for the RWJF *New Careers in Nursing* Program. She was a fellow in the RWJ Nurse Executive Program (2008-2011).

Session Overview:

This session will provide a description of Interprofessional competencies required to practice in an Interprofessional environment. These four competencies, teams and teamwork, communication, role clarity and responsibility, and values and ethics, will be presented with a discussion of effective teaching strategies. The presentation will conclude with a discussion of the challenges and opportunities for teaching these competencies.

Session Objective:

1. Describe interprofessional competencies for team-based care.
2. Identify the barriers to current approaches to teaching interprofessional education to nursing students.
3. Discuss various pedagogical approaches to developing faculty members to be IPE-competent.

SESSION SLIDES FOR BRENDA K. ZIERLER

Interprofessional Education in Accelerated Degree Programs

Brenda Zierler, PhD, RN, FAAN
October 13, 2012

Objectives of Presentation

- Discuss current state of IPE efforts in nursing and health profession education

- Describe the importance of IPE to patient safety, quality improvement, patient-centered and team-delivered care

- Discuss curricular redesigns and pedagogical approaches to implementing IPE competencies in health professions education

- Discuss faculty development needs and provide examples of team-based training

Current State of IPE Efforts

- 2010
  - IOM Report – *The Future of Nursing: Leading Change, Advancing Health*
  - Lancet Commission Report: *Health Professionals for a New Century: Transforming Education to Strengthen Health Systems in an Interdependent World* (Frenk et al., 2010).
- 2011
  - Interprofessional Education Collaborative Expert Panel. *Core competencies for interprofessional collaborative practice: Report of an expert panel.*
- 2012
  - IOM Forum on Innovation in Health Professional Education

EDUCATION OF HEALTH PROFESSIONALS
FOR THE 21ST CENTURY:
A GLOBAL INDEPENDENT COMMISSION

Health professionals for a new century: transforming education to strengthen health systems in an interdependent world (9 reforms)

Julio Frenk*, Lincoln Chen*, Zulfiqar A Bhutta, Jordan Cohen, Nigel Crisp, Timothy Evans, Harvey Fineberg, Patricia Garcia, Yang Ke, Patrick Kelley, Barry Kistnasamy, **Afaf Meleis**, David Naylor, Ariel Pablos-Mendez, Srinath Reddy, Susan Scrimshaw, Jaime Sepulveda, David Serwadda, Huda Zurayk

www.thelancet.com Vol 376 December 4, 2010

Lancet Commission Report – Reforms (IPE)

- Reform #2 - Promotion of interprofessional and transprofessional education that breaks down professional silos

- Reform #9 - Linking together through networks, alliances, and consortia between educational institutions worldwide

www.thelancet.com Vol 376 December 4, 2010

Interprofessional Education (IPE) WHO's Definition

- "When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes."

- WHO Study Group on IPE and Collaborative Practice (2010)

Interprofessional Education Collaborative Expert Panel (2011)

- Four core competency domains
  - Roles/Responsibilities
  - Interprofessional Communication
  - Teams and Teamwork
  - Values/Ethics for Interprofessional Practice

  Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, D.C.: Interprofessional Education Collaborative. (AACN one of the IPEC Members)

The Case for IPE

- Evidence from literature – high functioning teams improve outcomes of care
  - 70% of errors related to poor communication within and across teams
- We educate students in silos with no opportunity to learn and practice collaboratively
- Team-based competencies should be a core goal in health professions education

IPE as an Innovative Tool

- Links the education system and the healthcare delivery system to address the "Triple Aim"
  - To achieve better patient care
  - To achieve better public health
  - To achieve a more efficient and affordable healthcare system

Dose and Timing of IPE

- Students need education and clinical experience specific to their profession
- Students need to establish their individual professional identity
- Students need opportunities to learn and practice as members of interprofessional teams (matched with the right level of students)
- How much and how often should students train together?

Competency: Interprofessional Communication
(Why do we need to communicate effectively?)

JC Sentinel Events- Context Patient Safety Concerns

Root Causes of Sentinel Events
(All categories; 1995-2005)

We need to foster better communication between healthcare professionals as an approach to improving patient safety
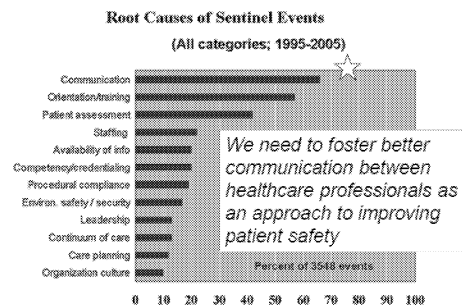
UW Experience with IPE

Specific Examples
Challenges/Opportunities

UW Center for Health Sciences Interprofessional Education, Research and Practice

- This program was formalized as a Center in 2000 with these goals:
  - Pamela Mitchell, PhD, RN (Founding Member)
  - Promote curriculum and clinical innovations in IPE and CP across the HS schools.
  - Provide the infrastructure for catalyzing IP training initiatives and faculty development.
  - Conduct evaluative research regarding the impact of health professions IP innovations on students, faculty, providers and the health of the public.

AIMS of UW Macy Grant

- **Develop** a simulation-based, team training program to improve collaboration and communication
- **Evaluate** the impact of a simulation-based team training program on students' communication skills
- **Develop** faculty to teach/facilitate IPE competencies
- **Disseminate** a validated training program to other health sciences schools by creating an exportable "**Interprofessional Training Toolkit**"
- Co-PIs: B. Zierler (nursing) and B. Ross (medicine)

Building an IPE Program (non-linear)

- Curriculum mapping across 4 health professional schools (opportunities for shared practice)
- Case development (using real, scrubbed cases)
  - 9 faculty, 19 students, 6 staff members
- Faculty Development
  - Role playing, facilitating, providing feedback, small group discussions
- IPE Shadowing experiences for students
- Review of the literature (85 articles) summarizing IPE interventions (scoping exercise)

<u>Components</u> of a Curricular Map

- Competencies/Learning Outcomes
- Timing in the Curriculum
- Expected Pre- and post-requisite knowledge, skills and attitudes (KSAs)
- Learning Format (lecture, small group, OSCE, SP, simulation)
- Assessment Strategies/Performance Measures
- Clinical Topics

Successes from Curricular Mapping

- Learned more about each other's programs of study and scope of practice
- Identified and rectified gaps in the curriculum (TeamSTEPPS, Quality Improvement, ACLS training)
- Identified opportunities for shared learning with case studies (face to face and via technology)
- Identified opportunities for shared learning with simulation (face to face)
- Identified common themes where learning could be shared

Examples from University of WA

- Two types of communication experiences/training
  - ❖ Acute and chronic simulation scenarios
  - ❖ Error disclosure and early apology team training

Competency: Values/Ethics for IP Practice

- Example

Discuss, plan and disclose an error as a member of an interprofessional team

Do we advocate for full disclosure?

What the patient doesn't know won't hurt them...

Teaching Interprofessionalism (IP)

- IP as implicit curriculum
  - Select clinical topic that involves multiple professions for the provision of excellent care
    - End-of-life care
    - Hospice
    - Discharge planning
    - Rehabilitation
    - Error disclosure training
  - Case based learning: one approach
  - Topic as **vector**: alternative approach

Early Apology & Error Disclosure Training

Developed by Sarah Shannon, PhD, RN & Karen McDonough, MD

Vectors: Why Error Disclosure?

Strong Evidence of Disclosure and Reporting Gaps across the Health Professions

- Evidence errors not disclosed to patients
  - UCSF house officer survey – 24% disclosure rate
  - Novack study – 60% disclosure rate
  - Blendon study – 30% disclosure rate

- Evidence errors not reported to institutions
  - Flynn et al., 2004. 457 medication errors generated 1 incident report

Errors have a devastating societal impact

- 7% of hospital patients experience a serious medication error
- 44,000–98,000 annual deaths from medical errors
  - 8th leading cause of death in U.S.
  - Cost: $8–29 billion annually
- More Americans die from medical errors than from breast cancer, AIDS, or car accidents
- 191,000 annual deaths from adverse medical events

Kohn T, et. Al "To Err Is Human" 1999; Health Grades Quality Study 2004

There is a performance gap in how errors are disclosed

- Harmful errors often not disclosed
- When disclosure does take place, often does not meet patient expectations
  - Failed disclosures have substantial impact for patient, healthcare workers, institution
- As we learn more about effective disclosure strategies, need to translate knowledge into practice

Error Disclosure: A team sport!

- Interprofessional education goals:
  - Interprofessional team discusses error in a blame-free and honest manner
  - IP teams plan for error disclosure
  - IP teams disclose errors honestly and compassionately

University of Washington, Seattle
All Health Professions: Error Disclosure Day

- Half day workshop 2012 (3 hours)
  - 210 - Second year medical students
  - 120 - Senior nursing students
  - 86 - Senior pharmacy students
  - 47 - Physician Assistant students
  - Nearly 80 faculty!!!!

Objective: How to disclose health care errors

Hidden curriculum: How to function as an effective member of a health care team

Evaluation: 1-5 scale (strongly disagree to strongly agree)

ITEM	Mean
The general session (didactic) was useful and interesting.	3.66
The small group skills practice was a useful and interesting learning opportunity.	4.50
Learning with other professional students was valuable.	4.69
Thinking about error disclosure from a team perspective was helpful.	4.75
The small group facilitator/s' feedback was helpful.	4.76
I felt I had the opportunity to participate in the small group.	4.72
Overall, the facilitator/s contributed to my overall learning.	4.77

Evaluation: Two open-ended items

1. Please share one thing you learned today that you plan to apply in your future practice

Responses:

104 Positive comments about teamwork

142 Comments about some aspect of content

    46 Importance of planning for disclosing an error

    35 Importance of admitting error, taking responsibility, apologizing

    24 Communication skills with patient

    18 Process: acknowledge patient's emotions

    15 Process: patient understanding of how error happened

    4 Process: need for follow up after initial disclosure

IP: Value of open discussion of errors

Working together with other professionals to understand how to go about very difficult situations. Great practice admitting mistakes that were made!

Team huddle before group error disclosures is very important!

Importance of team discussion prior to error disclosure is imperative. I found this vital to future practice.

IP: Individual responsibility and teamwork (IPE Competencies)

I learned that all health professions feel equally responsible for error.

It was great to see each team member possessing a sense of responsibility. I will continue to carry that throughout my career.

Get support; work as a team.

The importance of team vs. individual accountability.

