

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

Shirley Farr, MSN, RN, CNS; Felicitas dela Cruz, DNSc., RN, FAANP; Marilyn Klakovich, DNSc., RN, NEA-BC; Phyllis Esslinger, MSN, RN

Azusa Pacific University

BACKGROUND

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.

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:

- Recruits and retains ethnically diverse students that mirror the communities of Southern California.
- Selects clinical sites that serve diverse and underserved populations, enhancing cross-cultural awareness, sensitivity, and sharing.
- Seeks clinical experiences that provide opportunities for students to acquire cultural tools and develop skills to communicate with diverse patients and families as well as to implement culturally-tailored care.
- Rotates students to the School of Nursing Neighborhood Wellness Center and participation in the Homeless Health Outreach Clinic.
- Integrates cultural concepts in each course.
- Has implemented a community mentoring program, matching students with mentors of similar ethnic and cultural backgrounds.
- Includes ELM Advisory Board members who are leaders of ethnically diverse communities and who represent collaborating health care

METHODS (continued)



RESULTS AND CONCLUSION

- Sixty percent of our students represent ethnic minorities.
- Students showed significant gains from pre to post-test on the Cultural Self-Efficacy Scale (measures student confidence in knowledge of cultural competence, knowledge of cultural patterns (African-American, Hispanic, Asian, American Indian cultures) and specific cultural nursing skills.
- Faculty demonstrated increased levels of confidence in cross-cultural competence and teaching methods with greatest change in cross-cultural communication skills following faculty workshop. In addition, faculty requested further education on cultural diversity.
- Qualitatively, students and their community-based mentors reported a higher level of confidence and satisfaction when there is ethnic concordance of the dyads.

Funded by
The New Careers in Nursing Program




An initiative of American Association of
Colleges of Nursing and the Robert Wood
Johnson Foundation.

REFERENCES

- American Association of Colleges of Nursing. (2008a) Cultural competency in baccalaureate nursing education. Retrieved from <http://www.aacn.nche.edu/leading-initiatives/education-resources/competency.pdf>
- Betancourt, J., (2006). Improving quality and achieving equity: The role of cultural competence in reducing racial and ethnic disparities in health care. *The Commonwealth Fund*. 1-19.
- Carpenter, L., & Garcia, A.,(2011). Assessing outcomes of a study abroad course for nursing students. *Nursing Education Perspectives*, 33 (2). 85-89.

Beyond PIP: Promoting Academic Success and Retention in Underrepresented Students

Leah Vota Cunningham, RN, MNEd ~ Assistant Dean, Student Affairs
Joan Such Lockhart, PhD, RN, CORLN, AOCN®, CNE, FAAN ~ Associate Dean, Academic Affairs

 **DUQUESNE UNIVERSITY**
SCHOOL OF NURSING
NLN Center of Excellence
2011-2015



BACKGROUND:

The importance of preparing all students, and particularly, underrepresented students in a rigorous accelerated program cannot be underestimated.

Twenty year history with accelerated Second Degree Program:

- ◆ Lessons learned
- ◆ Student successes and challenges
- ◆ Re-evaluated and developed new strategies

PURPOSE:

The poster showcases several strategies implemented during the two years since previous funding that we anticipate will improve these outcomes.

METHOD:

◆ Undergraduate Academic Enhancement Initiative was customized for accelerated students with PIP integration

- Began 1 week prior to official program start and continued weekly for seven weeks
- LASSI Assessment

◆ Dedicated master's prepared Academic Advisor

- Communicates and guides students from acceptance through pre-entry period
- Individualized advisement throughout program



◆ Dedicated student "coach" - Nursing Academic Preceptor

- Senior nursing student hired to work only with accelerated students
- Provides 1:1 coaching, small group recitation, test-taking guidance

◆ Implementation of Starfish Early Alert™ System



- Early identification of at-risk students
- Channels information to appropriate support staff
- Provides tools to manage resolutions
- Provides data to track outcomes
- Interfaces with Blackboard



◆ On-going Academic Enhancement Sessions conducted by Assistant Dean, Student Services and Academic Advisor

- Study skills strategies (PIP expanded)
- Test-taking strategies
- Test anxiety
- Small group sessions after exams



◆ Open door policy

◆ Faculty mentoring



RESULTS TRACKED:

Program success will be evaluated by the following measures:

- ◆ Cumulative GPA of 3.0 or higher
- ◆ Completion of program in 12 months
- ◆ First time NCLEX pass
- ◆ Feedback from students, advisors, faculty coach (formative/summative)

CONTACT:

cunningh@duq.edu

lockhart@duq.edu

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

FOSTERING SELF-CARE AMONG ACCELERATED NURSING STUDENTS: A PARTNERSHIP WITH THE UNIVERSITY COUNSELING CENTER

Mary Ann Glendon, PhD, MSN, RN & Lisa M. Rebesch, PhD(c), MSN, RN, CNE
Southern Connecticut State University
Department of Nursing

BACKGROUND

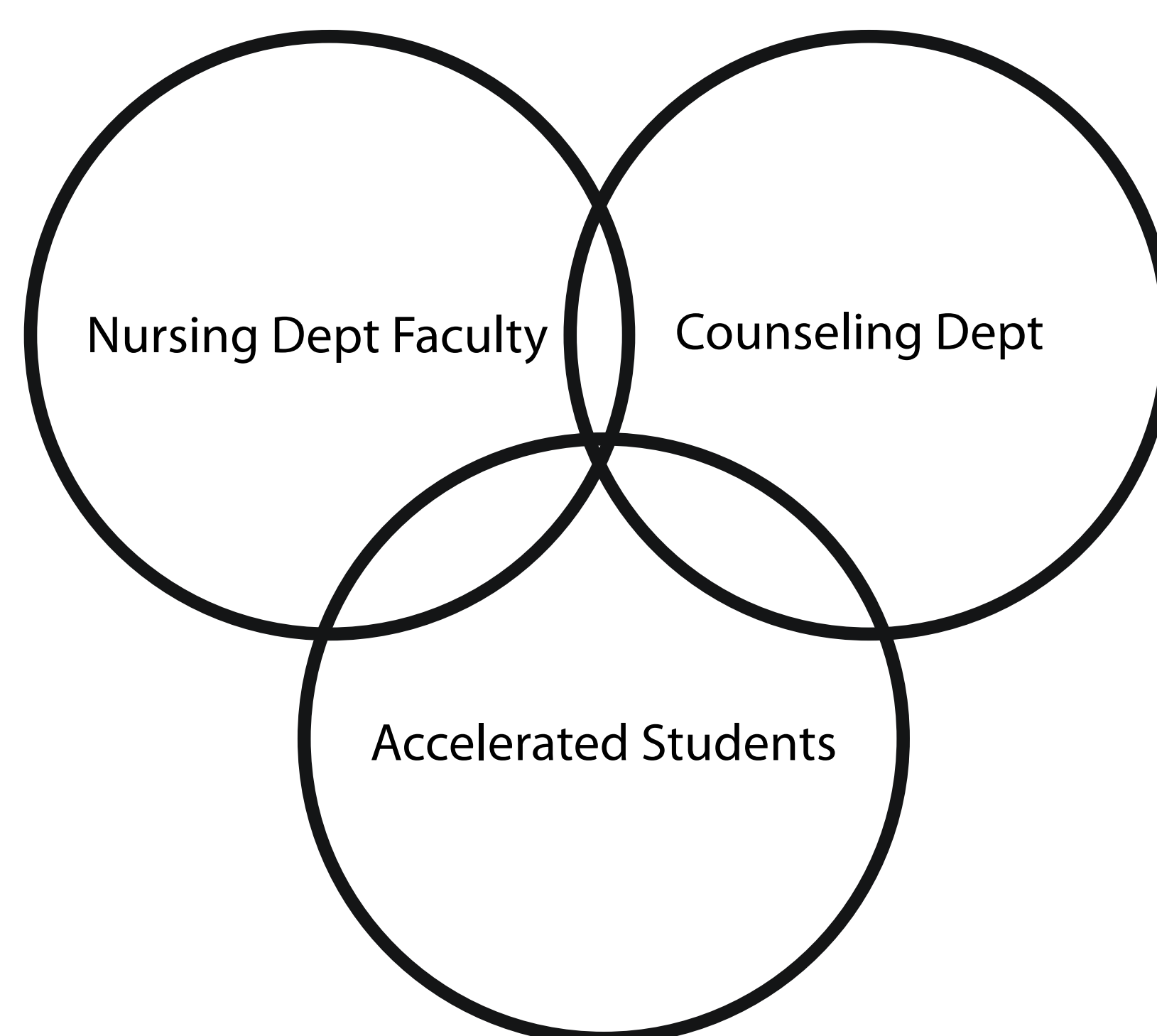
Accelerated nursing students beginning a new career confront a number of challenges as they attempt to successfully negotiate the educational system and learn about the healthcare arena (Siler, DeBasio, & Roberts, 2008). Based upon previous experiences with accelerated second career learners, the Department of Nursing at SCSU is acutely aware of the need to enhance self-care strategies among learners in order to facilitate success. Students often comment that their high expectations for success, family and personal demands, and financial obligations impact on their ability to learn and perform in the program (Hensel & Stoelting-Gettelfinger, 2011). In order to decrease stress, enhance coping abilities, and facilitate professional practice skills, the Department of Nursing has partnered with the University's Counseling Department on an innovative program.

PURPOSE

The purpose of this new initiative is to foster self-care practices among accelerated, second career nursing students. A partnership with the University's Counseling Department has been initiated in order to provide an ongoing program of support for students. In order to facilitate success, self-care strategies to decrease stress and maximize success are planned.

METHODS

Nursing faculty and counseling staff have been meeting to develop a plan of support and self-care for this academic year. The plan includes sessions facilitated by professional counselors held every two weeks immediately following one of the students' scheduled classes. Sessions are planned for 30-40 minutes. Informal groups sessions will address identified topics such as: building rapport, time management, test anxiety, self-reflection, meditation, yoga, guided imagery, healthy nutrition, and practical skills to optimize success. In order to maximize student success during "high stress" periods of the semester (i.e. Midterm, Final exam), a **Destress Festival and Lounge** is planned. Complementary options such as chair massage, aromatherapy, and relaxation exercises will be incorporated into the festival.



Partnership Model for Fostering Self-Care

RESULTS

Plans for evaluating this project include a number of metrics. First, students will complete a satisfaction survey of the program. The project directors will also seek feedback from faculty teaching in the accelerated program. Additionally, the project directors will meet regularly with Counseling Center staff to discuss trends that have emerged during the regularly scheduled sessions. Lastly, in order to determine effectiveness of this project, the overall student retention rate will be compared to previous accelerated student retention rate data.



CONCLUSION

In response to the growing shortage of professional nurses in the US, there has been a proliferation of accelerated nursing programs. In order to meet the unique needs of accelerated learners, educational programs should continue to tailor strategies aimed at enhancing student success. Programs designed to enhance self-care strategies may positively impact student retention, satisfaction, and success. Additionally, students may use self-care strategies learned in this project within their future professional practice.

REFERENCES

Funded by
The New Careers in Nursing Program

American Association of Colleges of Nursing Robert Wood Johnson Foundation

An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

Hensel, D. & Stoelting-Gettelfinger, W. (2011). Changes in stress and nurse self-concept among baccalaureate nursing students. *Journal of Nursing Education, 50*(5), 290-293.
Siler, B., DeBasio, N., & Roberts, K. (2008). Profile of non-nurse college graduates enrolled in accelerated baccalaureate curricula: Results of a national study. *Nursing Education Perspectives, 29*(6), 336-341.



GETTING RIGHT ON THE MONEY



Poster Category: Hot Topics

Barbara Lee, MSN, MEd, BC, CWOCN and Joan C. Masters EdD, MBA, APRN, PMHNP-BC
Lansing School of Nursing and Health Sciences
Bellarmine University, Louisville, KY 40205
E-mail contact: blee@bellarmine.edu

BACKGROUND

Student loan debt is now higher than it has ever been and threatens the future of many college students (Martin & Lehren, 2012). At \$870 billion, student loan debt now surpasses the \$693 billion Americans owe on credit cards and the \$730 billion owed on auto loans. While other debt has stabilized or decreased, student loan debt continues to trend upwards. The mean amount owed by student loan borrowers is \$23,300 but the median is \$12,800, indicating substantial variation among borrowers. About 25% of borrowers owe over \$28,000, 10% over \$54,000, and 3% over \$100,000 (Brown, Haughwout, Lee, Mabutas, & van der Klaauw, 2012). Student loan debt 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.

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 web sites; 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, stay connected to the RWJ NCIN community) but none (N = 5) mentioned finances.

Table 1.
Evaluation Instrument

Open-ended questions:

1. What did you learn that you did not know before?
2. What are two things you can apply to your life when you begin working as a nurse?
3. What aspect of finances do you wish you knew more about?

Likert scale items:

Strongly Disagree Disagree No opinion Agree Strongly Agree

4. Other nursing students would benefit from hearing this information.
5. I plan to start putting money into an emergency savings account when I begin my first job.
6. I plan to start putting money into a retirement fund when I begin my first job.
7. I plan to start paying off my student loans when I begin my first job.

Comments?

RESULTS

Students completed written evaluations. Scores on Likert scale items with a five-point scale ranged from 4.8 for one item (number 4) to 5.0 for four items (numbers 5 to 7). 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.