Other IPE Topics (Vectors)

- Team Communication
- Ethics
- Palliative care
- Current Topics (e.g. Health System Reform)
- Geriatrics
- Global Health
- Health Disparities
- Primary Prevention Strategies
- Chronic Disease Management
- Professional Roles, Responsibility and Values
- Health Care Leadership

2012 All Health Professions Error Disclosure Day (~500 students; 90 faculty)

Using Simulation to Teach IPE & IPC

- High technology
  - Human patient simulators
  - Task trainer
  - Computers
- Low technology
  - Standardized patients
  - Web-based
  - Faculty/student actors
- High Fidelity (always)

High Technology, high fidelity simulation lab
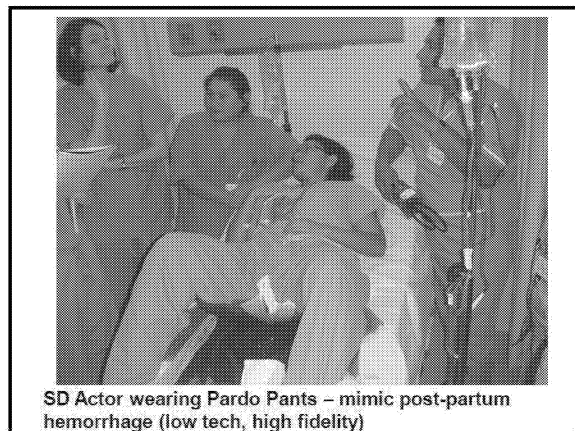
SD Actor wearing Pardo Pants – mimic post-partum hemorrhage (low tech, high fidelity)

Standardized patient actor w/ Congestive Heart Failure
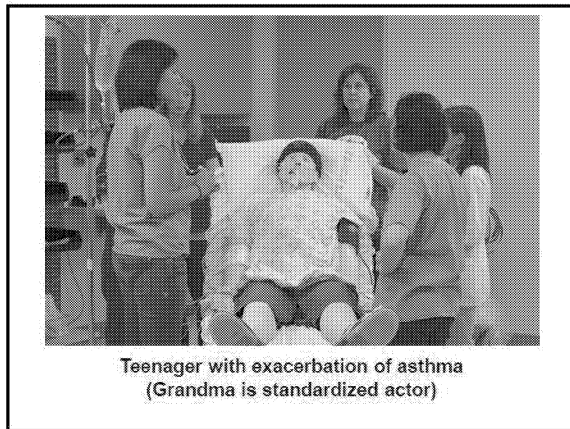
Teenager with exacerbation of asthma
(Grandma is standardized actor)

All Health Professions:
Acute Care Simulations (May 2012)

- 306 interprofessional students and (nursing, medicine, pharmacy, PA students); 48 faculty
- Scenarios: 5 distinct cases at 2 medical centers over 4 full days (each student participates/observes 3 cases)
  - Congestive heart failure (standardized actor)
  - Asthma (simulator and standardized actor)
  - Supraventricular tachycardia (simulator and standardized actor)
  - Post-partum hemorrhage (standardized actor/sim baby)
  - Pediatric cases (simulator) severe asthma, seizures, sepsis

Competency: Teams and Team Work

W
UNIVERSITY of
WASHINGTON

- **Framework– TeamSTEPPS**
- Interprofessional collaboration and communication → effective teamwork:
  - Communication
  - Leadership
  - Mutual support
  - Situational monitoring
  - Team structure

TeamSTEPPS: http://teamstepps.ahrq.gov/

4-Hour Simulation Curriculum (annual event)

- Ice breaker and team-building exercises
- Brief overview of TeamSTEPPS/patient safety data
- Break into small groups (3 simulated cases per group – observer/participant)
- Introduction to environment (simulator, actors, supplies/lab results)
- Clinical management
- Run scenario
- Debrief
- Large Group Wrap-up ("How did that go?")

TeamSTEPPS:
Framework for Communication

100 Level	200 Level	300 Level
Brief	Huddle	Debrief
Call-Out	Sharing the Plan	Advocate & Assert
Check-Back		CUS
SBAR	Cross Monitoring	Two-Challenge Rule
Handoff	STEP	Feedback
		DESC Script
		Collaboration

Assessment
Acute Care Scenarios

- Piloting Assessment & Evaluation tools
- Faculty and student <u>observers</u> scored teamwork and communication competencies during training
- Student participants scored their team and communication skills
- Videos of scenarios (for future video-coding)
- Psychometrics of tool (validity/reliability)
  - Assessment team (6 faculty and 2 doctoral students)

Assessment of Acute Scenarios

Overall			Dyspnea Scenario		Tachycardia		Asthma	
This workshop was useful & practical	I learned new skills	I was sufficiently oriented to the manikins and equipment	Appropriate to my level of training	Faculty were excellent	Appropriate to my level of training	Faculty were excellent	Appropriate to my level of training	Faculty were excellent
4.66	4.71	4.52	4.82	4.79	4.54	4.57	4.79	4.82
4.67	4.74	4.68	4.70	4.83	4.65	4.76	4.75	4.79
4.50	4.44	4.33	4.35	4.60	4.35	4.75	4.29	4.69
4.56	4.50	4.44	4.66	4.75	4.56	4.76	4.64	4.75
4.60	4.57	4.49	4.63	4.74	4.53	4.74	4.61	4.76

Developing Faculty

- Effective interprofessional teaching is an art form and requires the right aptitudes, attitudes, attention to relevance to the entire group, and free of discipline bias – thus, faculty development will be a key to success

Developing Faculty

- Lessons learned early on

  - Socialization, culture, perspective – learned early in uni-profession education

  - Role models for students

  - Building capacity of IPE experts

  - The future of IPE in nursing is dependent upon faculty (and faculty need to be developed to think and teach differently)

Phases in Developing Faculty to Participate in and Lead Interprofessional Education

Engagement ⇒ Training to Facilitate IP Learning ⇒ Mentoring for IPE Leadership

---

Preparing Faculty to Lead IPE Experiences

- Faculty helping to design or lead IPE experiences need to know what works (and doesn't work)
- Thistelthwaite & Nisbet (partial listing)
  - Clear learning outcomes
  - Planned involvement of professions
  - Linking content to clinical experience
  - Making the experience interactive
  - Building in time for reflection
  - Planning formative or summative assessment
  - Creating sustainability

Thistlethwaite J and Nisbet G. Interprofessional education: What's the point and where we're at... *The Clin Teacher* 2007; 4:67-72.

What are the simple rules for faculty development?

- Integrate efforts into real work in which the faculty member is engaged
- Use active learning
- Spend time building relationships
- Track and use a few meaningful outcomes
- Align incentives
- Celebrate and spread successes; learn from failures

New Initiative – IPE Teaching Scholars

- Josiah Macy Grant – Faculty Development "Interprofessional Team-Based Care"
- 4-day (hands-on experiential learning)
- Leslie Hall, MD & Brenda Zierler PhD, RN (co-PIs)
- 22 faculty members
  - Universities of Virginia, North Dakota, Kentucky, Missouri School of Medicine, University of Missouri-Kansas City, Indiana University School of Medicine, Columbia University School of Nursing, and the Medical School of South Carolina
  - 5 UW faculty members - Veteran's Affairs Puget Sound Health Care System
  - 8 UW faculty members & 4 graduate students

Faculty Development: Interprofessional Team-Based Care - 2012

Challenges

Challenges

- **Logistics - infrastructure**
  - Timing of interprofessional experiences
  - Shared space for active learning (simulation lab)
  - Scheduling & academic calendars
  - Scalability , sustainability, costs
- **Faculty**
  - Changing culture
  - Creating IP learning opportunities (teaching in different ways)
  - Mentoring and modeling effective communication
  - Getting clinical educators to publish
- **Students**
  - Understanding team (IPE) competencies
  - Observing faculty (role models)
  - Complexity of cases
  - Demanding "active learning" (driving IPE)

OPPORTUNITIES

Collaborative Practice

- Healthcare System (UW Medicine)
  - TeamSTEPPS Enterprise (6 units at 2 hospitals); 127 staff trained
  - Patient Safety Officers (Master Trainers)
  - One of 5 national TeamSTEPPS centers (focus on simulation)
- VA grant- Primary Care Center of Excellence
  - Residencies for DNP/internal medicine residents (teamlet)
- Community partners – established regional simulation collaborative -78 members representing 35 sites
- Use of TeamSTEPPS in mock code and other simulation training activities (in-situ)
- Train-the Trainer: IPE Faculty Development Institute (2012)

Health Professionals - Students

- **IPE Training**
  - Integrated active team-training simulations into existing courses
  - Shadowing experiences with different professions
  - Active IHI Open School Chapter
  - Service Learning (students won Project Chance - $20K)
- **IPE Evaluation projects (thesis/dissertation)**
  - Tool development (reliability and validity) 60 hours of video
  - Pre/post assessment knowledge & attitudes – IPE
  - Faculty and peer review (real-time) of communication training

Health Professionals - Faculty

- **Faculty Development**
  - IPE Workshops/consultants
  - 4 faculty members certified as IPE facilitators
  - IPE Teaching Scholars
- **Products**
  - Faculty teaching guides & scenario templates
  - Piloting OB scenario in Mexico & Nairobi (Drs. Dylis Walker & Leslie Carranza)
  - Interprofessional training toolkit (website)

collaborate.uw.edu

- Interprofessional Training Toolkit (Website)

SUMMARY

- **Simulation-based team training to date**
  - ~1000 students & 103 faculty trained
  - **Error disclosure training**
  - >1000 students and 90 faculty trained
- **Faculty Development (academic/clinical)**
- **Validating assessment tools for evaluating IPE**
- **Dissemination of training/products**
- **Future initiatives – IPE Teaching Scholars, UW IPE Faculty Development Institute, Faculty Development: Interprofessional Team-based Care**

ACKNOWLEGMENTS

- Paul Ramsey, MD & Nancy Woods, PhD, RN, FAAN
- Pamela Mitchell, PhD, RN, FAAN – early adopter
- Dr. Carlos Pellegrini, Executive Director of Institute for Simulation and Interprofessional Studies (ISIS)
- RWJF – Nurse Executive Fellowship
  - Boeing Mentors – Mr. Jim Bouey & Mr. Steve Atkins
- Dr. George Thibault & the Josiah Macy Foundation

UW MACY TEAM

*Debra Liner, BA	Sharon Wilson, FNP
Peggy Odegard, PharmD	Leslie Carranza, MD
Sarah Shannon, PhD, RN	Thomas Gallagher, MD
Linda Vorvick, MD (PA program)	Karen McDonough, MD
Nanci Murphy, PharmD	Lynne Robins, PhD
Mayumi Willdergodt, PhD, RN	Doug Brock, PhD
Chia-Ju Chiu, PhD student (nursing)	Dana Hammer, PhD
Erin Abu-Rish, PhD student (nursing)	Daniel Low, MD
Elizabeth & Emily Malik (grad students)	Katherine Blondon, MD
Megan Sherman, Farrah Leland, Elizabeth Buttrick & ISIS Simulation Techs	Ken Plitt, CRNA

UW Center for Health Sciences Interprofessional Education, Practice & Research

Breakout Session One
Diversity Recruitment

Saturday, October 13, 2012
10:30–11:45 a.m.
Salon 1

Discussion Leaders:

CHRISTINE DOWNING, MA
Research Assistant
New Careers in Nursing
and
TERI MURRAY, PHD, APHN-BC, RN, FAAN
Dean, School of Nursing
Saint Louis University

Christine Downing has been the research assistant for the *New Careers in Nursing* Scholarship Program for two years. She helps to ensure that all scholarships awarded go to students who are underrepresented in nursing or who are economically disadvantaged. She has also played a crucial role in the development and continuity of the Recruitment Toolkit. With a master's degree in Applied Sociology from the University of Maryland, Baltimore County, she is well equipped to identify and discuss the challenges of recruiting diverse students as well as the best strategies to increase a diverse student enrollment.

Teri Murray is a graduate of Saint Louis University where she is currently the dean of the School of Nursing. She is a Robert Wood Johnson Executive Nurse Fellow alumna. Her Robert Wood Johnson Leadership project focused on *Transforming Baccalaureate Nursing Education through Inter-professional and Inter-institutional Partnerships and Identifying Innovative Partnerships in Clinical Education*. Her work continues to focus on the influence of the various educational pedagogies used in clinical education to promote student learning; facilitate transition to the practice arena; and provide safe, patient-centered, evidence-base care, such that the health status of individuals, families, communities, and populations is improved and enhanced. She has been the recipient of many grants and served as a grant reviewer for the U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, Division of Nursing. She has presented nationally and authored or co-authored numerous publications, including a paper in the landmark report, *The Future of Nursing, Leading Change, Advancing Health*. She is a reviewer for several refereed nursing journals and serves on the editorial board for the *Journal of Nursing Education*.

Overview:

The purpose of this activity is to provide a roadmap and practical strategies to be used to increase the recruitment of diverse students.

At the conclusion of the breakout sessions, the facilitators will summarize group discussion and provide an opportunity for all participants to engage in a question and answer session.

Objectives:

1. Define target audiences and methods to promote a recruitment program.
2. Develop an effective public relations outreach plan.
3. Identify potential groups and organizations with intersecting missions and access to target audiences.

Breakout Session Two
Curriculum Re-design in Accelerated Degree Programs

Saturday, October 13, 2012
10:30–11:45 a.m.
Salon 2

Discussion Leader:

ANN MARIE P. MAURO, PHD, RN, CNL, CNE
Clinical Associate Professor
New York University

Ann Marie Mauro is clinical associate professor and senior clinical faculty associate in the Hartford Institute for Geriatric Nursing at New York University College of Nursing. She is program liaison and principal investigator for the Robert Wood Johnson Foundation/American Association of Colleges of Nursing *New Careers in Nursing* Scholarship Program at NYU. Her baccalaureate degree in nursing and master's degree in nursing education are from Seton Hall University. Her PhD is in Research and Theory Development in Nursing Science from New York University. Mauro is chairperson of the NYU College of Nursing Curriculum Committee and is course coordinator for the Adult and Elder Nursing II and Leadership and Management in Nursing courses. She has expertise in curriculum development and simulation learning and has worked with faculty and students at the baccalaureate, master's and doctoral levels. With more than 11 years experience in higher education, she has held various leadership roles in colleges, universities, professional, and community organizations. She is a certified nurse educator (CNE) and clinical nurse leader (CNL) with expertise in adult health and cardiovascular nursing. Her research focuses on uncertainty, adjustment, and support needs of cardiovascular populations. She has presented her work nationally and internationally and has publications in a variety of scholarly journals, including the *American Journal of Cardiology*, *Archives of Internal Medicine*, *Heart and Lung*, *International Journal of Nursing Studies*, *Journal of Cardiovascular Nursing*, *Nursing Education Perspectives*, *Progress in Cardiovascular Nursing*, and *Teaching and Learning in Nursing*.

Overview:

The purpose of this activity is to enable the learner to develop innovative accelerated nursing curricula that address the unique needs of entry level, accelerated BS and MS nursing students; meet the health needs of an aging population in changing health care environments; and provide high quality clinical experiences.

Curriculum re-design will focus on various pedagogical approaches to designing programs for accelerated nursing education.

At the conclusion of the breakout sessions, the facilitators will summarize group discussion and provide an opportunity for all participants to engage in a question and answer session.

Objectives:

1. The learner will be able to design innovative nursing curriculum models to meet the unique needs of entry level, accelerated BS and MS students in order to meet the health needs of an aging population in changing health care environments.
2. The learner will be able to implement integrative learning strategies and clinical models that increase entry level, accelerated BS and MS nursing students' critical thinking skills and address the health needs of an aging population in changing health care environments.

Breakout Session Three
Strategies for Work/Life Balance

Saturday, October 13, 2012
10:30–11:45 a.m.
Salon 3

Discussion Leader:

TRACY MOTTER, RN, MSN,
Senior Undergraduate Program Director
Kent State University

As a practicing nurse and educator for over 25 years, Tracy has experienced the positive life fulfilling emotional affirmations that occur after patient/family interactions. Unfortunately, the accumulation of emotional experiences can result in compassion fatigue that affects the nurse, the quality of the nurse's life, and the outcome of the patient experience. As a faculty member she has recognized the increasingly more complex lives nursing students have and how their personal stress levels have increased, especially in accelerated programs. This presentation will include current research and tools to help students and nurses develop resilience to stress or compassion fatigue.

Overview:

Sustaining work/life balance will offer guidance and techniques to manage the demands of administering programs and teaching accelerated degree students.

At the conclusion of the breakout sessions, the facilitators will summarize group discussion and provide an opportunity for all participants to engage in a question and answer session.

Objectives:

1. Define compassion fatigue and nursing student stressors.
2. Describe the importance of self-care for the individual and the patient.
3. Demonstrate use of a self-care App, one of the self-care modalities.

Breakout Session Four
Moving Accelerated Degree Students Forward to Doctoral Education

Saturday, October 13, 2012
10:30–11:45 a.m.
Salon A

Discussion Leader:

PATTY COWAN, PHD, RN,
Associate Dean for Academic Affairs and Director, PhD in nursing program
University of Tennessee Health Science Center

Patricia Cowan has been the NCIN program coordinator for four years at the University of TN Health Science Center. She has been a nurse educator for 25 years. She is director of the PhD in Nursing program in the College of Graduate Health Sciences and recently assumed the position of associate dean for Academic Affairs in the College of Nursing.

Overview:

The purpose of this activity is to enable the learner to develop strategies to increase doctoral program enrollment of underrepresented groups completing accelerated nursing programs.

Moving accelerated degree students forward, participants will share approaches that have been successful in advancing students to doctoral study.

At the conclusion of the breakout sessions, the facilitators will summarize group discussion and provide an opportunity for all participants to engage in a question and answer session.

Objectives:

1. Describe barriers to applying to doctoral programs that students from accelerated BSN and entry-MSN programs face.
2. Identify two strategies to facilitate accelerated degree students applying to doctoral programs.

Poster Abstracts

Salon D & E
Voting closes at 6:00 p.m.
Friday, October 12, 2012

Overview:

The poster session will provide an opportunity for conference attendees to learn about innovative work in progress and to preview late-breaking research results. These abstracts summarize the creative approaches to preparing accelerated degree nursing students for their programs.

Categories for poster exhibits are:

1. Cultural competence initiatives;

2. Hot topics (amazing in-progress projects such as challenges faced, unexpected accomplishments/successes);

3. Innovative program design for accelerated students;

4. Leadership development activities for accelerated students;

5. Evaluation of accelerated programs;

6. Successful mentoring programs; and

7. Successful recruitment and retention strategies to yield/ retain ethnically diverse or underrepresented students.

Poster Competition:

Conference attendees are asked to complete a score sheet identifying the posters that they feel best exemplify innovation in each category.

The following abstracts are listed alphabetically by title name. Please note that their location is listed so that you can better find them around the Salon.

The deadline for submitting score sheets is Friday, October 12 at 6:00p.m.

"Speed Dating" To Facilitate Near Peer Mentoring Among NCIN Scholar

Category: SUCCESSFUL MENTORING PROGRAMS
Location: 17

Background Statement: The University of Rochester School of Nursing (URSON) has been fortunate to receive scholarship awards through the NCIN program since its inception. With each round of funding, we have continued to enhance our mentoring program. All scholars receive a one-on-one faculty mentor, selected from a list of faculty with specialized mentorship training, as support during their program of study. Through our Center for Academic and Professional Success, one of our Round 2 scholar graduates was hired as a near-peer mentor for all of our APNN students. With the success of this near-peer mentoring relationship model, the URSON further enhanced their mentoring program during the Round 4 funding cycle. Our NCIN recipients are diverse and well-educated, and many have previous leadership experiences. We believe these unique attributes of these RWJF scholars allows them to build on previous leadership achievements and mentoring experiences to significantly impact the profession of nursing. We developed a program to facilitate the formation of mentoring relationships among past and present NCIN scholarship recipients by enlisting the support of our NCIN scholar graduates as near-peer mentors for current NCIN scholars.

Statement of Purpose: The purpose of this "speed dating" program was to provide a formalized structure to encourage the formation of near-peer mentoring relationships between past and present RWJF scholarship recipients.

Methods: All current and past NCIN scholarship recipients in the Rochester area were invited to a focus group session to discuss mentoring, transitions to practice, and how best to engage and help other NCIN scholars in this transition. Two themes emerged: 1) the need to develop a local NCIN scholar database for all recipients; and 2) the desire for NCIN scholar graduates to formulate near-peer mentoring relationships with current NCIN student scholars. Following this focus group, a subsequent meeting was held with the purpose of establishing the near-peer mentoring program. The "Speed Matching Exercise" described in The Mentoring Program Toolkit (RWJ/AACN, 2011) was utilized as the basis for program development.

Results: Seventeen NCIN scholar recipients attended the "Speed Dating" event. Questions tailored for this event were provided to each participant using a "speed dating" format. Evaluation data following the program was overwhelmingly positive in terms of introducing participants to each other and creating mentoring connections. The next phase of the near-peer mentoring program is currently under development.

Authors: Patrick Hopkins, DNP, C-PNP, C-NNP; William Clark, EdD, RN; Round One Scholar Recipient
Nursing School: University of Rochester School of Nursing

Alumni Nurse Mentors: An Innovative Program for Underrepresented Accelerated Nursing Students

Category: SUCCESSFUL MENTORING PROGRAMS
Location: 18

Background Statement: Studies reveal that underrepresented students in predominantly white institutions are vulnerable to alienation and ethnic isolation, which increases the likelihood of attrition. Moreover, the first few weeks of college are critical times for students in developing friendships and academic and social support systems. In nursing schools, attrition of underrepresented students is of great concern. Mentoring of students has been identified as one of the key components of successful retention. The rigorous pace of the accelerated nursing program is a barrier to formal and informal mentoring often found in traditional Bachelor of Science Nursing programs. In the past, mentorship at Samuel Merritt University's remote campuses has proven challenging, and those scholars have often felt isolated from the main campus. The Alumni Nurse Mentorship Program was envisioned as a solution to this challenge.

Statement of Purpose: The purpose of this study was to develop an alumni nurse mentorship program, implement the *New Careers in Nursing* Mentorship Toolkit, and evaluate the effectiveness of the program. The aims were to evaluate overall academic progress in the program and the experience of mentorship by the mentees and mentors.

Methods: Two Alumni Nurse Mentors (ANM) were chosen from the previous cohort of ten NCIN scholars who had just graduated. Each was assigned to our two remote campus locations that are located 50 and 80 miles from the main campus. Each of the mentors was required to have graduated from the same location as the current NCIN scholars and have passed the NCLEX. The ANMs graduated in December 2011, and their role as mentors began in January 2012. They met the ten new scholars at the Pre-Entry Immersion Program during a question and answer luncheon that occurred one month prior to the start of the program. The ANMs reviewed the Mentorship Toolikit and chose exercises to implement with the mentees. ANMs meet with the five scholars at each campus once per month during lunch or dinner. The NCIN Program Liaison received monthly reports from the ANMs and also met with the mentees. Evaluation of the program is still in progress, as the NCIN scholars graduate in December 2012. Students will be completing a formal survey at the end of the program, and to date have provided feedback regarding ANMs to the NCIN Program Liaison.

Results: (preliminary): Participation rate has been 100 percent. Overall evaluation of the program to date has been extremely positive. The PIP evaluation revealed that the scholars felt much apprehension and anxiety before meeting each other and their respective ANMs. After the PIP, the scholars felt a sense of confidence in knowing other students, and having a mentor who had just been through the same program, at the same location. The consistent monthly mentorship has facilitated the development of a cohesive group, and several students have developed friendships and study groups as a result. Scholars have taken leadership roles in the school, and three participated on a medical mission to Laos on their only week off during the program. Several enrolled in the same clinical groups, an indication of their bond. Retention has been 100 percent, and all scholars are on track to graduating in December 2012. Additionally, the ANMs have felt a continued connection to the university, and have had a form of employment since graduation, which in this current market has been important. The scholars have benefitted from being observing the ANMs' process in applying for new graduate RN positions, and learning how to best prepare themselves during the program for their future careers.