CONCLUSIONS

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 make the topic increasingly important to students and gives faculty a practical way to support graduate success.

REFERENCES AND PERSONAL FINANCE RESOURCES

REFERENCES

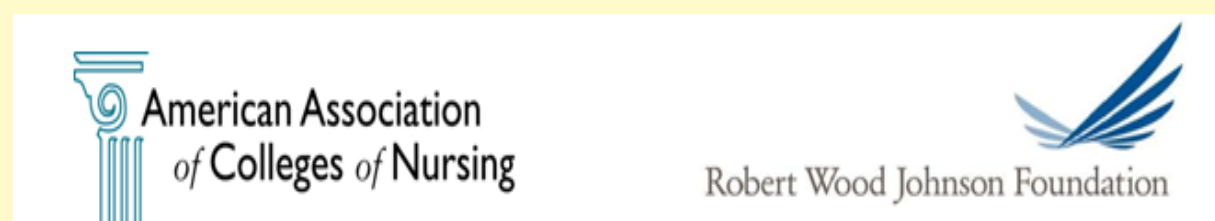
- Brown, M., Haughwout, A, Lee, D., Mabutas, M., & van der Klaauw, W.. (2012, March 5). Grading student loans [Web log]. Federal Reserve Bank of New York. Retrieved from <http://libertystreeteconomics.newyorkfed.org/2012/03/grading-student-loans.html>
- Martin, A., & Lehren, A. W. (2012, May 12). A generation hobbled by the soaring cost of college. *New York Times*. Retrieved from <http://www.nytimes.com/2012/05/13/business>

PERSONAL FINANCE RESOURCES

- Bissonnette, Z. (2012). *How to be richer, smarter, and better looking than your parent*. New York, NY: Penguin.
- Web sites:
 MSN.com, <http://money.msn.com/>
 Sue Orman, <http://www.suzeorman.com/>
 Dave Ramsey, <http://www.daveramsey.com/home/>
 Michelle Singletary's syndicated column for *The Washington Post* and personal website, <http://www.michellesingletary.com/default.html>

2012-2013 RWJ-NCIN SCHOLARS

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.



USING PHOTO-VOICE TO CHRONICLE THE EXPERIENCES OF UNDER-REPRESENTED AND UNDERSERVED STUDENTS IN AN ACCELERATED SECOND-DEGREE BSN PROGRAM

Cory Ann Boyd, EdD, RN, Lisa O'Connor, EdD, RN, Mary Ann Cordeau PhD, RN
Quinnipiac University

BACKGROUND

Second degree nursing students must adapt to new environments, learn and internalize the beliefs, values, and traditions of the nursing profession while mastering the science of nursing. They must also learn to balance full-time school life with home life since these students are older and often assume responsibility for 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. Under-represented and under-served students may have additional issues and concerns when attending nursing school. With the need to enroll and graduate these students, this study utilized photo-voice to illustrate their unique experiences.

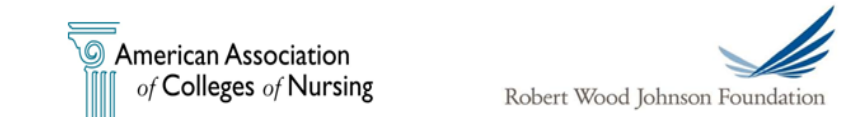
METHODS

Photo-voice and the U-Heuristic method for contextualizing 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 responses to posed questions. Photographs 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 discussion will be formally analyzed using Yin's case study method. Transcript analysis is in progress.

PURPOSE

The purpose of this study is to examine the unique experiences of under-represented / underserved students in an accelerated second-degree BSN program. It is anticipated that the findings will provide evidence for interventions related to recruitment, mentoring, and leadership development.

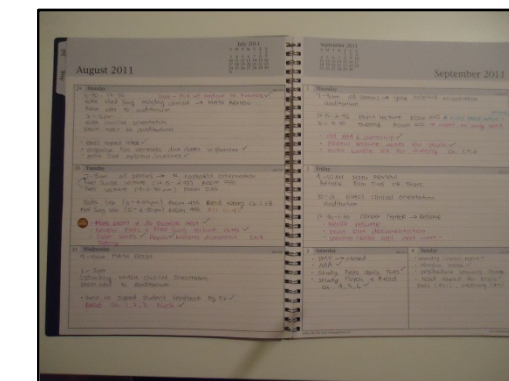
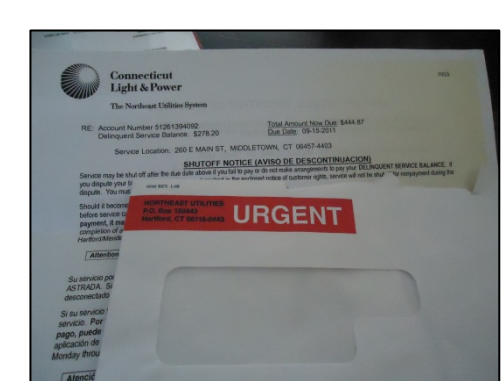
Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

PRELIMINARY FINDINGS

1. Participant stories of financial strain, stress of returning to school, family pressures, and the struggle to find balance are consistent with the current literature describing the accelerated student experience. The photos offered a stark statement of their life lives while in school.

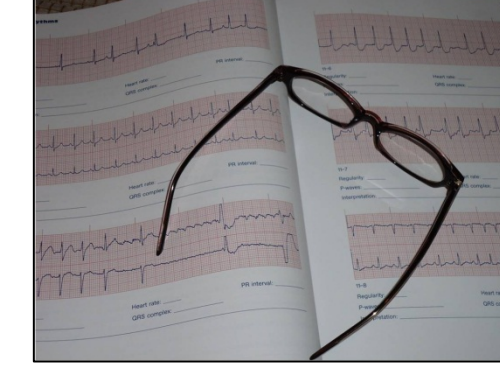
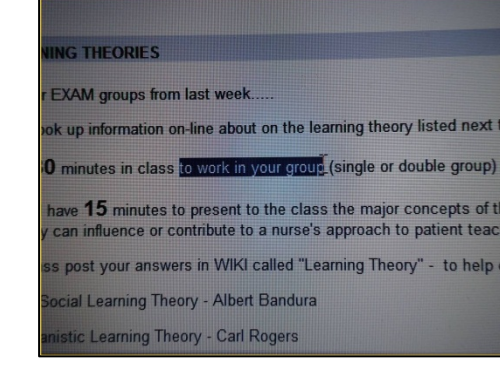


Financial Strain

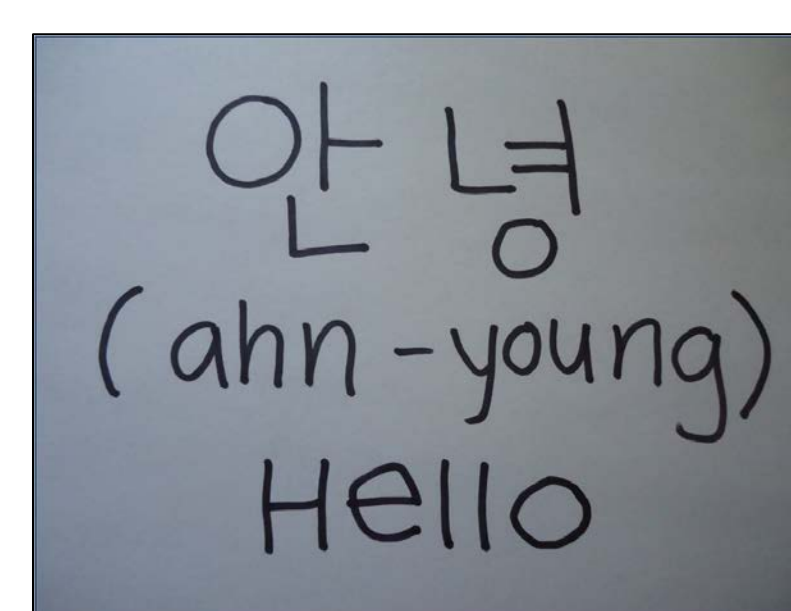
Returning to School

Family Pressures

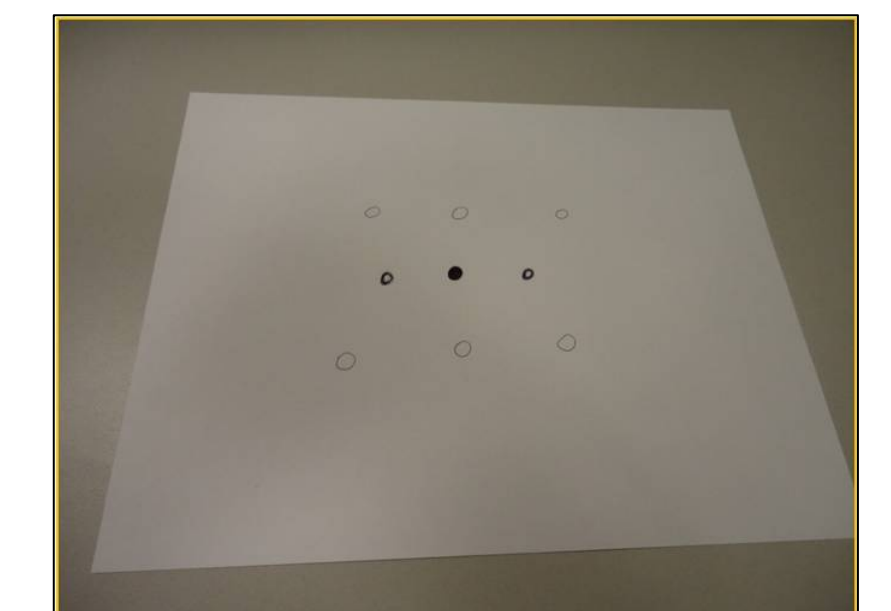
Balance



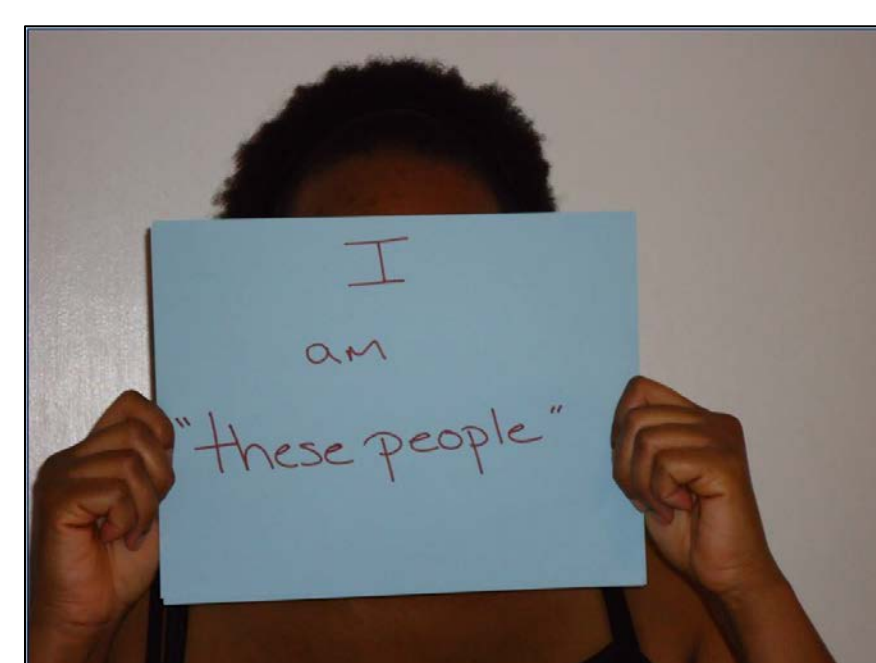
2. Participants described being acutely aware of their differences while in school and during their clinical experiences.



First Impressions: "There is a preconceived notion that I can speak Chinese because I am Asian. I can speak English and Korean. Throughout our nursing education we have been treated according to gender and ethnic-based stereotyping" (Mah, E., 2011).



3. Participants experienced occasions of ethnic stereotyping from other professional nurses.



I am: "I hear what you say about these people. I see how you react to these people. I know how you feel about these people...and I am these people." (Godfrey, S., 2011).

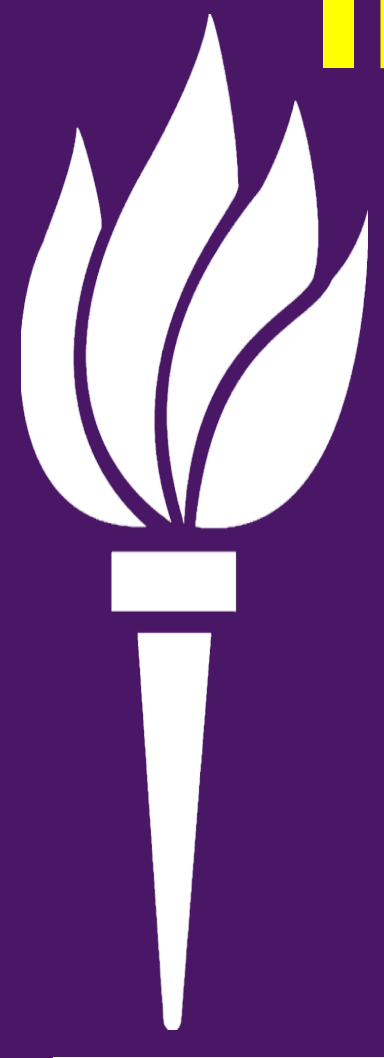


Out of the Shadows: "The degree of under-representation of Hispanic nursing students is so great in comparison to the general population that I often felt like a shadow in the hospital setting; I felt present, but not real. Hispanics, as employees in hospitals, are seemingly invisible as most of us are working behind the scenes in supportive services and not as highly visible professionals." (Benitez-Vargas, E., 2011).

4. Participants, as NCIN Scholars, believed that their classmates perceived them as having lower program standards to ensure their success in the program. Collectively the scholars understood that, in fact, the expectations were *more* demanding given their obligation to the mentoring and leadership programs.

REFERENCES

- Koltz, R. O. (2010). Picture Perfect: Photo-Voice to Explore Four Doctoral Students' Comprehensive Examination Experiences. *Journal of Creativity in Mental Health*, 389-411.
- Yin, R. (2009). *Case Study Research: Design and Methods*. Thousand Oaks: SAGE Inc.



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

Ann Marie P. Mauro, PhD, RN, CNL, CNE; & Kellie D. Bryant, DNP, WHNP-BC
New York University, College of Nursing, New York, NY



Background

There has been a call to radically transform the way we educate nurses and to shift the paradigm for clinical teaching (Benner, et al, 2010; Richardson, et al, 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 & technology, & 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).

Purpose

The purpose of our BS curriculum redesign was to: a) enhance integration of geriatric content; b) develop competencies focused on patient-centered, evidence-based, & culturally competent care in diverse settings; & c) implement innovative, integrative learning strategies along with an A-B clinical model using high fidelity simulation to cultivate clinical decision making skills (Mauro et al., 2012).

Methods

Our BS program has an enrollment of 860+ students; 80% are accelerated. Our academic calendar was modified to balance each semester's length & credit load. Content was streamlined to include essential quality & safety concepts, the most common acute & chronic health problems, the best available evidence, & use of technology, including on-line learning activities & high fidelity simulation. The traditional "medical-surgical" nursing & "stand alone" geriatric courses were transformed into Adult and Elder (A&E) Nursing I, II, & III with corresponding Integrative Seminar I, II, and III courses using unfolding case studies, students' actual clinical experiences, & reflection logs. Integrative learning strategies included the use of evidence-based geriatric assessment tools, smart phone technology applications, audience response devices, virtual patients, podcasting, & an A-B clinical model with 50% high fidelity simulation and 50% traditional experiences in acute care, sub-acute rehab, and long term care settings for the A&E & 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 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 3 to 4 week semester breaks. Program outcomes are being met. Feedback from students & clinical partners has been positive. Over 75 on-campus simulations take place weekly along with daily open simulation practice sessions. Students have multiple opportunities to engage in various off-campus clinical experiences in 100+ major medical centers & 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%.

References

- AACN. (2012, March). *Accelerated baccalaureate and master's degrees in nursing*. Downloaded from <http://www.aacn.nche.edu/media-relations/factsheets/accelerated-programs> on August 14, 2012.
- Benner, P., et al. (2010). *Educating nurses: A call for radical transformation*. San Francisco, CA: Jossey-Bass.
- IOM. (2010). *A summary of the February 2010 forum on the future of nursing: Education*. Washington, DC: The National Academies Press.
- Mauro, A.M.P., et al. (2012, May-June). Attaining baccalaureate competencies for nursing care of older adults through curriculum innovation. *Nursing Education Perspectives*, 33(3), 187-190.
- Richardson, H., et al. (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

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.



INTEGRATING SERVICE LEARNING AND LEADERSHIP DEVELOPMENT INTO A FIRST SEMESTER NURSING COURSE



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

BACKGROUND

- 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.

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 3-6 to a Service Learning site.
- 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.
- 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.”

Funded by
The New Careers in Nursing Program



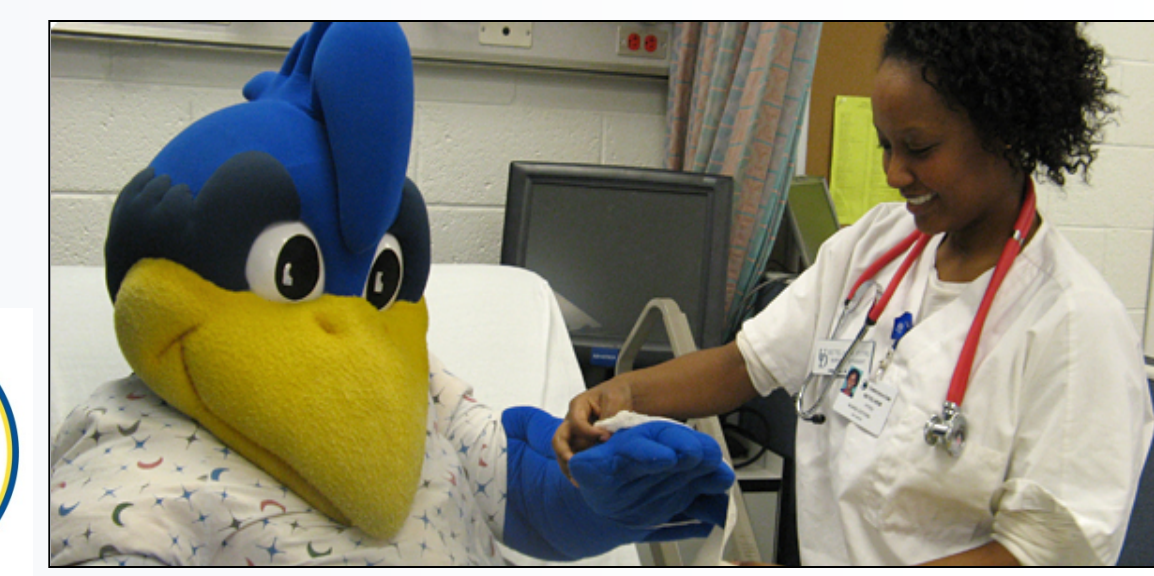
An initiative of American Association of Colleges of Nursing and the
Robert Wood Johnson Foundation

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

Elizabeth Bishop, Antoinette Boyd, Alyson Clyde, Rebecca DeBonis, Priya Dubey, Christine Gregory

Faculty: Regina Sims, PhD, Kathleen Schell, PhD, RN

School of Nursing, University of Delaware, Newark DE



BACKGROUND

- 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 & learning experiences. The project culminated in an oral & poster presentation to faculty and peers. This course product exemplifies an innovative method for teaching research & evidence-based practice. Additionally, a summary of the literature review provides insight into benefits & challenges of accelerated nursing students in a baccalaureate program & implications for nursing faculty.
- An accelerated BSN program is offered in a 12–18 month format to students who already hold a Bachelor's degree in another field; these students must complete all prerequisites to Nursing coursework prior to admission, including Anatomy, Physiology, & Microbiology.¹
- Accelerated students are frequently middle aged with responsibilities such as a job, family, & various financial obligations; many are between the ages of 28 & 40.^{2,3}
- Given that the typical traditional student & accelerated student are very different, it is of interest to see if there are also differences in performance in the academic & clinical areas of school, if holding an additional degree and maturity affect accelerated students, & what the implications are for faculty addressing a classroom of accelerated students.

PURPOSES

- To showcase an experiential course assignment in a required undergraduate nursing research course.
- To summarize literature focused on comparison of accelerated & traditional baccalaureate nursing students in academic and clinical performance.

METHODS

- Students were assigned to groups for an experiential aspect of a 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, evaluation of the literature, & development of the oral & 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". Thirteen articles were selected as the most relevant to the topic & were reviewed for the comparative effects of having earned a previous bachelor's degree, effects of maturity, GPA and NCLEX performance, clinical performance, & faculty approaches to teaching accelerated students.

ADVANTAGES & DISADVANTAGES OF HOLDING AN ADDITIONAL DEGREE

- Typical traditional students are high school graduates continuing their education; accelerated students already have a 4-year bachelors degree.³
- Accelerated students who hold degrees in science tend to find nursing school an easy transition, perhaps because of an inherent understanding of scientific terms & concepts introduced in early nursing courses.²
- Accelerated students who hold a humanities degree feel more prepared to handle the many writing assignments in nursing courses than accelerated students who hold science degrees.²
- Accelerated students are more confident because they already have shown they are academically successful in a previous degree; traditional students do not have this confidence.³

EFFECTS OF MATURITY

- Accelerated students are cognitively more mature & independent learners; these qualities make them strong critical thinkers.³ Critical thinking scores are higher in accelerated students at program start but there is no statistically significant difference between traditional and accelerated students at program end.⁴
- Typically accelerated students show academic maturity from the beginning of a nursing program; this may be because they have already completed a degree & are familiar with effective learning techniques.⁵
- However, accelerated students who have been out of school for several years typically need to re-learn how to study, whereas students who are continuing from high school already have this skill set.²
- Second degree students as adult learners possess greater maturity, motivation & engagement for learning. They have higher expectations for self.^{6,7}
- Students undertaking second degrees are more goal-oriented & have a greater capacity for critical thinking and learning. They perceive themselves as more self-directed.⁸
- Accelerated nursing students may experience an increase in stress and responsibility in their lives due to families, bills, & other jobs. This can be a challenge for the accelerated students in their academic career.⁵



GPA & NCLEX

- Accelerated students have higher GPAs in pre-requisite coursework, particularly in sciences, than their traditional counterparts.⁴
- They continue to maintain higher GPAs longer than traditional students throughout the nursing program.⁴
- Research shows that GPA is an indicator of NCLEX success.⁹
- Some studies suggest that accelerated students have a higher NCLEX passing rate than traditional students. These data, however, are not statistically significant.⁹
- The strongest predictors of NCLEX success were cumulative GPA, grades in science classes, & the number of C grades in clinical courses.⁹
- The strongest predictor of NCLEX failure was a grade of "C" in a clinical course, particularly when coupled with additional "C" grades in other courses.⁹

FACULTY TEACHING STYLE

- Accelerated students respond best to learner-centered teaching, which uses their past knowledge & background to reflect upon, integrate & build upon the education they already have.¹⁰
- Accelerated students prefer clinical-based teaching when compared to traditional students.^{5,8}
- Accelerated students are more motivated to learn when faculty use evidenced-based clinical problem solving via case studies.^{8,11} They want to learn to think like a nurse.¹⁰
- Accelerated students prefer a totally web-based or web-enhanced classroom with some classroom interaction and a handout that corresponds with the lecture.⁸
- Accelerated students place added value on a relationship with their faculty—they expect faculty to know them & address them by name in the classroom.^{8,11}
- Accelerated students thrive in a challenging program; however, it is vital that instructors set realistic goals for students. Incongruent expectations result in frustration for both the educator & students.¹²

REFERENCES

- American Association of Colleges of Nursing. (April, 2012). *Fact Sheet: Accelerated Baccalaureate and Master's Degrees in Nursing*. Retrieved on September 10, 2012 from: <http://www.aacn.nche.edu/media-relations/fact-sheets/accelerated-programs>
- Lyon, D., Younger, J., Goodloe, L., & Ryland, K. (2010). Nursing students' perceptions of how their prior educational foci and work experience affected their transition into an accelerated nursing program. *Southern Online Journal of Nursing Research*, 10(1).
- Korvick, L.M., Wisener, L.K., Loftis, L.A., & Williamson, M.L. (2008). Comparing the academic performance of students in traditional and second-degree baccalaureate programs. *Journal of Nursing Education*, 47(3), 139-141.
- Pepe, C.A., Brown, J.M., & Alverson, E.M. (1997). A comparison of critical thinking abilities between accelerated and traditional baccalaureate nursing students. *The Journal of Nursing Education*, 36(1), 46-48.
- McNiesh, S., Benner, P., & Chelsa, C. (2011). Learning formative skills of nursing practice in an accelerated program. *Qualitative Health Research*, 21(1), 51-61.
- Raines, D.A. (2010). Nursing practice competency of accelerated bachelor of science in nursing students. *Journal of Professional Nursing*, 26(3), 162-167.
- Ouellet, L.L., MacIntosh, J., Gibson, C.H., & Jefferson, S. (2007). Evaluation of selected outcomes of an accelerated nursing degree program. *Nursing Education Today*, 28(2), 194-201.
- Walker, J.T., Martin, T.M., Haynie, L., Norwood, A., White, J., & Grant, L. (2007). Preferences for teaching methods in a baccalaureate nursing program: How second-degree and traditional students differ. *Nursing Education Perspectives*, 28, 246-250.
- Bentley, R. (2006). Comparison of traditional and accelerated baccalaureate nursing graduates. *Nurse Educator*, 31(2), 79-83.
- Diessnack, M., Mobily, P., Stineman, A., Clow, T., Montgomery, L.A., & Eisbach, S. (2011). We are different: Learning needs of accelerated second-degree nursing students. *Nurse Educator*, 36(5), 214-218.
- Rico, J.S., Beal, J., & Davies, T. (2010). Promising practices for faculty in accelerated nursing programs. *Journal of Nursing Education*, 45(3) 150-155.
- D'Antonio, P., Beal, M.W., Underwood, P.W., Ward, F.R., McKelvey, M., Guthrie, B., & Lindell, D. (2010). Great expectations: Points of congruency and discrepancies between incoming accelerated second-degree nursing students and faculty. *The Journal of Nursing Education*, 49(12), 713-717.
- Williams, P.R., Martin, J.T., Northington, T., Wmanalt, P., Beacham, T., & Grant, L.V. (2008). Comparing clinical competencies between nursing students with degrees and traditional students. *Issues in Educational Research*, 18(1), 90-100.