Authors: Aara Amidi-Nouri, PhD, RN, Director of Diversity/Assistant Professor; John, Le, RN, BSN, & Natasha Leland, RN, BSN
Nursing School: Samuel Merritt University

Beyond PIP: Promoting Academic Success and Retention in Underrepresented Students

Category: HOT TOPICS
Location: 2

Background Statement: The importance of supporting nursing students, and particularly, underrepresented students enrolled in a rigorous accelerated second degree (ASD) undergraduate program, cannot be underestimated. While receiving Robert Wood Johnson Foundation *New Careers in Nursing* (RWJF NCIN) funds in the first two rounds, several of our students at Duquesne University School of Nursing (DUSON) experienced academic challenges and were unable to successfully complete the accelerated second degree program as scheduled. Since that time, we have re-examined our academic support program and implemented several focused interventions aimed to support student success and retention.

Statement of Purpose: This poster showcases four academic support strategies designed to increase both the success and retention rate of our current RWJF NCIN Scholars and ASD students.

Methods: Currently, an Undergraduate Academic Enhancement Program is being fully instituted at DUSON and includes a customized plan targeted to ASD students. Plans for this Program occurred concurrently with RWJF NCIN's introduction of the PIP initiative that serves as our Program's foundation. DUSON's Academic Enhancement Program includes the following features: 1) Hiring a master's prepared academic advisor dedicated to ASD students. This advisor, representing a minority group, communicates with students upon admission, participates in PIP sessions, conducts private meetings with individual students to discuss academic/personal issues, and provides ongoing mentoring and support. 2) Implementing the "Starfish Early Warning System" technology that identifies and alerts faculty and the advisor of actual/potential student academic issues. "Starfish" provides an efficient and timely method of communication between faculty and advisor regarding each student's academic status. 3) Hiring a dedicated nursing student in the role of Nursing Academic Preceptor (NAP) Coach to work specifically with ASD students. The NAP Coach is an academically successful senior undergraduate student enrolled in our four-year undergraduate program and who is familiar with course content, provides academic assistance to students using various approaches to coaching and tutoring (1:1, small groups, and group recitation sessions). 4) Conducting ongoing "test taking sessions" offered by the DUSON Academic Success Team.

Results: The overall impact of these four strategies included in the Undergraduate Academic Enhancement Program on ASD student retention (i.e., improved grades and/or graduation at the scheduled date) will be tracked during this academic year and compared with previous years. Both formative and summative methods will be used to obtain feedback from key individuals engaged in the Program (i.e., RWJF NCIN Scholars, ASD students, NAP tutors, faculty, and advisor) to determine the outcomes obtained using this support model.

Authors: Leah Vota Cunningham, MNEd, RN and Joan Such Lockhart, PhD, RN, CORLN, AOCN, CNE, FAAN;
Nursing School: Duquesne University

Connecting the Dots: The Rush – Schweitzer Mentoring Program

Category: SUCCESSFUL MENTORING PROGRAMS
Location: 19

Background Statement: Rush University College of Nursing formulated a collaboration with the Chicago Area Schweitzer Fellows Program beginning in Round 1 of the *New Careers in Nursing* (NCIN) grants. This partnership was forged based on the author's work as an Advisory Board member with the Schweitzer program, an organization that promotes community service among health care professionals. We have continued this popular mentoring program through Rounds 3, 4 and 5 of NCIN grant funding. Mentors include nurses who are former Schweitzer Fellows and now Fellows for Life. Many of the mentors come from disadvantaged backgrounds and are uniquely qualified to coach students as they navigate the challenges of nursing school; encourage students to take on professional leadership roles; and discuss clinical interests.

Statement of Purpose: The innovative nature of this mentoring program lies in the "marriage" of the Rush NCIN mentoring component to Schweitzer's unique community service organization. Schweitzer Fellows for Life identified a strong desire to mentor as one way to remain engaged in "giving back" once they complete their Fellowship service projects. As mentoring is such a critical element in the trajectory of the NCIN scholar, it seemed a natural union. Beyond the mentoring relationship, the Schweitzer Fellows for Life and the Schweitzer program itself are often able to offer the scholars opportunities for community service and attendance at service leadership presentations.

Methods: The mentoring program is extremely collaborative as both Schweitzer and Rush have a strong mutual investment. The program is also structured in terms of matching mentors and mentees, attendance at an orientation dinner, goal setting, communication between dyads during the term, quarterly reports from mentees, and attendance at other required events.

Results: Through Rounds 3 and 4 of funding, there has been no attrition of NCIN scholars. Quarterly reports indicate multiple points of contact between mentee and mentor during the term. Scholars indicate in their quarterly reports receiving support in a variety of ways from their mentor, i.e., confidence building, study or test-taking tips, life/school balance advice. Fellows for Life have returned to mentor NCIN scholars in subsequent rounds of funding. NCIN scholar graduates, based on their mentorship experience, want to "give back" too and have served as student mentors subsequent to graduation. The Schweitzer Fellowship is a national organization; programs exist in 13 other cities across the US. The opportunity for expansion of this mentoring model with other schools of nursing exists based on the Chicago template. Also, the Schweitzer program director, based on the perceived success of the program and feedback from the mentors, wants to expand the mentoring program to other Fellows for Life health professionals so that they may mentor underrepresented students in their areas.

Authors: Lisa Rosenberg
Nursing School: Rush University College of Nursing

Fostering Self-Care Among Accelerated Nursing Students: A Partnership with the University Counseling Center

Category: HOT TOPICS
Location: 3

Background Statement: Accelerated nursing students embarking on a new career face a number of challenges as they try to successfully negotiate the educational system and learn about the health care arena. The Department of Nursing at Southern Connecticut State University is acutely aware of the need to enhance self care strategies among second career, accelerated students so they can effectively deal with the demands of the program and then the professional practice environment. Students often comment that their high expectations for success, family and personal conflicts, and financial obligations impact heir ability to learn and perform in the program. The faculty has become increasingly concerned about helping students create holistic self-care practices, and decrease stress by enhancing their coping abilities. A partnership with the University's Counseling Department has been initiated to provide an ongoing program of support for accelerated nursing students throughout the year in order to teach students the skills necessary for self-care.

Statement of Purpose: The purpose of this new initiative is to foster self-care practices among nursing students which can be used to decrease stress, maximize success while in the program, and to facilitate transition from student to novice nurse in the professional arena.

Methods: Nursing faculty and counseling staff have been meeting to develop a plan of support and self-care for the next year. Staff from the Counseling department and Nursing faculty will offer a regularly scheduled monthly program. Some of the strategies which will be initiated are informal focus group meetings to discuss an identified topic such as time management or test anxiety, the exploration of a variety of coping strategies (i.e. self-reflection, meditation, yoga and positive thinking), and presentations on healthy nutrition. During certain high stress times in the semester (midterm and final exams), a de-stress festival is planned to support students while they prepare for performance exams, demonstrate independent health assessments with their nursing lab partners for faculty, and complete written exams. Chair massage, aroma therapy, and relaxation exercises will also be incorporated into the festival as complementary options for students.

Results: Although this Partnership is new, we have had a positive response from students whenever a focus group was held or an informal session on test-taking or stress management techniques. Collaboration with the Counseling department will further enhance the self-care skills of students ensuring success in the profession.

Authors: Mary Ann Glendon Ph.D., MSN, RN & Lisa Rebeschi MSN, CNE, RN
Nursing School: Southern Connecticut State University, New Haven, CT.

Getting Right on the Money

Category: HOT TOPICS
Location: 4

Background Statement: Student loan debt is now higher than it has ever been and threatens the future of many college students. This may be especially problematic for second-degree students, many of whom are still paying off loans for their first degrees. When they begin working as nurses, graduates will be faced with many financial decisions in addition to paying student loans

Statement of Purpose: In order to support students in becoming financially savvy, this year we incorporated a program on personal finance into our NCIN mentorship program.

Methods: Program topics were drawn from newspaper columns, a popular personal finance book directed at new college graduates, and personal finance websites; we were unable to find any pertinent personal finance information directed specifically at nursing students or nurses. However, it was not difficult to develop the presentation with the information available and our own knowledge of nursing. Topics included the unique nature of student loan debt, the importance of developing an emergency/opportunity fund and retirement savings, managing credit cards and taxes, financial mistakes common to nurses, the importance of automating payments, emotional spending, the various types of benefits typically available to hospital employees and how to decide which ones to select. Students were told there would be a presentation at a regular NCIN lunch meeting but not the topic. When they arrived the students were asked what their priorities were after graduation; all had good ideas (e.g., join a committee and network) but none (N = 5) mentioned finances.

Results: Students completed written evaluations. Scores on Likert scale items with a five-point scale ranged from 4.8 for one item to 5.0 for four items. In their written comments students indicated they intended to put recommendations to improve their financial security into practice, wished they knew more about personal finance including stocks and bonds, and that the information was almost all new to them. The only suggestion for improvement was to deliver the presentation closer to graduation and that is what we plan to do. Personal financial planning has not typically been a component of the nursing curriculum but an uncertain economy, tight job market, and escalating student loan debt makes the topic increasingly important to students and gives faculty a practical way to support graduate success.

Authors: Barbara Lee, MSN, MEd, BC, CWOCN and Joan C. Masters EdD, MBA, APRN, PMHNP-BC
Nursing School: Bellarmine University, Lansing School of Nursing and Health Sciences

Initiatives for Enhancing Cultural Self-Efficacy of Entry Level Master's Students

Category: CULTURAL COMPETENCE INITIATIVES
Location: 1

Background Statement: The changing demographic profile of Americans together with the underrepresentation of ethnic minorities in nursing has contributed to severe health disparities. To mitigate these disparities experienced by ethnically diverse populations, culturally competent health care givers are needed.

Statement of Purpose: This poster addresses a multi-faceted approach to enhance cultural self-efficacy in the Entry Level Master's (ELM) Program and describes outcomes of this approach. Betancourt's framework of cross cultural education and AACN's graduate nursing cultural competencies guided the integration of student, faculty, and community initiatives in the program curriculum. These conceptual frameworks focus on the development of cross-cultural attitudes, knowledge, and tools and skills.

Methods: The ELM program strives to recruit and retain ethnically diverse students who mirror the communities of southern California. To this end, the program has successfully obtained Robert Wood Johnson Foundation scholarships to fiscally support enrollment of disadvantaged and ethnically underrepresented groups. Student initiatives are aimed at enhancing awareness and sensitivity, allowing for cross-cultural sharing. The program sought clinical experiences in health care settings that primarily served diverse and underserved populations. These experiences provide opportunities for students to develop tools and skills to communicate with diverse patients and families, as well as to implement culturally tailored care. Students have the opportunity to rotate through our school of nursing Neighborhood Wellness Center and participate in the Homeless Health Outreach Clinic. To prepare faculty to design courses to increase student knowledge of cross-cultural issues, we invited an expert cultural consultant to present a two-day workshop using adult learner cultural care teaching strategies. Further interactive workshops focused on culturally appropriate teaching strategies. Currently, faculty integrate cultural concepts in each course as opposed to offering a separate course. We developed a mentorship program where students are linked with mentors who are experienced nurses of similar ethnic backgrounds, and our advisory board includes ethnically diverse leaders from collaborating health care agencies.

Results: Sixty percent of our students represent ethnic minorities. The Cultural Self-Efficacy Scale was administered to measure student confidence in knowledge of cultural competence, knowledge of cultural patterns for African American, Hispanic, Asian, and American Indian cultures and specific cultural nursing skills. Students have shown significant gains from pre to post-test. Post-test results from the first faculty workshop demonstrated increased levels of confidence in cross-cultural competence and teaching methods. The greatest change in participant confidence was in cross-cultural communication skills. Evaluations of interactive workshops showed that faculty requested additional workshops focused on how to manage specific ethnic student scenarios. The evaluations suggest the need for further workshops and forums to share ideas and encourage faculty's further development of awareness and identification issues. Qualitatively, students and their community-based mentors report a higher level of confidence and satisfaction with the ethnic concordance of the dyads.