CLINICAL PERFORMANCE

- Traditional students prefer to learn by observing an experienced nurse; accelerated students place more value on practicing skills on their own until they feel confident.⁵
- Accelerated students tend to display more independence & rely less on their clinical instructors for advice, which is perhaps attributable to their responsibilities from other careers.⁵
- Accelerated students learn best with a multi-disciplinary approach. Learning is enhanced when clinical scenarios & examples are frequently incorporated into their academic classes.¹⁰
- Accelerated students have more self confidence than traditional BSN students in their ability to develop & prioritize a nursing diagnosis.¹³

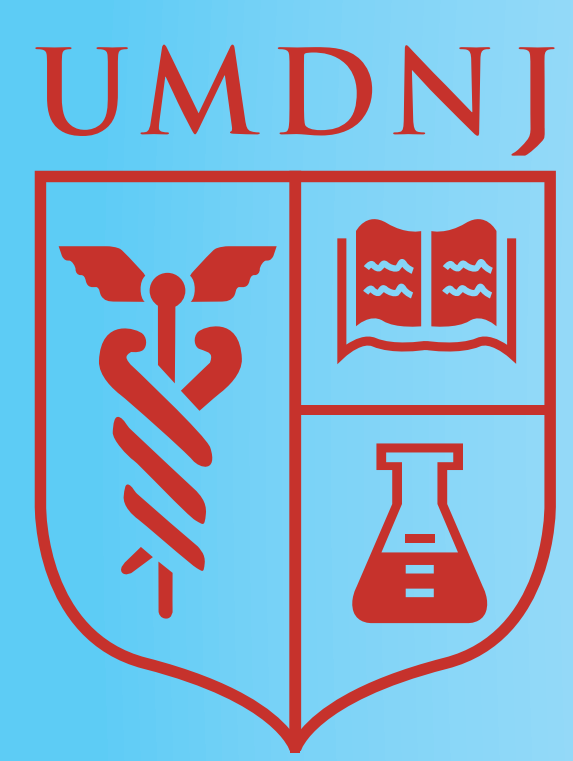
RESULTS & CONCLUSIONS

- 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 & traditional students vary in the following ways:
 - Previous degrees earned by accelerated students allow them to apply skills obtained in their first degree as well as previous college studying experience.
 - Maturity is a double-edged sword— the additional life experience helps with critical thinking & discipline, but often increased responsibilities distract the student.
 - Accelerated students generally have higher GPAs, which can be a predictor of NCLEX success.
 - Accelerated students tend to be more independent & confident in the clinical setting, perhaps due to previous career experience.
- Faculty should consider adjusting their teaching style to incorporate more real-life clinical examples when teaching the accelerated students. Students appreciate the opportunity to apply skills which they bring into a program.
- Several of the reviewed studies were qualitative with few participants who were studied for a short time or quantitative with limited sample size. Sampling was often from the same school. Future research should include quantitative, longitudinal studies that evaluate & validate educational practices used with accelerated students and that track their career paths after graduation.

Funded by
The New Careers in Nursing Program



An initiative of American Association
of Colleges of Nursing and the Robert
Wood Johnson Foundation.



NALC: Nursing As An Additional Language And Culture Program - An Innovative Approach To Support Student Success In An Accelerated BSN Program.

Denise M. Tate, EdD, APRN, WHNP-BC, ANP-BC
Renée Cantwell, DNP, RN, CNE

Background

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% and 3.6% 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 (ABSBN) Program indicated an academic attrition rate (failure to graduate from program) of 14.4 % for all students. Of these graduating cohorts, ethnically and culturally diverse students experienced an academic attrition rate of 22.4% as compared to 2.2% for Caucasian students.

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

Methods (continued)

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 and Recommendations

After a pilot study, the NALC program was offered four times during 2010-2011. Of the 45 students who participated in the programs, 99% progressed, 100% 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.

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.



BACKGROUND

Montana:

- 630 miles from East to West and 255 miles from South to North

Critical Access Hospitals:

- 48 critical access hospitals (CAHs) in Montana
- serving 735,993 persons living in rural and frontier areas
- tasked with developing and sustaining quality care for rural and frontier residents

Nurse Leaders in CAHs

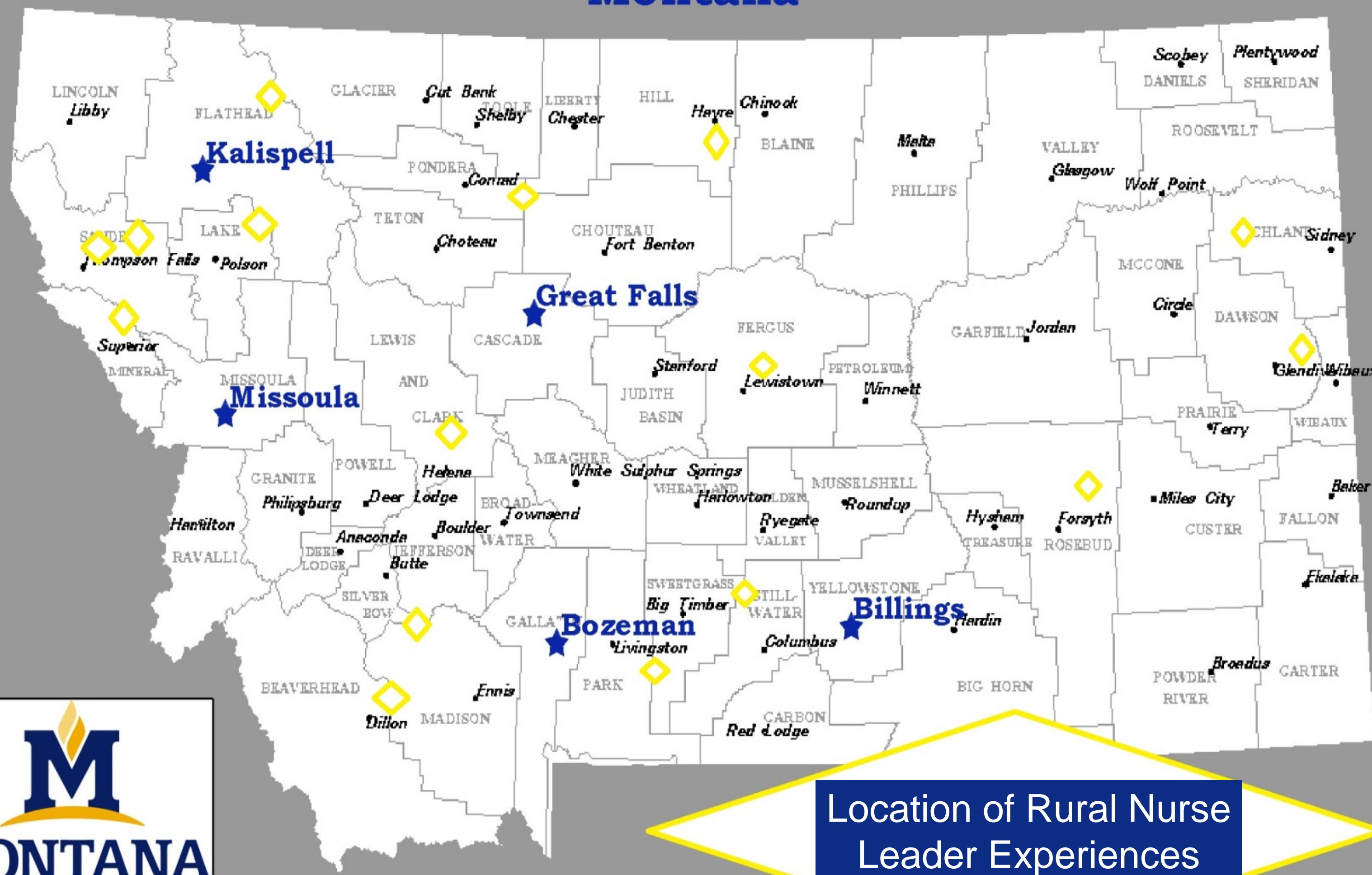
- Expert generalists
- Manage multi dimensional roles—including direct care, supervision, legislative and upper administration liaison, & team building
- Challenges in CAH leadership are unique to the rural setting

(Dissertation Research by Seright, 2010; 2011):

Montana State University (MSU):

- Accelerated BSN launch May 2011

Montana



Location of Rural Nurse Leader Experiences



PURPOSE

MSU Mission Statement:

- Educate student, creates knowledge and art, and serve communities by integrating learning, discovery, and engagement
- BSN accelerated students at MSU have a responsibility to engage in leadership activities which provide a broader understanding of both the rural healthcare system and the challenges of providing care in a rural state

Critical Access Hospitals are integral to the health of Montana citizens

- BSN students are not traditionally placed in these rich learning environments

METHODS

6 months prior to course launch:

- Recruitment of Facilities and Nurse Leaders by lead faculty

One month prior to course launch:

- Students established and maintained contact with the nurse leader via phone and email to plan projects

Course launch:

- 6 week course
- Students traveled to their destination facility
 - Range: 20 miles to 472 miles from campus
 - Housing was supplied by the facility for students in need at no charge

2 Major Projects with Rural 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 (2005) Healthy Workplace Standards

REFERENCES

Seright, TJ. (2011, July). Clinical decision-making of rural novice nurses. *Rural and Remote Health*. 11:1726. *The International Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy*. Available: <http://www.rrh.org.au> Double-blind peer reviewed

American Association of Critical-Care Nurses (AACN). AACN standards for establishing and sustaining healthy work environments: a journey to excellence. *Am J Crit Care* 2005;14:187-197

Funded by:

The New Careers in Nursing Program

An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.



RESULTS & CONCLUSIONS

- Students and Nurse Leaders reported high rates of satisfaction with the clinical experience and the projects
- Utilization of student evidence based projects to inform policy, procedure and staff education by all sites

The Rural/Critical Access Setting offered opportunity for:

- Engagement with authentic leadership in a challenging and unique setting
 - Opportunity for open dialogue and professional communication
- Application of meaningful and evidence based research for real-world rural issues



OUR EXPERIENCE AT THE AACN POLICY SUMMIT

Michael Indergaard, Zachary Fox,
Sheila Leander, R.N., Ph.D., and Rita Wunderlich, R.N., Ph.D., C.N.E.
Saint Louis University School of Nursing

Unique Challenge

Nurses are hesitant to participate in political processes.

Purpose

Gain knowledge of nursing policy processes that govern the country.

Foundation

Institute of Medicine report, *The Future of Nursing: Leading Change, Advancing Health*, (2011) recommends four key items:

1. Nurses should practice to the full extent of training
2. Nurses should achieve higher levels of education and training.
3. Nurses should be full partners with other health professionals in redesigning health care.
4. Effective workforce planning and policy making require better data collection and an improved information infrastructure.

This poster was selected for the
2012 Saint Louis University
Senior Legacy Symposium

Winner of 2009 Jesuit Association of Student Personnel Administrators (JASPA) Ignatian Medal for Outstanding Campus Programs.

Our Background Preparation

Registered Nurses are the largest health profession, with 3.1 million.

Advocacy is a professional responsibility, as outlined in the American Nurses Association Code of Ethics (2001).

We read the Summary, Overview and Part I of the Institute of Medicine report (2011).

What Can Nurses Do?

Meet with governing bodies at the local, state, or federal level to advance the profession.

Join a professional organization in the area of nursing in which each nurse works.

Understand and know the issues that affect nursing.

Our Collaboration during the Summit

Met with state AACN member deans to go over our approach with the Senators' offices

Met with other students throughout the country to discuss how they are influencing change.

What We Did

Met with the legislative aides for Missouri Senators to discuss healthcare issues.

Advocated for Nursing Workforce Development Programs (Title VIII)

Advocated for the National Institute for Nursing Research (NINR)

Advocated on behalf of Nurse Managed Health Clinics which can provide clinical sites for nursing students.

Conclusion

Throughout the Summit, we learned skills that enhanced our ability to be a voice for our patients and our profession.

A nurse cannot change the status quo unless you are able to speak up for change

Future growth in nursing lies not only with clinical practice, but also with a foundation for advocacy.

References

- Institute of Medicine (2011). *The Future of Nursing: Leading Change, Advancing Health*. Washington, DC: The National Academies Press.
- American Nurses Association (2001). *Code of Ethics for Nurses with Interpretive Statements*. Silver spring MD: American Nurses Association,

Funded by The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.



TOMORROW'S LEADERS-TODAY'S CHANGE: NCIN SCHOLARS AS POLITICAL ADVOCATES

Sherri Ulbrich, PhD, RN, CCRN & Gregg Bush, GN, NCIN Scholar
University of Missouri Sinclair School of Nursing

Background

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.

Scholar Issue Background: As a result of the 2011 devastating tornado in Joplin, Missouri, access to health services needed by residents and the local hospital was obstructed because no state mechanism existed to enable trained and licensed providers to provide health care after a disaster without meeting additional and time-consuming requirements.

(Background photo of St. John's Mercy Regional Medical Center, Joplin, MO after May 22, 2011, tornado. Associated Press)

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 the Missouri Nurses Association (MONA) and American Nurses Association (ANA) in political advocacy.