Authors: Shirley Farr, MSN, RN, CNS; Felicitas dela Cruz, DNSc., RN, FAANP; Marilyn Klakovich, DNSc., RN, NEA-BC; Phyllis Esslinger, MSN, RN
Nursing School: Azusa Pacific University

Innovative curriculum Design for Accelerated Baccalaureate Students: The NYU Nursing Model

Category: INNOVATIVE PROGRAM DESIGN FOR ACCELERATED STUDENTS
Location: 6

Background Statement: There has been a call to radically transform the way we educate nurses and to shift the paradigm for clinical teaching (Benner, Sutphen, Leobard, & Day, 2010; Richardson, Gilmartin, & Fulmer, 2012). Learning must be contextualized using clinical experiences rather than traditional lectures in order to promote critical thinking (Benner et al., 2010). This requires nursing faculty to keep up with changing knowledge and technology, and to develop curricula that produce graduates who will improve outcomes for an aging population with complex health needs (IOM, 2010). Given the projected need for more nurses, fast track accelerated programs for those with non-nursing degrees have gained momentum. These accelerated programs are further challenged to accomplish program outcomes within a short timeframe (AACN, 2012).

Statement of Purpose: The purpose of our baccalaureate (BS) curriculum redesign was to: a) enhance integration of geriatric content; b) develop competencies focused on patient-centered, evidence-based, and culturally competent care in diverse settings; and c) implement innovative, integrative learning strategies along with an A-B clinical model using high fidelity simulation to cultivate clinical decision making skills.

Methods: Our BS program has an enrollment of 860+ students; 80 percent are accelerated. Our academic calendar was modified to balance each semester's length and credit load. Content was streamlined to include essential quality and safety concepts, the most common acute and chronic health problems, the best available evidence, and use of technology, including on-line learning activities and high fidelity simulation. The traditional "medical-surgical" nursing and "stand alone" geriatric courses were transformed into Adult and Elder (A&E) Nursing I, II, and III with corresponding Integrative Seminar I, II, and III courses using unfolding case studies, students' actual clinical experiences, and reflection logs. Integrative learning strategies included the use of evidence-based geriatric assessment tools, smart phone technology applications, audience response devices, virtual patients, podcasting, and an A-B clinical model with 50 percent high fidelity simulation and 50 percent traditional experiences in acute care, sub-acute rehab, and long term care settings for the A&E and leadership courses. The number of simulations varied for specialty courses: acute psychiatric nursing (3); maternity (1); pediatrics (1); and community (1). A new course in foundations of genetics and genomics course was recently added to the curriculum.

Results: Our 15-month BS program is 64 credits; students take 16 credits per semester. Our modified calendar consists of 13-week fall, spring, and summer semesters with three to four week semester breaks. Baccalaureate program outcomes are being met. Feedback from students and clinical partners has been positive. More than 75 on-campus simulations take place on a weekly basis along with daily open simulation practice sessions. Students have multiple opportunities to engage in a variety of off campus clinical experiences in 100+ outstanding major medical centers and other health care agencies in culturally and ethnically diverse settings in the five boroughs of New York City. First-time NCLEX-RN pass rates range from 92 to 95 percent.

Authors: Ann Marie Mauro, PhD, RN, CNL, CNE & Kellie D. Bryant, DNP, WHNP-BC
Nursing School: New York University, College of Nursing

Integrating Service Learning and Leadership Development into a First Semester Nursing Course

Category: INNOVATIVE PROGRAM DESIGN FOR ACCELERATED STUDENTS
Location: 7

Background Statement: Students are required to complete community service hours within the nursing curriculum .Combining community service and civic engagement through a service learning project exposes students to vulnerable populations in the community setting and provides leadership experiences early in the students' nursing education.

Statement of Purpose:

- To complete the following learning outcomes in a community setting with a focus on vulnerable populations.

- Understand the assessment of individuals in the community setting.

- Facilitate behavioral change techniques to promote health and manage illness of individuals in a vulnerable population across the lifespan.

- Assess health/illness beliefs, values, attitudes, and practices of individuals.

- Demonstrate the professional values of accountability, altruism, autonomy, and respect for human dignity, integrity, and social justice.

- Utilize basic leadership skills and therapeutic communication techniques when working in a team to design a service learning project.

Methods:

- Students were assigned in groups of three to sixto a Service Learning site and a minimum of 12 hours were contributed to the service learning experience over the semester.

- Student groups identified a HealthyPeople 2020 objective appropriate for the vulnerable population at the site and developed, implemented, and evaluated a project that addressed the objective.

- Students completed a student service learning outcomes evaluation to address the predetermined learning outcomes.

Results: Students reported that the service learning project increased their awareness of the needs of vulnerable populations such as different health literacy levels, developmental concerns, and those who did not have access to resources. Students felt they had a direct impact on improving the health of vulnerable populations within the community setting. Also, students reported "the project gave us the opportunity to utilize therapeutic communication techniques and basic leadership skills at an early stage of our nursing education which was priceless."

Authors: Danielle M. McGinnis MSN, RN and Elisabeth Shelton PhD, RN, CNE, ANEF
Nursing School: West Virginia University School of Nursing

Leadership Development for Accelerated Students: Collaboration with Rural Nurse Leaders in Montana

Category: LEADERSHIP DEVELOPMENT ACTIVITIES FOR ACCELERATED STUDENTS
Location: 10

Background Statement: The state of Montana is 630 miles from East to West and 255 miles from South to North. There are 48 critical access hospitals (CAHs) in Montana, serving approximately 735,993 persons living in rural and frontier areas. These CAHs are tasked with developing and sustaining quality care for rural and frontier residents. Montana State University (MSU) began an accelerated BSN program in May of 2011. None of these students had experience in a rural hospital. The CAH setting provides a unique opportunity for students to be involved with nurse leaders who may be attending a legislative session one day, administering medications during a code, the next, and who often work alongside the staff. The nurses in the CAH must be expert generalists. These challenges are not necessarily experienced by nurses working in urban facilities.

Statement of Purpose: The mission statement of MSU holds that this land grant institution, "...educates students, creates knowledge and art, and serves communities, by integrating learning, discovery, and engagement." Because these accelerated nursing students chose a program of study in a rural state, it is important they leave the program with a broader understanding of both the rural healthcare system and the challenges of providing care in a rural state.

Methods: Fifteen of the 16 accelerated students spent a week with the directors of 14 rural facilities—in their cases, these were CAHs. One student spent time in a VA center in the state of Montana, which also serves underserved and rural populations. In most cases, lodging was generously provided by the facility. Prior to attending the clinical experience, the students established and maintained contact with the nurse leader. This was initiated during their second session and prior to their final summer session. The students collaborated on two major projects with the nurse leaders: 1) an evidence-based professional paper and presentation for the facility on a topic chosen by the nurse leader and student; 2) an analysis of the facility using one of the six AACN Healthy Workplace Standards, identified by the nurse leader and student. For the latter assignment, students also wrote a memo to the nurse leader, explaining their analysis, and wrote a professional paper on the topic.

Results: These students participated in clinical experiences elsewhere in healthcare facilities as well, for a total of 135 clinical hours. However, the preparation, collaboration, and requisites for open direct communication, related to the rural nurse leader assignments facilitated real-world problem solving. Accelerated programs are challenged to provide meaningful clinical experiences in shortened time spans. By facilitating communication with nurse leaders in advance via phone and email, these students had an opportunity to apply principles of leadership in an authentic way.

Authors: Teresa J Seright, PhD, RN, CCRN, Assistant Professor of Nursing

Nursing School: Montana State University-Bozeman

Literature Review:
Accelerated BSN Nursing Students--What's the Prognosis?

Category: INNOVATIVE PROGRAM DESIGN FOR ACCELERATED STUDENTS
Location: 8

Background Statement: As part of a required nursing research course, a group of accelerated baccalaureate nursing students worked with a faculty mentor to review the literature comparing accelerated and traditional baccalaureate nursing students' academic and clinical performance and experiences. The project culminated in an oral and poster presentation to faculty and peers. This course product exemplifies an innovative method for teaching research and evidence-based practice. Additionally, a summary of the literature review provides insight into benefits and challenges of accelerated nursing students in a baccalaureate program and implications for nursing faculty.

Statement of Purpose: 1.To showcase an experiential course assignment in a required undergraduate nursing research course. 2.To summarize literature focused on comparison of accelerated and traditional baccalaureate nursing students in academic and clinical performance.

Methods: Students were assigned to groups for an experiential aspect of the required research course in fall semester 2011. Students met with the research faculty mentor for one hour weekly to determine their research/evidence-based practice topic, plan for reviewing the literature, distribution of work and evaluation of the literature, and development of the oral and poster presentations. Over the course of a semester, the students conducted a literature search (CINAHL database plus other library databases) using search terms such as "accelerated students," "traditional students," "curriculum for accelerated student," "accelerated student academics," "nursing students and maturity/GPA/NCLEX/learning styles." Sixteen articles were selected as the most relevant to the topic and were reviewed for the comparative effects of having earned a previous bachelor's degree, effects of maturity, GPA and NCLEX performance, clinical performance, and faculty approaches to teaching accelerated students.

Results: The student group successfully presented their oral and poster presentations to a group of approximately 80 faculty, students, and clinical experts during a December 2011 nursing student research conference at the University of Delaware. The group concluded that accelerated and traditional students vary in the following ways: 1) previous degrees earned by accelerated students allow them to apply skills learned from prior experiences; 2) maturity and life experience is a double-edged sword, yielding enhanced critical thinking and discipline but increased responsibilities that may be distracting for accelerated students; 3) accelerated students generally have higher GPAs which can be predictive of NCLEX success; 4) real-life clinical examples and opportunities to apply skills obtained in previous programs/careers are beneficial to accelerated students; and 5) accelerated students tend to be more independent and confident in the clinical setting. The student group noted that most of the reviewed studies were qualitative. They recommended that future researchers conduct quantitative, longitudinal studies that evaluate and validate educational practices used with accelerated students and track the career paths of accelerated students.

Authors: Kathleen Schell, PhD, RN, Regina Sims, PhD, Elizabeth Bishop, Antoinette Boyd, Alyson Clyde, Rebecca Debonis, Priya Dubey, Christine Gregory,
Nursing School: University of Delaware

Mutual Mentoring: Impact on Student and Faculty Retention

Category: SUCCESSFUL MENTORING PROGRAMS
Location: 20

Background Statement: Our Accelerated Second Bachelor (ASB) program was the recipient of the prestigious 2008, 2009 and 2012 Robert Wood Johnson Foundation (RWJF) *New Careers in Nursing* (NCIN) scholarship award for a total of 25 recipients. Noteworthy was the simultaneous development of two successful Mellon Mutual Mentoring (M3) Team Grant Projects to develop faculty mentoring skills. These combined efforts were focused on building a web of mentoring within the School of Nursing.

Statement of Purpose: Our aims were: 1) to promote new faculty scholarship and leadership development; and 2) to promote and develop student leadership through faculty-student mentoring program.

Methods: The components of structural empowerment model were used to guide the faculty and student mentoring process. Relationships were designed to facilitate critical Information, Support, Resources and Opportunities for mentors and mentees. The RWJF Projects created a mentoring climate and structured leadership events for both faculty and student development. Senior level RWJF ABS students planned social networking picnics, invited nurse leader speakers to campus, and provided skills lab teaching of junior ASB students, beginning day one. The M3 Project 1 afforded junior faculty the opportunity to have a senior faculty mentor and develop a career vision, initiate, and maintain a program of scholarship, design a career goal plan, and discuss the balance of work/life. M3 Project 2 expanded our mutual mentoring efforts to provide faculty dyads with the structure for a more comprehensive school-wide mentoring network.

Results: The NCIN initiative led to tripling our underrepresented students and doubling our male population by building on our program's history of innovation. There was no attrition from the program, several honors college graduates and exemplary leadership development. M3 Project 1 results were overwhelmingly successful: 4 clinical faculty enrolled in doctoral programs, increased scholarly publications and presentations, and demonstrated an investment in their role at the university. M3 Project 2 results indicated an increase in scholarship through mentor dyads and a sustainable mentoring model was developed for graduate and undergraduate programs that will use a speed mentoring approach. The simultaneity of the M3 project with the NCIN program afforded the opportunity for the faculty to experience group and individual collaborative mentoring, which empowered faculty to provide collaborative mentoring to their students and design an all-school, sustainable mentoring program.

Authors: Donna M. Zucker, Genevieve Chandler, Margaret Curnin
Nursing School: The University of Massachusetts Amherst

NALC: Nursing as an Additional Language and Culture Program – An Innovative Approach ti Support Student Success in an Accelerated BSN Program

Category: INNOVATIVE PROGRAM DESIGN FOR ACCELERATED STUDENTS
Location: 9

Background Statement: According to the U.S. Department of Health and Human Services, the nation's demand for nurses will exceed its supply by almost 1 million nurses by 2020, creating a nursing shortage greater in severity and duration than any in history. Nurses of color, as well as men, comprise a disproportionate number of nursing professionals compared to the U.S. population. In fact, African Americans and Hispanics represent 5.4 percent and 3.6 percent of nurses, respectively. Such a phenomenon will greatly impede the safety and quality of care that patients receive in all sectors of the health care system including hospitals, nursing homes, outpatient centers, and home health care. These statistics demonstrate a significant under-representation of minorities in the nursing workforce of New Jersey and do not reflect New Jersey's diverse population as a whole. Recruitment efforts have increased the diverse population of students into nursing programs, however, retention and graduation rates that relate to this group of students continue to prove worrisome. Data for five graduating cohorts at an Accelerated Baccalaureate School of Nursing (ABSN) Program indicated an academic attrition rate (failure to graduate from program) of 14.4 percent for all students. Of these graduating cohorts, ethnically and culturally diverse students experienced an academic attrition rate of 22.4 percent, as compared to 2.2 percent for Caucasian students.

Statement of Purpose: The Nursing as an Additional Language and Culture Program (NALC) is an educational intervention designed to enhance retention by minimizing barriers to success in an accelerated nursing program. Data collected at a school of nursing in New Jersey demonstrated that the majority of minority student attrition occurred by the end of the first term of the program. Needs assessment identified academic attrition for this student population was related to failure of one course in the first semester, putting student at greater risk of academic attrition, withdrawal from a course because of failing mid-term grades and withdrawal from the nursing program related to personal reasons, such as the need to work while in the program, family responsibilities, financial problems or language difficulties.

Methods: SN administers a post-admission exam of the Assessment Technologies Incorporated (ATI) TEAS (Test of Essential Academic Skills). This evaluation tool is a multiple choice exam which assesses proficiency in mathematics, basic sciences, reading comprehension and English language usage. A separate writing skills assessment is administered at Program Orientation and directed interventions are undertaken prior to and synchronous with the assignment of graded written work in the first level courses of the program. The Dean approved and funded an "early intervention" project – NALC: Nursing as an Alternative Language and Culture - which was initiated in Spring 2010 to identify at-risk students using the TEAS. At-risk students are subsequently provided with an intensive, on-site, nine-day pre-nursing immersion program that includes academic content (medical terminology, A&P review and basic algebra). In addition to study/learning skills and an introduction to the professional attitudes and behaviors expected of registered nurses. The NALC program stresses socialization into the role of nursing as a new culture and language to be integrated into the student's lifestyle. Successful students and alumni of the ABSN program visit and discuss strategies for success in the nursing program. Mentors are developed and study groups are formed. Following the NALC program, faculty advisors, mentors and the academic support center tutors meet with the students to support ABSN success.

Results: After a pilot study, the NALC program was offered four times during 2010-2011. Of the 45 students who participated in the programs, 99 percent progressed, 100 percent successfully completed first semester pathophysiology, medical math, and medical terminology. Surveys identified an increase in student comfort and decreased stress in the first semester. It is anticipated that the NALC program will ultimately increase diversity in the nursing profession and hopeful that other schools will replicate into their nursing programs.

Authors: Denise M. Tate, and Renee Cantwell
Nursing School: University of Medicine & Dentistry of New Jersey

Our Experience at the AACN Policy Summit

Category: LEADERSHIP DEVELOPMENT ACTIVITIES FOR ACCELERATED STUDENTS
Location: 11

Background Statement: Using *New Careers In Nursing* (NCIN) grant funds, Saint Louis University sent two NCIN scholars to the American Academy of Colleges of Nursing Policy Summit in Washington, DC, in March, 2012. The scholars prepared for their experience through review of current policy issues facing nurses and made appointments with legislators. We planned to guide the scholars through poster presentation development when they returned from the Summit.

Statement of Purpose: Our three-fold leadership development purpose for NCIN scholar attendance at the AACN Policy Summit was: a. ensure that scholars were well prepared for the summit and had opportunity to speak with legislators, b. reach the full nursing school with information about this leadership development experience, and c. provide the scholars with experience in poster presentation development and display to a large university-wide audience.

Methods: In preparation for the Summit, scholars read summary pages from the Institute of Medicine report, *The Future of Nursing* and appointments were set for meeting in Washington with Missouri's national legislators. Following the Summit, scholars met with their Leadership mentor to design a poster and poster talk about their experience. The poster was displayed in the School of Nursing building and submitted to the Senior Legacy Symposium competition.

Results: The scholars returned to school having learned much about a nurse's role in health care policy and wanted to share their new knowledge. The scholars developed a poster and poster talk, which was accepted for display at the Saint Louis University Senior Legacy Symposium, an award winning event held in April 2012. The poster is on continuing display at the School of Nursing building.

Authors: Sheila A. Leander, Rita Wunderlich, Michael Indergaard, Zachary Fox
Nursing School: Saint Louis University

Results from the Learning Collaborative for accelerated Models of Nursing Education

Category: PROGRAM EVALUATION OF ACCELERATED PROGRAMS;
Location: 14

Background Statement: The Learning Collaborative for Accelerated Models of Nursing Education (LCANE) was begun in 2005 by a group of faculty from the Northeast. This group came together in regular meetings to consider best teaching practices for educating the accelerated generic master's students who are now the largest group of students entering advanced practice in this country. LCANE has had an online open-ended survey designed to help students consider the teaching practices that have facilitated or hindered their learning in the program. Data is being analyzed utilizing descriptive statistics and qualitative content analysis.

Statement of Purpose: If we are concerned about scrutinizing our curricular activities to discern facilitators and barriers to learning, it seems reasonable that we cannot really teach better unless we hear the students' perspective. As noted by Weitzel and McCahon (2008, p. 83), "there is no literature on accelerated nursing students' perceptions or experiences, the activities that support or inhibit their work, and their recommendations to faculty regarding needs, challenges, supports or teaching/learning strategies."

Methods: Qualitative data is analyzed using Krippendorff's method of content analysis

Results: The results of this survey will be presented via a poster highlighting findings that identify specific barriers to learning, facilitators of learning, and teaching techniques that have been an influence in educational outcomes during the first year of an accelerated program.

Authors: Linda Honan Pellico, PhD, RN, CNS-BC, Yale School of Nursing; Janet Rico PhD (c) MBA, NP-BC-FNP, Simmons College; Eileen Terrill, PhD, RN, NP-BC-ANP, University of Massachusetts, Worcester Graduate School of Nursing; Patricia White, PhD, NP-BC, ANP, Sim
Nursing School: Yale University School of Nursing

Successful Orientation: Student Evaluation and Academic Outcomes after NCIN Pre-Entry Immersion Program

Category: SUCCESSFUL RECRUITMENT AND RETENTION STRATEGIES TO YIELD/ RETAIN ETHNICALLY DIVERSE OR UNDERREPRESENTED STUDENTS;
Location: 13

Background Statement: Accelerated BSN programs have intense curricula delivered over a short time. Such intensity increases the demands and stress on students which affects their academic performance, professional development, and personal satisfaction. Orientation programs such as the NCIN Pre-Entry Immersion Program (PIP) can help students better prepare to meet these challenges and be successful.

Statement of Purpose: The purpose of the University of Missouri PIP was not only to promote student retention of attendees, but also to maximize the potential for student success.

Methods: Using the PIP Toolkit and round 3 PIP evaluation data, the Round Four PIP was planned. The entire accelerated BSN nursing class was invited, with 30 of 50 attending, including all five NICN scholars. The PIP was held May 9-10, 2012, two weeks prior to the start of class. Building upon toolkit exercises, strategies such as information sharing by peers and faculty, skill development, goal setting, self-assessment, establishing expectations, social and environmental acclimation, planning and organization, and interactive activities, were used to deliver the PIP content. To promote student faculty relationship formation fourteen faculty members welcomed students and delivered dynamic PIP sessions. Additionally, a current accelerated student panel shared their "Secrets to Success and Survival Strategies." Each day evaluation data were collected. Final courses grades at the end of the first semester were also compared.

Results: Overall student evaluations, 23/24 on day one and 18/19 on day two, were excellent on a 5 pt Likert scale from excellent to unacceptable. All individual sessions received a majority of excellent ratings. Sessions with the most excellent ratings were success and survival strategies, study skills and test taking. Those with fewer excellent ratings were nursing experience and framework exercises. Students identified strengths and opportunities for improvement which were analyzed for themes. Of 74 mentioned strengths, the most common themes were meeting classmates, learning what to expect, meeting faculty, and the variety and quality of speakers. Of the 32 opportunities for improvement, the most common responses were decreased program length and requests for more interactive activities and teambuilding. Numerous other comments referred to feeling less anxious, less stressed, better prepared, and excited after attending. The final course grades of PIP attendees and non-attendees were compared after the first semester. In all four courses, PIP attendees scored on average 0.5-1.4 points higher than non-attendees.

Authors: Sherri Ulbrich, PhD, RN, NCIN Program Liaison and Cheryl Bausler, PhD, RN
Nursing School: University of Missouri Sinclair School of Nursing

Survey of MSMC Accelerated Bachelors of Nursing Graduates Regarding Education Received and Current 1996-2009.

Category: PROGRAM EVALUATION OF ACCELERATED PROGRAMS
Location: 15

Background Statement: Mount St. Mary's College was the first ABSN program in California with the first graduating class in 1996. The program has grown from a class of 16 in 1996, as a pilot project, to a robust program with two 40-student cohorts per year. A review of the literature reveals a dearth of substantive evaluations of accelerated program outcomes related to new graduates satisfaction with the program, preparation for practice as compared to other new nurses, career trajectory in nursing, presence in the nursing workforce, and advancement to graduate work.

Statement of Purpose: This project proposed to survey all graduates of the Accelerated BSN (ABSN) program at Mount St. Mary's College in Los Angelesfrom the time of inception of the program in 1996 to 2009. The survey seeks to gather information about work activities and individual reflections from graduates to ascertain the effectiveness of the program and the education being delivered in preparing new nurses during this time of national nursing shortage. It is part of our ongoing effort to produce high quality graduates.

Methods: A total of 492 graduates were invited to participate in the survey. An online survey using the vovici survey tool. Participants were contacted by email or letter and asked to go to a link and complete a survey.