Scholar Purpose: Garner legislator support for the Volunteer Health Services Act (HB1072) which would allow licensed health professionals to provide volunteer services within their scope of practice for a sponsoring organization during natural disasters without additional licensure requirements. The bill also offers limited liability protection.

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 (D) to advocate for the Volunteer Health Services Act (HB 1072). NCIN funds were used to fund the scholar registration fees.

January 19, 2012 - Nurse Advocacy Day was introduced to the scholars during a leadership session. Resources such as the House and Senate websites, conference agenda, overview of the legislative process, and websites of health related bills were shared. Scholar roles in planning and participation were decided among the group.

January-February, 2012 - The group selected the Volunteer Health Services Act, developed an advocacy plan including a single-page fact sheet, an "elevator pitch", and contacted legislators for appointments.

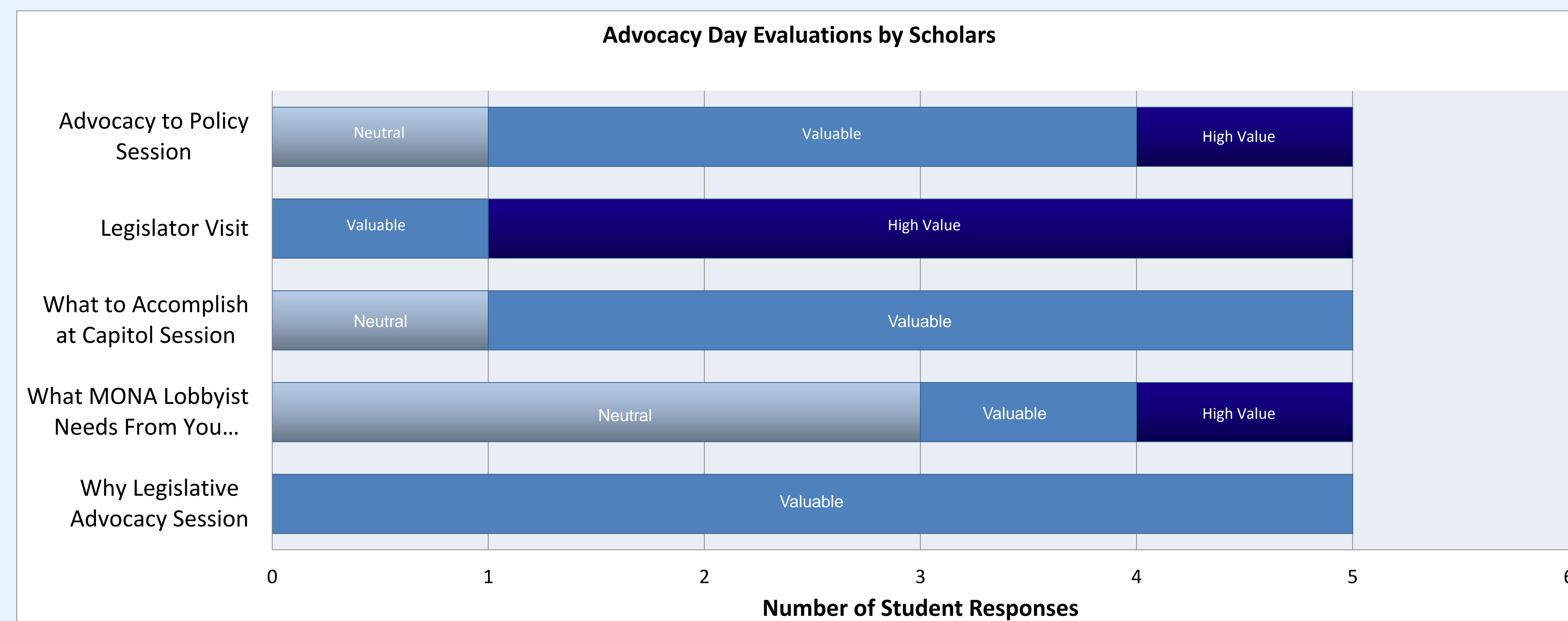
February 10, 2012 - Scholars attended a faculty presentation about political advocacy and Nurse Advocacy Day.



February 22, 2012 - Scholars attended Nurse Advocacy Day including five sessions about current legislation and advocacy skills by MONA and ANA leaders. Scholars met Representative Webber in his office and formally requested his support of the bill using their prepared materials.

Results

Scholars evaluated each main Advocacy Day activity on a 5pt Likert scale (high value to not at all valuable) on the school's NCIN Blackboard site. Most sessions were generally considered valuable with no session receiving low value or not valuable responses.



Four of five scholars rated visiting with their legislator as very valuable and many added comments about its value (see quotes below). Legislator awareness of the presence and advocacy of nurses in public policy increased. The scholars took active leadership roles in the political process to improve the provision of health care in Missouri during disasters by advocating for needed legislative change. Scholars recommended a guided and interpreted tour of the capitol for future groups.

Scholar results: The Volunteer Health Services Act passed in the House on March 15, 2012. The bill was amended and passed in the Senate on May 14, 2012 and is awaiting a joint conference.



"Visits with the legislators really brought everything into perspective."

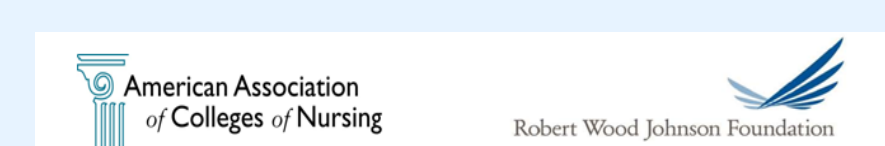
"The most valuable part was understanding and participating in the legislative process...that we had to research a bill and present it to our legislator made Nurse Advocacy Day more meaningful...It gave me a more in depth understanding of being a nurse advocate aside from the clinical setting."

"Some of the most valuable things I gained were the experience with the legislator, learning more about how I will be able to impact the nursing community, as well as hearing about the experiences of nurses whom advocate for positive changes in the nursing field every day."

Conclusions

NCIN Scholar participation in MONA Nurse Advocacy Day was an effective leadership activity to develop knowledge, skills, and confidence in political advocacy. Scholars taking an active role by advocating for an issue contributed significantly to the success of the activity.

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

References

- <http://www.house.mo.gov/billtracking/bills121/sumpdf/HB1072C.pdf>
- <http://www.house.mo.gov/billsummary.aspx?bill=HB1072&year=2012&code=R>
- <http://www.house.mo.gov/member.aspx>
- http://www.senate.mo.gov/12info/BTS_Web/Actions.aspx?SessionType=R&BillID=353
- Missouri Nurses Association. (2012). Nurse Advocacy Day, Retrieved from <http://www.missourinurses.org/displaycommon.cfm?an=1&subarticlenbr=56>
- Missouri Nurses Association. (2012). MONA Bill Status Report. Retrieved from <http://www.missourinurses.org/associations/10264/files/2-10-12BillStatusReport.pdf>



SUCCESSFUL ORIENTATION: STUDENT EVALUATION AND ACADEMIC OUTCOMES

AFTER NCIN PRE-ENTRY IMMERSION PROGRAM

Sherril Ulbrich, PhD, RN, CCRN & Cheryl Bausler, PhD, RN

University of Missouri Sinclair School of Nursing

Background

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.

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 4 PIP was planned. The entire accelerated BSN nursing class was invited, with 30 of 50 attending, including all 5 NCIN scholars. The PIP was held May 9-10, 2012, 2 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 14 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.

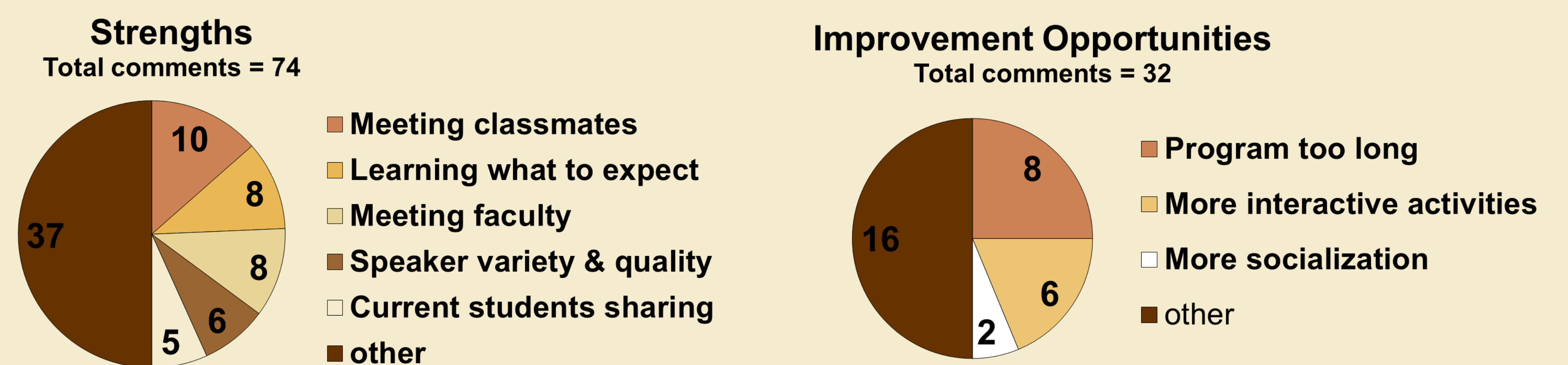
TIME/LOCATION	DAY ONE: ACTIVITY	LEAD
0800-0820 S455	WELCOME – INTRODUCTION OF DEAN, FACULTY, AND STUDENTS; INTRODUCTION TO PIP	Dean Miller, Drs. Ulbrich, Bausler, & McDaniel
	Review of Agenda/Logistics – classroom objectives, expectations, etc	Drs. Ulbrich & Bausler
0820-0930 S455	Nursing School Introduction 1. Who Are You/Exploring Differences Exercise 2. Nursing Experience Exercise 3. Nursing Framework Exercise	Dr. Ulbrich
0930-0950 S455	Critical Thinking Applied to Nursing	Heidi Holtz
0950-1000	Break	
1000-1100 S248	Medical Terminology	Pam Evans-Smith
1100-1200 S455	Success and Survival Strategies from Current Accelerated Student Panel	Ebonyck Allen, Gregg Bush, Brittanee Daniels, Brittany DeLaney, Jose Gamboa
1200-1300 S455	Lunch & Socialization with Current Accelerated Students	All
	Learning About Learning – students become familiar with the rigors of an accelerated program	
1300-1345	1. Adult Learning and Accelerated Learning Process Exercise	Kathleen Ellis
1345-1420 S455	2. Goal Setting for Life Balance, Stress Mgmt, Self-Care	Brenda Hanson & Chris Grider
1420-1430 S455	Break	
1430-1515	Time Management 1. Time Management Presentation 2. Goal Setting For Time Management	Kari Lane
1515-1600	3. Test Success Book	Dr. Ulbrich
1600-1630	Wrap-Up and Evaluation	

TIME/LOCATION	DAY TWO: ACTIVITY	LEAD
0800-0810 S455	Introductions & Review of Agenda	Drs. Ulbrich & Bausler
	Skill Development 1. LASSI – Overview 2. Study skills	Dr. Bausler Dr. Ulbrich
0810-0845 0845-0915		
0915-0950 S455	1. Test Taking Techniques 2. Test Taking Goal Setting	Gretchen Gregory
0950-1000	Break	
1000-1100 S455	School Policies & Procedures, Accelerated Curriculum & Schedule, Tour of Lab	Dr. Bausler
1100-1130 S455	Professional Socialization Professional Etiquette	Val Bader
1130-1200 S455	Lunch	
	Journey from Nursing Student to Nursing Leader 1. National Student Nurses' Association 2. Professional Organizations (MONA, ANA)	Donna Otto Alysa Cairer Marcia Flesner
1200-1230		
1230-1300 S455		
1300-1330 S455	Non-NCIN Scholars PIP Evaluation	Dr. Bausler
1300-1330 S455	Leadership Program Overview	Dr. Ulbrich
1330-1500 S455	Mentoring Program 1. Successful Mentoring 2. Speed Matching Exercise	Drs. Ulbrich & Bausler & Mentors
1500-1600 Computer Lab	Wrap-Up & Evaluation Completion of NCIN Entry Survey	Dr. Ulbrich

Results

Overall student evaluations, 23/24 on day 1 and 18/19 on day 2, 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 were asked to identify 3 strengths and 3 opportunities for improvement for the PIP which were analyzed for themes (see charts below).

Common Themes in Student Evaluation Comments



Numerous other comments referred to feeling less anxious, less stressed, better prepared, and excited after attending. Students wrote, "I learned a lot and had lots of questions answered and feel a lot less stressed about what nursing school is going to be like" and "Thank you! Great way to get students to know one another better and get over anxieties." Decreased levels of stress and anxiety among PIP attendees may be another outcome.

The final course grades of PIP attendees and non-attendees were compared after the first semester. In all 4 courses, PIP attendees scored on average 0.5-1.4 points higher than non-attendees. Higher achieving students self-selecting to attend the PIP may also account for at least some of the differences in test scores.