Results: The typical ABSN student was a white female with a non-science undergraduate degree and started the program at age 28 with six years' prior work experience. The first position for 98 percent of the graduates was as a staff nurse in acute care. There was no difference in between men and women or science and non-science undergraduate majors in their GPA's in the program. There was not a substantive difference between whites and non-whites. Results show overall satisfaction with the program and preparation for practice, and that the program graduates are generally satisfied with their careers in nursing. They felt equally or better prepared than other new graduates. Those who felt a connection with the Mount and being a Mount Nurse were more likely to say they would do the program again, although those who were less satisfied or did not connect were only 9 percent of the respondents. Results will be used to improve program orientation and programmatic changes.

Authors: Sarah Shealy RN MSN, CNM; Catherine Hoegeman PhD; Mary Sloper RN, MN, MBA

Nursing School: Mount St. Mary's College, Los Angeles, CA

Tomorrow's Leaders – Today's Change:
NCIN Scholars as Political Advocates

Category: LEADERSHIP DEVELOPMENT ACTIVITIES FOR ACCELERATED STUDENTS
Location: 12

Background Statement: Participation in government and the legislative process is a right and responsibility in our roles as nurses and citizens in the United States. Developing political activism skills is essential to best represent ourselves and our profession, be advocates for our patients and their families, and shape health care and public policy.

Statement of Purpose: The purpose of this leadership development activity was to increase the understanding of and need for political advocacy in nursing and actively engage NCIN scholars in the legislative process as citizens and future nurses. Scholars would also understand the role of Missouri Nurses Association (MONA) and ANA in political advocacy.

Methods: The University of Missouri Sinclair School of Nursing NCIN Scholars participated in the 26th Annual MONA Nurse Advocacy Day including independently meeting with Missouri 46th District Representative Stephen Webber to advocate for the Volunteer Health Services Act (HB 1072). NCIN funds were used to fund the scholar registration fees. During a leadership session Nurse Advocacy Day was introduced to the scholars and resources such as the House and Senate websites, conference agenda, overview of the legislative process, and websites about health related bills were shared. Scholar roles in planning and participation were decided among the group. Scholars attended a faculty presentation about political advocacy and Nurse Advocacy Day. One scholar independently investigated health related bills and another contacted legislators for appointments. The group selected the Volunteer Health Services Act and developed an advocacy plan. Scholars attended the MONA Nurse Advocacy Day including five sessions about current legislation and advocacy skills. Scholars met with their representative in his capitol office and formally requested his support of the bill using their prepared fact sheet and "elevator pitch."

Results: Scholars evaluated each main activity on a 5pt Likert scale (very valuable to not at all valuable) on the school's NCIN Blackboard site. Most sessions were generally considered valuable with no session receiving low or not valuable responses. Four of five scholars rated visiting with their legislator as very valuable, adding that visiting with the legislator "brought everything into perspective," "made Nurse Advocacy Day more meaningful," and "gave me a more in depth understanding of being a nurse advocate." Additional results included the Volunteer Health Services Act receiving needed advocacy, scholars taking leadership roles, and legislators becoming more aware of the presence and advocacy of nurses in public policy.

Authors: Sherri Ulbrich, RN, PhD, NCIN Program Liaison and Gregg Bush, GN, NCIN Scholar
Nursing School: University of Missouri Sinclair School of Nursing

Understanding Curriculua Design and How it impacts NCLEX-RN for ASDN Students

Category: PROGRAM EVALUATION OF ACCELERATED PROGRAMS
Location: 16

Background Statement: Given the projected nursing shortage, one alarming trend is the high attrition rate in nursing programs, which results in fewer students taking–and passing–the NCLEX-RN. Understanding factors that influence students' success or failure in nursing programs is imperative to successfully address the nursing shortage.

Statement of Purpose: The purpose of this study was to assess attributes of students' performance in an accelerated second-degree nursing (ASDN) curriculum to identify factors that may indicate risk of attrition from the program or failure to pass the NCLEX-RN.

Methods: Using a descriptive exploratory study, the researchers tracked outcomes of 421 students enrolled in the ASDN program at a state-supported Midwestern baccalaureate school of nursing from 2005 through 2009.

Results: Three factors–students' performance on a NCLEX-RN predictor exam, grades in a pre-nursing developmental psychology course, and grades in a nursing-curriculum health assessment course–were together significantly related to passing the NCLEX-RN exam, $F(3, 208)=19.39$, $p< .001$.

Authors: Barbara Penprase, PhD, RN & Margaret Harris, PhD, RN
Nursing School: Oakland University

Using Photo-voice to Chronicle the Experiences of Underrepresented and Underserved Students in an Accelerated Second-Degree BSN Program

Category: HOT TOPICS
Location: 5

Background Statement: When second degree students begin their studies in nursing, they must adapt to several new environments, learn a new language, and internalize the beliefs, values, and traditions of the profession of nursing while mastering the science of nursing. Second degree students must also learn to balance full-time school life with home life since these students are often older and assume responsibility of caring for their family. For many accelerated students, this process is stressful and difficult to manage especially since accelerated students are characteristically highly motivated learners who strive to excel in the classroom and in the clinical setting. Numerous studies have focused on descriptions of accelerated nursing students, their experiences while enrolled in accelerated programs, and their preferred methods of teaching and learning but there few known studies that focus specifically on the experiences of underrepresented/underserved students. With the need to enroll and graduate underrepresented/underserved students, this study utilized photo-voice to illustrate the experiences of this population in an accelerated second-degree BSN program.

Statement of Purpose: The purpose of this study was to examine the shared experience of being an underrepresented/underserved student in an accelerated BSN program.

Methods: Photo-voice and the U-Heuristic method for contextualizi ng and codifying the photographs were utilized to reveal the experiences of the student participants. Students, with faculty investigators guiding the process, convened for round-table discussions seven times during their 12-month accelerated BSN program to explore individual responses to posed questions. Photographs (173 in total) that each student had taken and their related journaling were discussed. Using the U-Heuristic method, the students completed their study by identifying shared experiences and subsequent common themes. Transcripts gleaned from the photo-voice discussions were analyzed by faculty investigators.

Results: Student Analysis-Themes related to financial, academic, and family pressure, which typifies traditional accelerated BSN students, emerged. Of significance was their described sensitivity to their individual differences in gender or ethnicity, whether self- perceived or outwardly expressed by others. Faculty analysis of transcripts pending.

Authors: Cory Ann Boyd, EdD, RN, Lisa O'Connor, EdD, RN, Mary Ann Cordeau PhD, RN
Nursing School: Quinnipiac University

Program Planning Committee Members

AARA AMIDI-NOURI, PHD, RN
Samuel Merritt University

CORY ANN BOYD, EDD, RN
Quinnipiac University

AMY COSIMANO, EDD, RN
Creighton University

PATTY COWAN, PHD, RN
University of Tennessee HSC

DEBRA DANFORTH, RN BSN
Oneida Community

LORI ESCALLIER, PHD, RN, CPNP
Stony Brook University

MARY ANN GLENDON, PHD
Southern Connecticut State

CECIL HOLLAND, RN, BSN, APRN, MSN,
MED, EDD, PHD
Winston-Salem University

BENNIE MARSHALL, EDD, MSN, RN, NE-BC
Norfolk State University

TINA MARTIN, RN, PHD, FNP-BC
University of Mississippi

JOAN MASTERS, EDD, MBA, APRN,
PMHMP-BC
Bellarmine University

ANN MARIE P. MAURO, PHD, RN, CNL, CNE
New York University

TRACEY MOTTER, MSN RN
Kent State University

MICHAEL RELF, PHD, RN, ACNS-BC,
AACRN, CNE, FAAN
Duke University

KATHY RIDEOUT, EDD, PNP-BC, FNAP
University of Rochester

SHERYL SANDAHL, DNP, RN, CNP, MPH,
MSN
College of St. Scholastica

SARAH SHEALY, RN MSN, CNM, IBCLC
Mount St. Mary's College

ELIZABETH SPEAKMAN, EDD,RN, CDE, ANEF
Thomas Jefferson University

SUSAN WARD, PHD, RN
Nebraska Methodist

National Advisory Committee Members

Chair:

CAROLINA G. HUERTA, EDD, MSN, RN
Nursing Department Professor and Chair
The University of Texas-Pan American

Members:

GAURDIA BANISTER, PHD, RN
Executive Director,
Institute for Patient Care
Massachusetts General Hospital

CATHERINE CROWLEY, EDD, RN
Project Director
Who Will Care? Initiative

DAISY CRUZ-RICHMAN, PHD, RN
Dean and Professor, College of Nursing
*The State University of New York, Downstate
Medical Center*

DEBRA J. DANFORTH, BSN, RN
Comprehensive Health
Operations Director
Oneida Community Health Center

PAUL C. GORSKI, PHD, MAED
Associate Professor
Integrative Studies, New Century College
George Mason University

TERI A. MURRAY, PHD, APHM-BC, RN, FAAN
Dean, School of Nursing
Saint Louis University

PHYLLIS W. SHARPS, PHD, RN, CNE, FAAN
Professor and Chair, Department of
Community Public Health Nursing
Johns Hopkins University

DIANE TSUKAMAKI, MS
Director, National Recognition & Scholarship
Programs
The College Board

RICHARD W. VALACHOVIC, DMD, MPH
Executive Director
The American Dental Education Association

ELIAS PROVENCIO-VASQUEZ, PHD, NP, FAAN,
FAANP
Dean and Professor
The University of Texas at El Paso

BRENDA K. ZIERLER, PHD, RN, RVT
Associate Professor
The University of Washington

New Careers in Nursing National Program Office

GERALDINE (POLLY) BEDNASH, PHD, RN, FAAN
National Program Director

VERNELL DEWITTY, PHD, MBA, MSN, RN
Deputy Program Director

ALEXA TEHANSKY, BA
Program Coordinator

CHRISTINE DOWNING, MA
Research Assistant

JIHANNE JEANTY, BA
Program Assistant

Robert Wood Johnson Foundation Staff Members

DAVID M. KROL, MD, MPH, FAAP
Human Capital Team Director and Senior Program Officer

LINDA WRIGHT MOORE, MS
Senior Communications Officer

CATHY GOLDSMITH
Program Team Coordinator

LOIS SHEVLIN
Grants Administrator

SPECIAL GUEST
NANCY FISHMAN, MPH
Senior Program Officer

Program Liaison Listing for NCIN 5 Grantee Schools

KENDRA WILLIAMS-PEREZ, EdD, MSN
Allen College
williakb@ihs.org

FAYE GRUND, MSN
Ashland University
fgrund@ashland.edu

BARBARA LEE, BSN, MEd, MSN
Bellarmine University
barbaralee@bellarmine.edu

KATHY HUTCHINSON,
Boston College
kathy.hutchinson@bc.edu

SAMIRA MOUGHRABI, PHD
CALIFORNIA STATE UNIVERSITY- NORTHRIDGE
samira.moughrabi@csun.edu

DARLA VALE, PHD
College of Mount St. Joseph
darla_vale@mail.msj.edu

SHERYL SANDAHL, DPN, RN, CPN, MPH
College of St. Scholastcia
ssandahl@css.edu

JUDY HONIG, EdD, DNP
Columbia University
jch3@columbia.edu

MARCELLA COPES, PHD
Coppin State University
mcopes@coppin.edu

AMY COSIMANO, EDD
Creighton University
AmyCosimano@creighton.edu

YOUNG-ME LEE, PHD, RN
DePaul University
ylee23@depaul.edu

MICHAEL RELF, PHD, RN, AACRN, ACNS-BC,
CNE, FAAN
Duke University
michael.relf@dm.duke.edu

JOAN LOCKHART, PHD, RN
Duquesne University
lockhart@duq.edu

MARGARET NOREUIL, RN, PHD
Edgewood College
mnoreuil@edgewood.edu

ELIZABETH PARIETTI, EdD, CNM, APN, C
Fairleigh Dickinson University
parietti@fdu.edu