Summer Course	PIP (n=~30)	Non-PIP (n=~20)
Foundations	90	88.6
Patho	90.2	89.3
Skills	89.5	88.8
Research	88	87.5

Conclusions

The Pre-Entry Immersion Program prepares students to meet the challenges and be successful in an accelerated BSN program. The most common perceived strengths are socialization with other students and faculty and learning about what to expect. The PIP may also have academic benefits. Considerations for future improvements include condensing the format into one day for non NCIN scholars, using the online PIP supplement, and adapting the PIP to traditional BSN programs.

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

References

Robert Wood Johnson Foundation/AACN. Pre-Entry Immersion Program Toolkit. Retrieved from <http://www.newcareersinnursing.org/resources/pre-entry-immersion-program-toolkit>

RESULTS FROM THE LEARNING COLLABORATIVE FOR ACCELERATED MODELS OF NURSING EDUCATION

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, University of Massachusetts, Worcester Graduate School of Nursing; Patricia White, PhD, ANP-BC, ANP, Simmons College

BACKGROUND

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 on line open-ended survey designed to have 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.

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

Content analysis was performed using Krippendorff's technique with his unit of analysis of themes. The student nurses' written comments were read by four researchers so a sense of the whole could be determined. The text was then coded, noting phrases or sentences that related to specific research questions. Passages were selected, enumerated and categorized. Comparisons were made, and attention paid to unique comments as well as recurrent passages. Phrases and sentences were clustered to identify data that shared some characteristics. An audit trail that recorded personal reflections and methodological decisions was created and reviewed by all authors. Dendrograms or tree-like diagrams were created to illustrate how data were collapsed into themes.

Sample: Yale Students: 55/76 (72%)/ Simmons Students: 13/38 (34%)

Age mean= 26 Range = 20-43

Gender 90% F 10% M

Race

Caucasian	81%
African American	4%
Asian	9%
American Indian	1%
Other Pacific Islander	1%
Hispanic or Latino	3%

Educational background

Yale	Simmons
BA- 40 (73%)	BA-8 (62%)
BS-15 (27%)	BS-5 (38%)
BSW-1	
MA-4	
MS-3	
MPH-5	
MBA-1	

Demographic Data: 15 % are married, 7% have children; 91% need loans to support their education, 42.6% do not work during the first year while 35% work less than ten hours a week.

RESULTS

Question One: What worked well in Year One? Theme one: There is a method to the madness

System Structure: Ordering of coursework, sequencing, continuity, cadence, immersion, interrelations; "coursework is cohesive and planned in such a fashion that lays a good foundation of nursing for the student with no previous exposure to the field."

Experiential/relationship: "Clinical, Clinical, clinical...instead of memorizing facts from books, I was able to put faces and treatment plans to the disease"; faculty concern, expertise, support- care, "Amazing faculty that really helped me to learn the material quickly and effectively."; "Big Sibs", non-competitive supportive environment.

Question two: What did not work well? Theme: This is madness

Structure- what structure? "I hate that I never know what lies around the corner." Unacceptable disorganization of schedules; "one week at a time does not work for every person." Syllabi are confusing and poorly integrated; "there is no standard curriculum, the lectures, the content are all over the place." "Some courses were quite detailed and thorough while others were more vague...more detail would have been valuable." "I had taken prereqs and still was startled by the amount of material covered in so small an amount of time." "lecturers are so advanced in their own research that they seem to have a hard time dumbing it down to its most basic level, instead they are always saying how fatal or complex something is which a)adds to stress and b) doesn't make the information any more clear." "The biggest downfall is that so many faculty's primary focus is on research and not on nursing. If I wanted to learn from researchers, who are disconnected from patient care, I would have gone to medical school

Question three: Prereqs?? Theme: No pre-reqs equates with Open doors, Open time, Open mind, Open to diversity "Any prerequisite would be of some value; but I think, ultimately, none are necessary, as direct-entry coursework easily fills in the gaps." "I looked at programs that had prerequisites but only applied to two programs that had none. This was EXTREMELY important to me given the extra time and expense it would have taken to do prerequisites. Had prerequisites been necessary, they may have deterred me from entering the field of nursing." "I feel like prerequisites are arbitrary hurdles that keep A LOT of great minority or special population students (mothers/low-income/etc.) out of school. If you're worried about recruitment- look at your pre-recs.... "

The lack of prerequisite work allows for a diverse population to enter nursing, which improves the students' experience and the professions growth. However many acknowledge that the work of learning nursing is indeed easier if one has anatomy and physiology before entering accelerated programs. "Honestly, I do not feel that my background (I took Anatomy, Physiology, Statistics) education before starting this program helped at all. I suppose hearing most things for the 2nd time didn't hurt, but it's not anything that I wouldn't be able to handle had I not taken the courses."

Question: What are the personal barriers you encountered in learning nursing? Theme: Barriers abound

Students note financial barriers in terms of debt; personal barriers related to moving away from support systems to attend school; issues of intimacy, masquerading "the move from "pretending" and feeling insecure to actually "being," is a significant one". The barrier of "fitting into the nursing personality and allowing it to fit into mine"

What facilitates their learning: Clinical debriefing, case studies, Simulation labs, mentoring, Teamwork and problem based learning are particularly useful. Whereas Video streaming, Debate and PDA use are less effective.

CONCLUSION

In the end- there is work to be done! The system issues they describe related to inconsistent standards in teaching and disorganization are not new but perennials observations that necessitate us to consider do we really value teaching? Much of their issues can be easily solved with a committed faculty, mentorship and support of novice teachers and retraining of others.

Their suggestions about not requiring pre-requisites adds an interesting perspective about improving the diversity of the work force and a warning to those that mandate them results in potential loss from the profession permanently. Finally, the policy implications are worrisome in that students continue to note a disconnect between academia and practice; notions that they need to wait to continue their education; and perhaps the oldest question our students still have to answer is "what a smart person like them are doing in nursing?" leading one to ponder how much progress have we really made? Interestingly, despite their observations, over 72% rank the first year on a 1-10 scale as 7 and above. With all our weaknesses, students note they are "happy in the nursing field If I had to do it over again, I would make the same decisions. Thank you!"

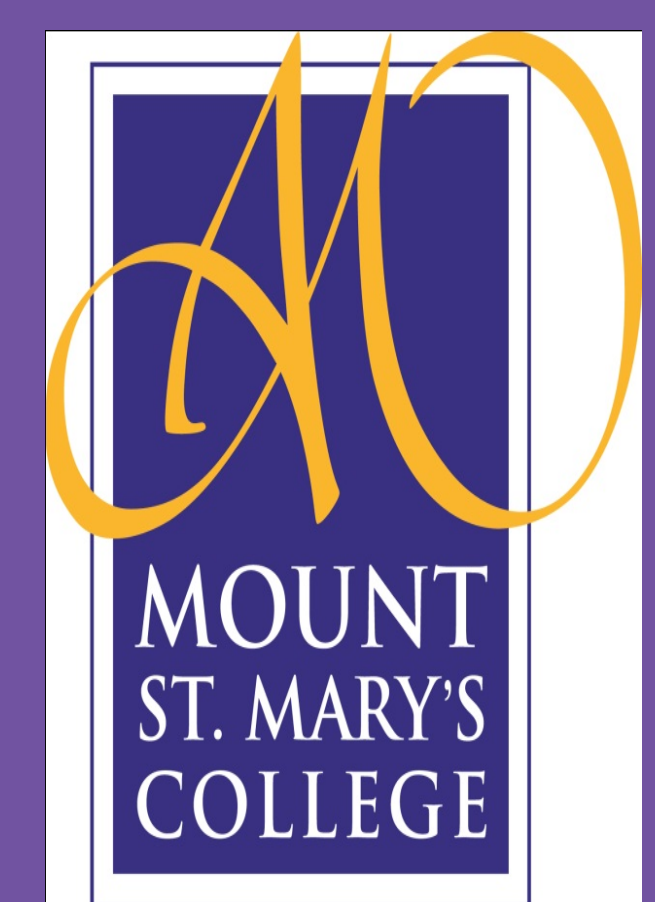
Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

REFERENCES

Weitzel, M.L., McCahon, C.P. (2008). Stressors and supports for baccalaureate nursing students completing an accelerated program. *Journal of Professional Nursing, 24*, 85-89.



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



Sarah Shealy RN MSN, CNM, Katie Hoegeman CSJ, PhD, Mary Sloper RN, MN, MBA, Vanessa Wanser RN, MSMC MSN student

Background

Accelerated Bachelors of Nursing (ABSN) programs are being promoted by many as one solution for nursing education to fill the current and anticipated shortfall of registered nurses in the US. The accelerated format is a second degree program open to students who have already obtained a bachelor's degree in another subject. These students are generally older, highly motivated, and disciplined. The course of study is equivalent to a traditional bachelor's of nursing but at an accelerated pace. This requires the student to have the intellectual capacity as well as the physical endurance and emotional maturity to complete the program. In recent years there has been a dramatic increase in these types of programs in California and across the country.

The Mount St. Mary's ABSN program one of the first in the country, began in May 1995 and graduated the first cohort May 1996. The program is rigorous and fast paced and required three semesters of study in one calendar year. The requirements are consistent with the California Board of Registered Nursing requirements for nursing education. There are both classroom and clinical classes.

To date no significant evaluation has been done on graduates of these programs to assess the preparation received for entry into practice and their current positions in nursing. This study is the largest to date of graduates of any ABSN program.

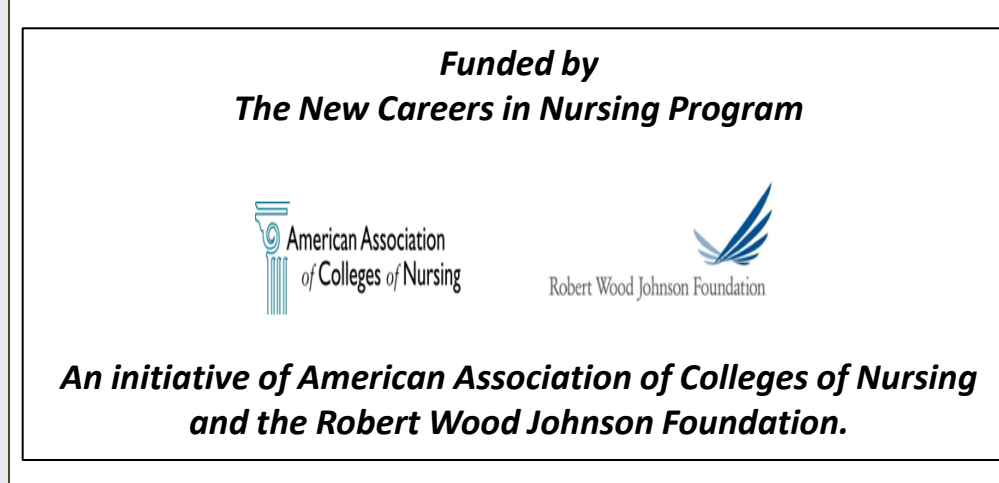
Method

The 492 graduates between 1996 and 2009 were contacted either by email or letter and asked to go to a website link and complete an online survey. The survey explores satisfaction with the program in a number of key areas, and overall commitment to the profession as measured by current practice in nursing and further education and/or certifications. The survey also explored relationships between students' life responsibilities, support systems and program performance, as well as identifying aspects of the program that were particularly challenging. The last question asked participants "What does it mean to be a Mount Nurse?"

Of the 492 graduates, 91 completed the survey. This is a response rate of 18.5%. An analysis was conducted comparing respondents to non-respondents on: gender, ethnicity, age at start of program, and graduation year. The only significant difference was respondents tended to have a higher program GPA than non-respondents. However, GPA was not significantly related to any other survey outcome. Therefore, the survey sample is representative of the entire population.

Independent variables were: student characteristics (gender, ethnicity, age, prior undergraduate degree) and experiences (family responsibility and support, experience of "being a Mount nurse"). The dependent variables were program outcomes measured by satisfaction with various aspects of the program, and satisfaction with their careers as nurses.

The analysis compared students on various characteristics to see which, if any, influenced program outcomes and satisfaction.



Graduate's experience of ABSN Program

Effectiveness	Not Effective at All	Not Very Effective	Somewhat Effective	Effective	Very Effective
How effective, or not, was the accelerated nursing program at MSMC in contributing to your:					
Preparation for practice as a professional nurse?	1%	1%	12%	51%	35%
Knowledge Base?	0%	0%	11%	48%	41%
Clinical/technical skills for patient care management?	2%	10%	32%	31%	25%
Interpersonal and communication skills for patient management?	0%	1%	10%	46%	43%

"I was pleased to be able to earn a BSN in 12 months."

Satisfaction	Very Dissatisfied	Somewhat Dissatisfied	Neither	Somewhat Satisfied	Very Satisfied
What is your degree of satisfaction with the accelerated nursing program at MSMC? (N=90)	0%	4%	4%	28%	63%
What is your degree of satisfaction with your career as a nurse? (N=91)	0%	6%	6%	20%	69%



Would you do it again?	Yes
If you could start over, would you choose the MSMC accelerated nursing program?	91%
If you could start over, would you choose a career in nursing?	93%

"[Being a Mount nurse] means that I am a nurse with integrity, compassion, and a hard work ethic"

"At my hospital "Mount" nurses have a great reputation and it makes me proud to say I received my BSN from the Mount."

Preparation	Much less prepared	Somewhat less prepared	As well prepared	Somewhat better prepared	Much better prepared
Compared to other "new nurses" in your work area, how would you describe your preparation to assume the role of RN? (N=90)	0%	13%	26%	38%	23%

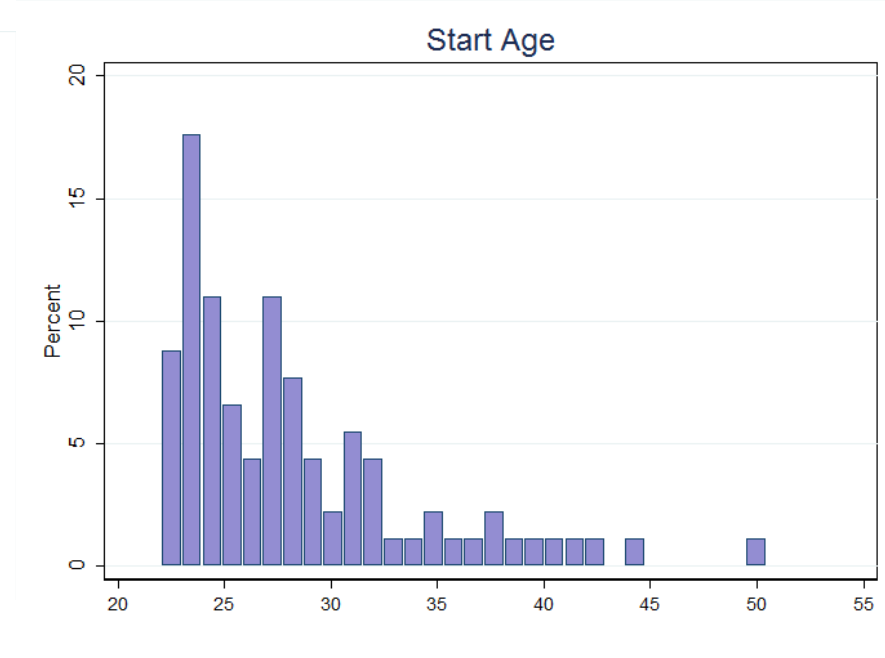
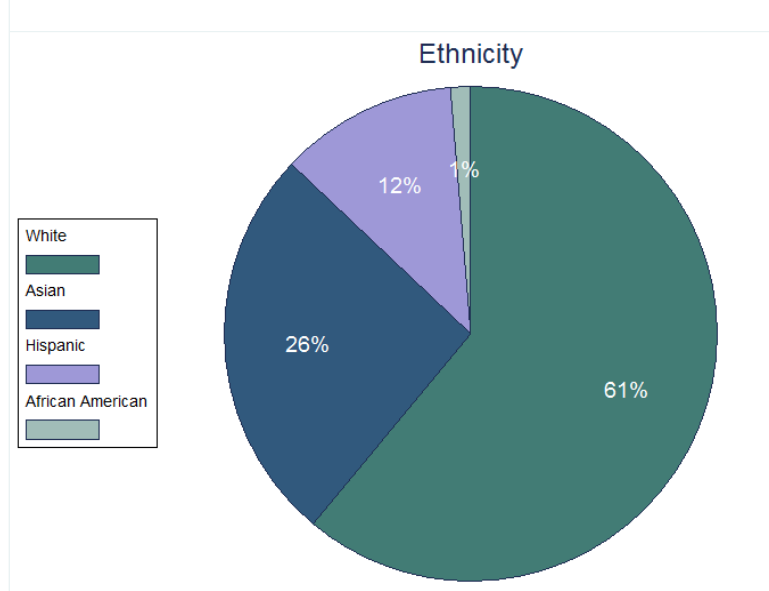
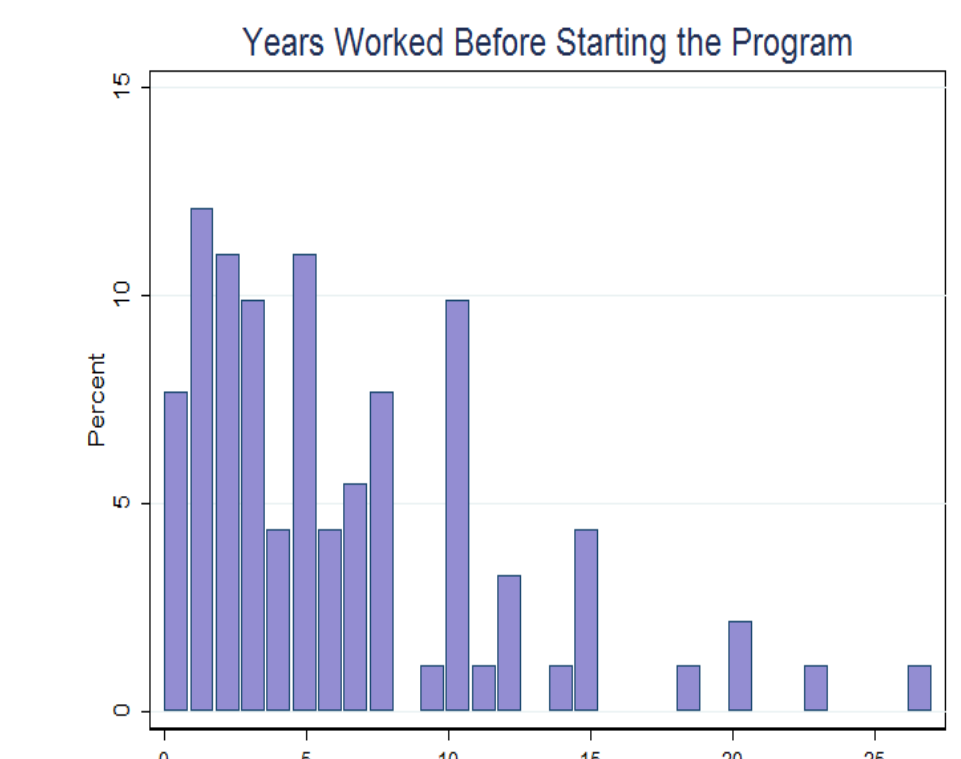
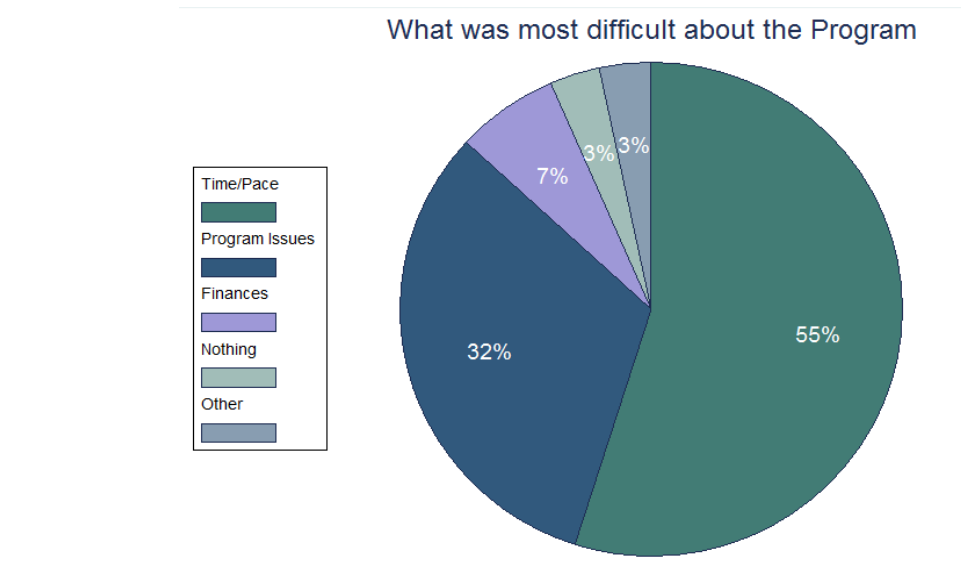
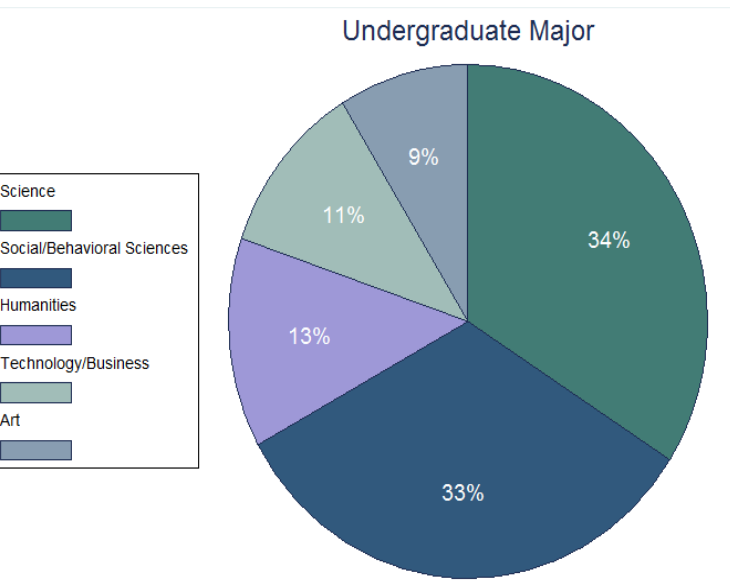
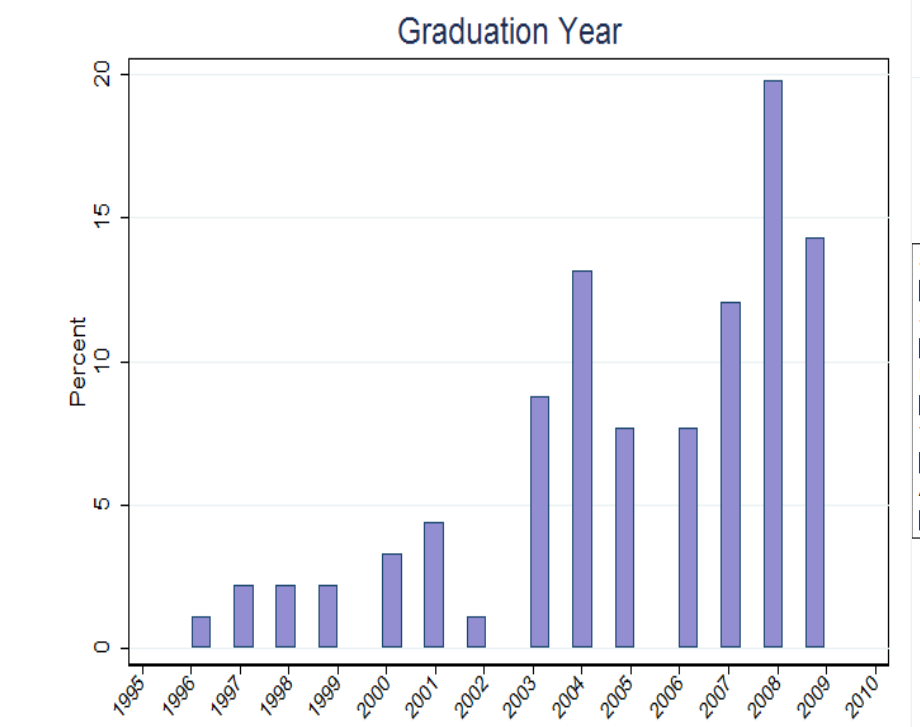


"[Being a Mount nurse] has opened many doors to me professionally"