STEPHANIE WRIGHT, PHD
George Washington University
wrightsk@gwu.edu

ANNETTE BOURGAULT, PHD(C)
Georgia Health Sciences University
abourgault@georgiahealth.edu

TRACEY MOTTER, MSN
Kent State University
tmotter2@kent.edu

BEVERLY EPENETER, BS, MN, EdD
Linfield College
bepenet@linfield.edu

NANCY DUFFY, DNP, RN, CEN, CNE
Medical University of South Carolina
duffynd@musc.edu

JASON ROBERTSON, MSN, RN
MidAmerica Nazarene University
jerobertson@mnu.edu

A. MCNEELY, DNSC
Montana State University
gmcneely@montana.edu

SARAH SHEALY, BA, RN, MSN, CNM, IBCLC
Mount St. Mary's College
sshealy@msmc.la.edu

SUSAN WARD, PHD, RN
Nebraska Methodist College of Nursing and Allied Health
susie.ward@methodistcollege.edu

KAREN HAND, PHD, RN
New Mexico State University (NMSU)
Donahue4@nmsu.edu

ANN MARIE MAURO, PHD, RN, CNL
New York University
annmarie.mauro@nyu.edu

JESSICA PARROTT, DNP, RN, CPNP
Norfolk State University
jmparrott@nsu.edu

PEGGY WROS, PHD, RN
Oregon Health & Science University
wros@ohsu.edu

CORY BOYD, RN, MS, MED, EDD
Quinnipiac University
Cory.Boyd@quinnipiac.edu

LISA ROSENBERG, PHD
Rush University Medical Center
lisa_rosenberg@rush.edu

SHEILA LEANDER, PHD
Saint Louis University
leanders@slu.edu

AARA AMIDI-NOURI, PHD
Samuel Merritt University
aamidinouri@samuelmerritt.edu

MARY GLENDON, PHD
Southern Connecticut State University
Glendonm1@southernct.edu

LORI ESCALLIER, PHD
Stony Brook
lori.escallier@stonybrook.edu

LUZVIMINDA CASAPAO, MA, EDM
SUNY Downstate Medical Center
luzviminda.casapao@downstate.edu

ELIZABETH SPEAKMAN, EDD
Thomas Jefferson University
elizabeth.speakman@jefferson.edu

COURTNEY LYDER, ND
University of California, Los Angeles
clyder@sonnet.ucla.edu

KATHLEEN SCHELL, PHD, RN
University of Delaware
kaschell@udel.edu

ALLEN HANBERG, PHD, RN
University of Hawaii Foundation
ahanberg@hawaii.edu

GAIL LEMAIRE, PHD
University of Maryland, Baltimore
lemaire@son.umaryland.edu

DONNA ZUCKER, RN, PHD
University of Massachusetts, Amherst
donna@acad.umass.edu

NILDA (NENA) PERAGALLO, DRPH, RN, FAAN
University of Miami
nperagallo@miami.edu

MELVA CRAFT-BLACKSHEARE, CNM, MS, MSN
University of Michigan, Flint
melvagcb@umflint.edu

TINA MARTIN, PHD
University of Mississippi Medical Center
tmartin@umc.edu

SHERRI ULBRICH, BSN, MSN, PHD
University of Missouri, Columbia
ulbrichs@missouri.edu

LOUISE LAFRAMBOISE, RN, PHD
University of Nebraska Medical Center
llaframb@unmc.edu

MARGARET GRIFFITHS, MSN
University of Pennsylvania
griffimj@nursing.upenn.edu

KATHY RIDEOUT, EDD, PNP-BC, FNAP
University of Rochester
Kathy_Rideout@urmc.rochester.edu

PATRICIA COWAN, PHD
University of Tennessee Health Science Center
pcowan@uthsc.edu

KATIE MCCAY
University of Tennessee, Knoxville
kschwein@utk.edu

JANA MCCALLISTER, PHD
University of Texas at El Paso
jmccallister@utep.edu

CARRIE DESELMS, MSN
University of Wyoming
ToCarrie@uwyo.edu

DR. ELISABETH SHELTON, PHD
West Virginia University
eshelton@hsc.wvu.edu

CECIL HOLLAND, EDD, PHD
Winston-Salem State University
hollandc@wssu.edu

LINDA PELLICO, PHD, MSN, BS
Yale University
linda.pellico@yale.edu

Congratulations to the following schools who have received
NCIN funding for all five rounds.
Thank you for your continued hard work.

College of St. Scholastcia
Duke University
Georgia Health Sciences University
Kent State University
Mount St. Mary's College
Stony Brook
University of Pennsylvania
University of Rochester
University of Tennessee Health Science Center
University of Wyoming
West Virginia University

2008 *New Careers in Nursing* Grantees

Azusa Pacific University
Boston College
California State University–Fresno
Catholic University of America
Cleveland State University
College of St. Scholastica
Colorado State University–Pueblo
DePaul University
Drexel University
Duke University
Duquesne University
Florida Atlantic University
Illinois State University
Kent State University
Linfield-Good Samaritan
Louisiana State University
Medical College of Georgia
Medical University of South Carolina
Mount St. Mary's College
New York University
Norfolk State University
Northern Arizona University
Oakland University
Ohio State University
Oklahoma City University Kramer
Pace University Lienhard
Rush University Medical Center
Saint Louis University
Shenandoah University
South Dakota State University

State University of New York
Texas Christian University
Texas Tech University Health Sciences
   Center
Thomas Jefferson University
University of Alabama at Birmingham
University of California, Los Angeles
University of Detroit Mercy
University of Illinois–Chicago
University of Iowa
University of Maryland
University of Massachusetts
University of Medicine and Dentistry of
   New Jersey
University of Miami
University of Minnesota
University of Missouri–St. Louis
University of Pennsylvania
University of Rochester
University of San Diego
University of South Alabama
University of South Florida
University of Tennessee
University of Texas–Houston
University of Virginia
University of Washington
University of Wyoming
West Virginia University
Wright State University
Yale University

2009 *New Careers in Nursing* Grantees

Allen College
Azusa Pacific University
Bellarmine University
Belmont University
University of Oklahoma
California State University–Fullerton
California State University–Fresno
Cleveland State University
College of Mount St. Joseph
College of St. Scholastica
Cox College
Duke University
Duquesne University
Fairfield University
Fairleigh Dickinson University
Medical College of Georgia
Indiana University–Northwest Campus
Johns Hopkins University
Kent State University
Linfield College
Loyola University–Chicago
Marymount University
MidAmerica Nazarene University
Mount Carmel College of Nursing
Mount St. Mary's College
Northern Arizona University
Oklahoma City University
Salisbury University

Samuel Merritt University
Seton Hall University
Shenandoah University
South Dakota State University
Southern Connecticut State University
Stony Brook University
State University of New York
    Downstate Medical Center
Texas Tech University Health Sciences
    Center
University of Maryland–Baltimore
University of Massachusetts–Amherst
University of Medicine and Dentistry of
    New Jersey
University of Michigan
University of Mississippi
University of Missouri–St. Louis
University of Pennsylvania
University of Pittsburgh
University of Rochester
University of South Alabama
University of Tennessee Health Science
    Center
University of Texas–Austin
University of Wyoming
Ursuline College
Villanova University
West Virginia University

2010 *New Careers in Nursing* Grantees

Arkansas State University
Azusa Pacific University
Bellarmine University
Belmont University
Boston College
California State University–Fullerton
City University of New York–Lehman
    College
College of St. Scholastica
DePaul University
Drexel University
Duke University
East Tennessee State University
Fairfield University
Fairleigh Dickinson University
Felician College
Jacksonville University
Johns Hopkins University
Kent State University
Medical College of Georgia
Medical University of South Carolina
Massachusetts General Hospital Institute of
    Health Professions
MidAmerica Nazarene University
Mount St. Mary's College
Nebraska Methodist College
Norfolk State University
Northern Arizona University
Pace University
Quinnipiac University
Rush University Medical Center
Saint Louis University
Salisbury University
Samford University
Samuel Merritt University

Shenandoah University
Simmons College
Southern Connecticut State University
State University of New York–Downstate
    Medical Center
State University of New York–Stony Brook
State University of New York–University at
    Buffalo
Texas Tech University Health Sciences
    Center
Thomas Jefferson University
University of Alabama–Birmingham
University of California–Los Angeles
University of Hawaii–Manoa
University of Maryland–Baltimore
University of Medicine and Dentistry of New
    Jersey
University of Mississippi
University of Missouri–Columbia
University of Missouri–St. Louis
University of New Mexico
University of Pennsylvania
University of Pittsburgh
University of Rochester
University of South Alabama
University of South Florida
University of Tennessee Health Science
    Center
University of Texas–El Paso
University of Virginia
University of Wyoming
Ursuline College
Wayne State University
West Virginia University
Winston-Salem State University

2011 *New Careers in Nursing* Grantees

Allen College
Azusa Pacific University
Bellarmine University
Boston College
College of Mount St. Joseph
College of St. Scholastica
Creighton University
DePaul University
Duke University
Edgewood College
Fairleigh Dickinson University
Georgia Health Sciences University
Hampton University
Indiana Wesleyan University
Kent State University
Linfield College
Loyola University Chicago
Marquette University
Medical University of South Carolina
MidAmerica Nazarene University
Mount Carmel College of Nursing
Mount St. Mary's College
Nebraska Methodist College
New Mexico State University
New York University
Pennsylvania State University
Rush University Medical Center

Saint Louis University
Salisbury University
Samuel Merritt University
Southern Connecticut State University
Stony Brook University
SUNY Downstate Medical Center
Texas Tech University Health Sciences Center
Thomas Jefferson University
University of Miami
University of Alabama at Birmingham
University of Delaware
University of Detroit Mercy
University of Hawaii at Manoa
University of Mississippi Medical Center
University of Missouri--Columbia
University of Pennsylvania
University of Pittsburgh
University of Rochester
University of South Alabama
University of South Florida
University of Tennessee Health Science Center
University of Texas at El Paso
University of Wyoming
West Virginia University
Winston-Salem State University

2012 *New Careers in Nursing* Grantees

Allen College
Ashland University
Bellarmine University
Boston College
California State University- Northridge
College of Mount St. Joseph
College of St. Scholastcia
Columbia University
Coppin State University
Creighton University
DePaul University
Duke University
Duquesne University
Edgewood College
Fairleigh Dickinson University
Georgia Health Sciences
Kent State University
Linfield College
Medical University of South Carolina
MidAmerica Nazarene University
Montana State University
Mount St. Mary's College
Nebraska Methodist
New Mexico State University (NMSU)
New York University
Norfolk State University
Oregon Health & Science University
Quinnipiac University

Rush University Medical Center
Saint Louis University
Samuel Merritt University
Southern Connecticut State University
Stony Brook
SUNY Downstate
The George Washington University
The University of Tennessee-Knoxville
The University of Texas at El Paso
Thomas Jefferson University
University of California- UCLA
University of Delaware
University of Hawaii
University of Maryland, Baltimore
University of Massachusetts Amherst
University of Miami
University of Michigan-- Flint
University of Mississippi Medical Center
University of Missouri-- Columbia
University of Nebraska Medical Center
University of Pennsylvania
University of Rochester School of Nursing
University of Tennessee Health Science
    Center
University of Wyoming
West Virginia University Foundation
Winston-Salem State University
Yale University

ROBERT WOOD JOHNSON FOUNDATION
NEW CAREERS IN NURSING SCHOLARSHIP PROGRAM

One Dupont Circle, NW
Suite 530
Washington, DC 20036-1120
PHONE 202.463.6930
FAX 202.785.8320
www.newcareersinnursing.org

Robert Wood Johnson Foundation

American Association
of Colleges *of* Nursing

RWJF New Careers in Nursing is a national program of the Robert Wood Johnson Foundation.