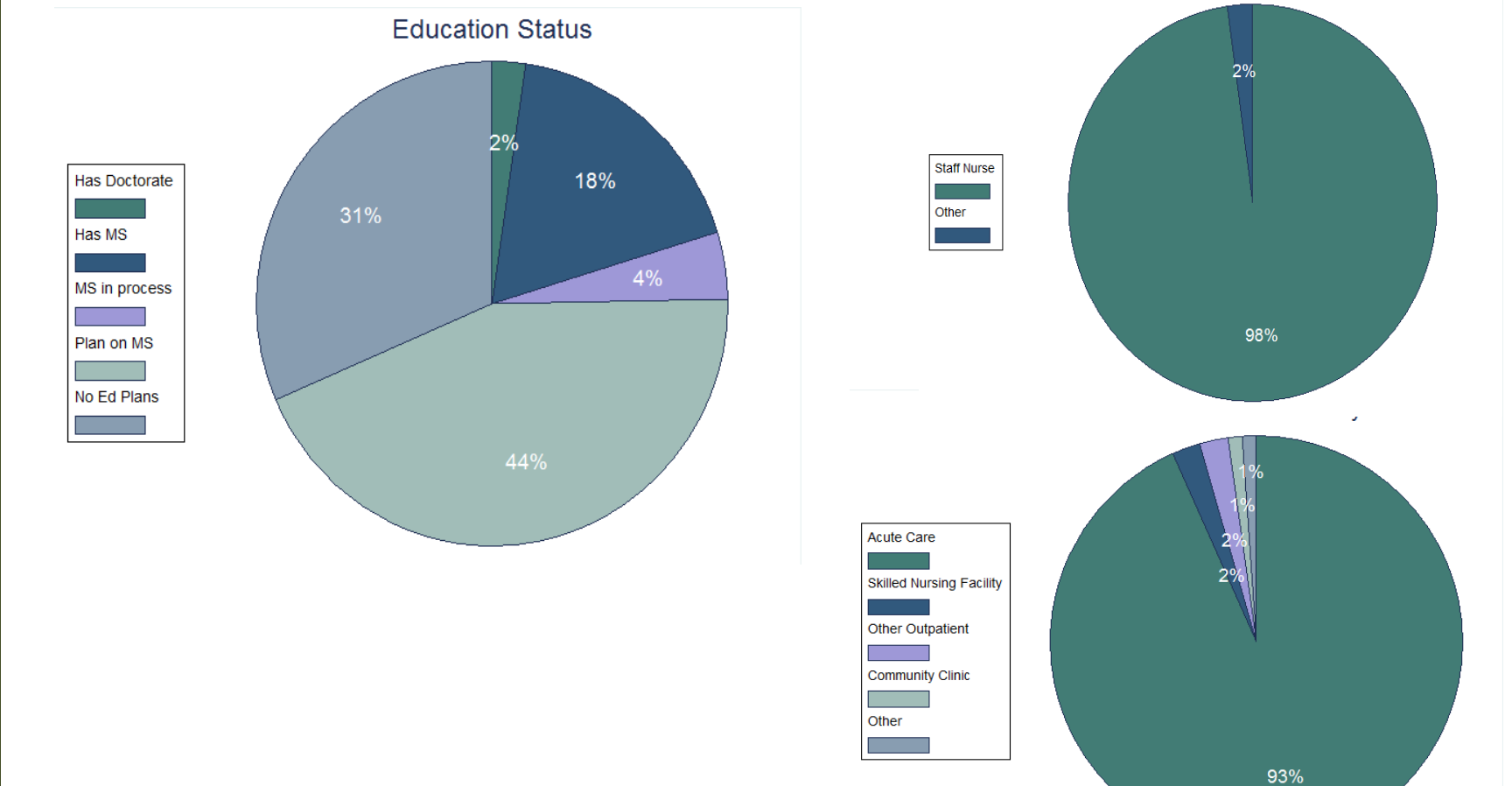
What Does it Mean to You to be a MOUNT Nurse?	%
Sense of Pride in being a "Mount Nurse"	37%
The Mount Nursing Program has a good reputation	36%
Being Prepared as a Nurse	36%
Sense of Accomplishment	33%
Expressed a sense of values	22%
Sense of Community/Networking	5%
Nothing / No Meaning	9%

WHO ARE THEY?

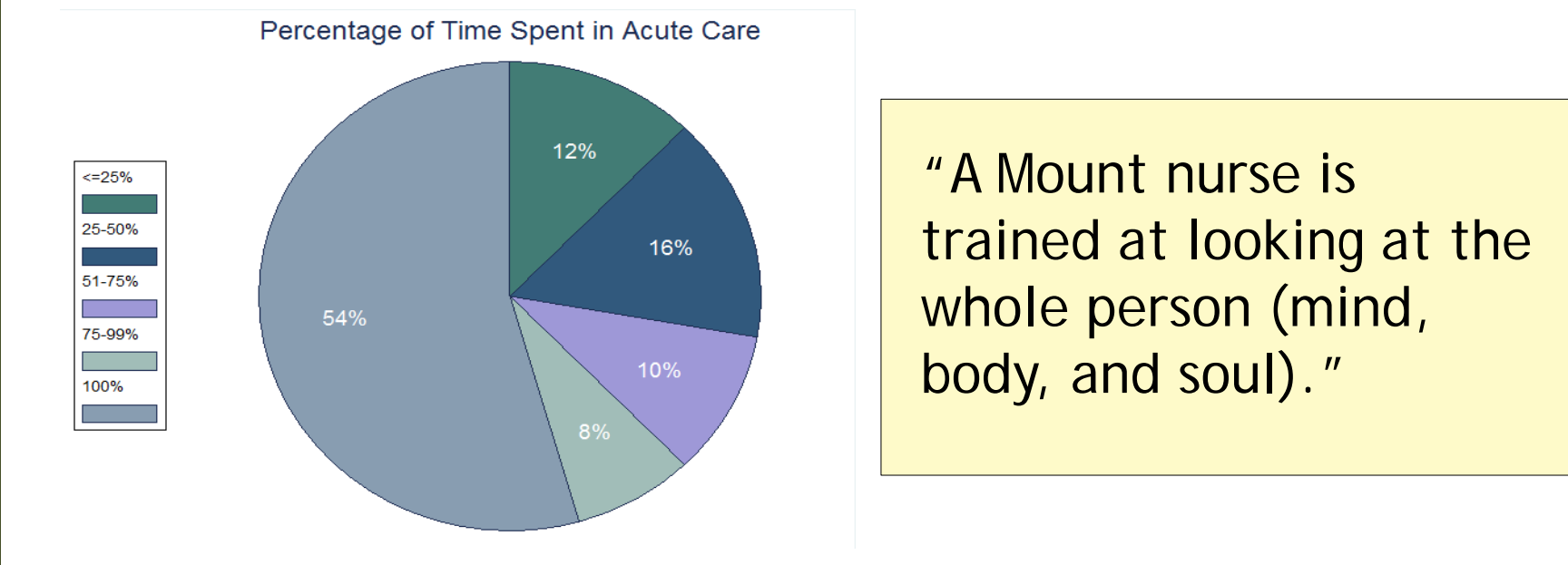
Gender	%
Female	93%
Male	7%



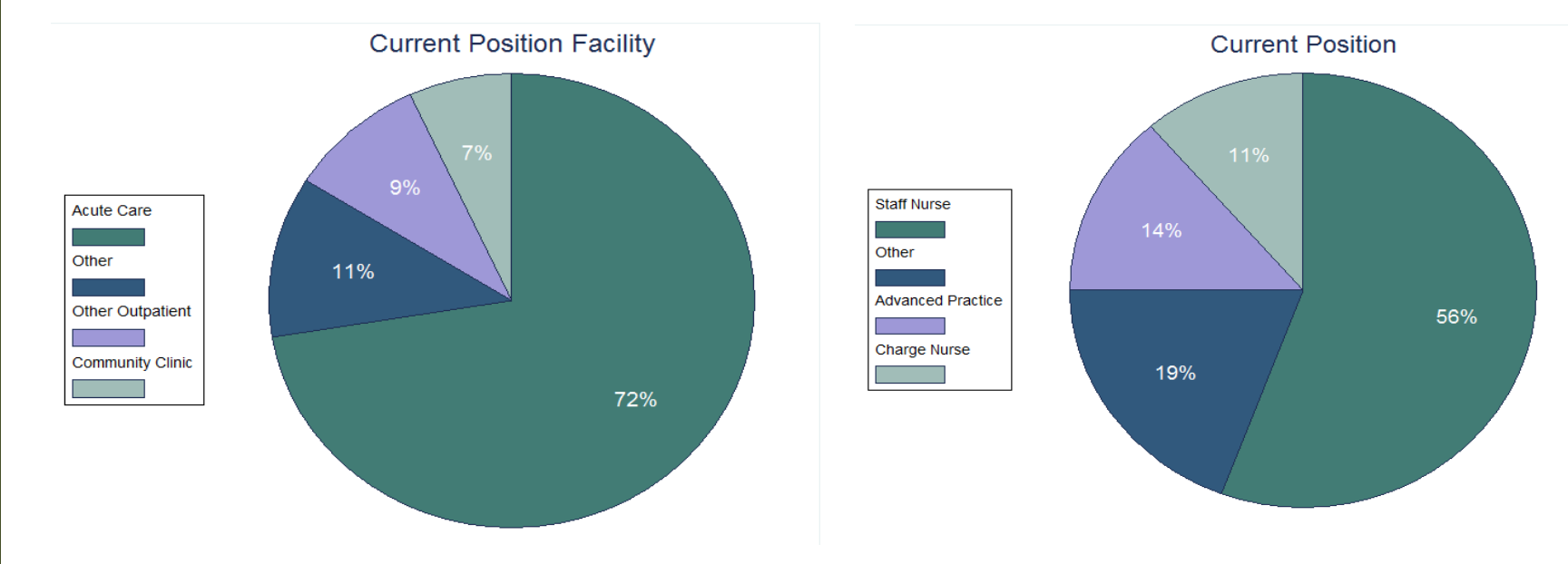
Where are they now?



Additional Training and Education	Yes	No
Do you hold any certifications? (N = 90)	81%	19%
Do you have a DEA number? (N = 90)	11%	89%



"A Mount nurse is trained at looking at the whole person (mind, body, and soul)."



Results

The typical ABSN student was a white female with a non-science undergraduate degree and started the program at age 28 with 6 years prior work experience. The first position for 98% of the graduates was 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% of the respondents.

Results will be used to improve program orientation and programmatic changes.

References

Bentley, R. (2006). Comparison of traditional and accelerated baccalaureate nursing graduates. *Nurse Educator*, 31, 79-83

Brewer, C., Kovner, C., Poornima, S., Fairchild, S., Kim, M., & Ojale, M. (2009). A comparison of second-degree baccalaureate new graduate RNs: Implications for the workforce. *Journal of Professional Nursing*, 25, 5-14.

Cangelosi, P., & Whitt, K. (2005). Accelerated nursing programs what do we know? *Nursing Education Perspectives*, 26, 113-116. *Nursing*, 27, 50-58. doi: 10.1016/j.profnurs.2010.09.006

Meyer, G., Hoover, K., & Maposa, S. (2005). A profile of accelerated BSN graduates, 2004. *Journal of Nursing Education*, 45, 324-327.

Raines, D. & Sipes, A. (2007). One year later: Reflections and work activities of accelerated second-degree bachelor of science in nursing graduates. *Journal of Professional Nursing*, 23, 329-334. doi: 10.1016/j.profnurs.2007.10.011

Raines, D. (2010). Nursing practice competency of accelerated bachelor of science in nursing program students. *Journal of Professional Nursing*, 26, 162-167. doi: 10.1016/j.profnurs.2009.12.004

Raines, D. (2010). What attracted second degree students to a career in nursing. *The Online Journal of Issues in Nursing*, 16. doi: 10.3912/OJIN.Vol16No01PPT03

Seldomridge, L. & DiBartolo, M. (2007). The changing face of accelerated second bachelor's degree students. *Nurse Educator*, 32, 240-245.

Seldomridge, L., & DiBartolo, M. (2005). A profile of accelerated second bachelor's degree nursing students. *Nurse Educator*, 30, 65-68.

Siler, B., DeBasio, N., & Roberts, K. (2008). Profile of non-nurse college graduates enrolled in accelerated baccalaureate curricula: results of a national study. *Nursing Education Perspectives*, 29, 336-341.

White, K., Wax, W., & Berrey, A. (2000). Accelerated second degree advanced practice nurses: How do they fare in the job market. *Nursing Outlook*, 48, 218-222. doi: 10.1067/mno.2000.110408

Youseff, F. & Goodrich, N. (1996). Accelerated versus traditional nursing students: A comparison of stress, critical thinking ability and performance. *International Journal of Nursing Studies*, 33, 76-82.

Contact
Mary Sloper msloper@msmc.la.edu, Sarah Shealy sshealy@msmc.la.edu, Katie Hoegeman kхоegeman@msmc.la.edu

UNDERSTANDING CURRICULA DESIGN AND HOW IT IMPACTS NCLEX-RN FOR ASDN STUDENTS

Barbara Penprase, PhD, RN & Margaret Harris, PhD, RN
School of Nursing, Oakland University, Rochester, Michigan

BACKGROUND

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. Researchers stipulate that program evaluation is one of the most important means to understanding the antecedents of success, and what changes to the curriculum should lead to improved outcomes. Understanding factors that influence students' success or failure in nursing programs is imperative to successfully address the nursing shortage.

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

- Descriptive exploratory study tracked outcomes of 421 students enrolled in the ASDN program from 2005 through 2009 at a State-supported Midwestern baccalaureate school of nursing.
- Student outcomes were collected:
 - Socio-demographic variables of age, gender, race and attrition rates Final grades for 22 pre-nursing and nursing courses
 - TEAS baseline and NCLEX-RN predictor exams (standardized tests developed by the Assessment Technologies Institute (ATI).)
 - NCLEX-RN first-attempt passing status.

ANALYSES

- The final sample consisted 363 student records.
- Using PASW statistical analysis package, version 18,
- A Pearson correlation was conducted to determine the relationship between success in all components of the ASDN curriculum and success on the NCLEX-RN.
- The variables with the strongest and significant relationship with NCLEX-RN status were selected for regression analysis with NCLEX-RN status as the dependent variable. NCLEX-RN passing status was defined as notification that the student had passed the exam from the state licensure department.

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the
Robert Wood Johnson Foundation.

RESULTS

- Students' mean age was 33 years.
- The sample was predominately women (82%) and Caucasian (76%).
 - Similar sample characteristics were reported in previous ASDN studies.
 - The proportion of men in the program, 18%, was notably higher than the national average of 10.8% men in all BSN programs.
- Overall, 88% of the ASDN students passed the NCLEX-RN on the first attempt.
 - From 77% in 2006 (the program's first graduating cohort), to 98% in 2009.
- The attrition rate for the sample was 14% (compared to 22% for the school's traditional program) with the highest attrition rates for the ASDN noted the first semester.
- The variables showing significant, moderately strong relationships included:
 - Pre-nursing developmental psychology course ($r = .32, p < .001$)
 - Health assessment course ($r = .44, p < .001$)
 - Baseline assessment test ($r = .50, p < .001$)
 - NCLEX-RN predictor exam ($r = .40, p < .001$)
- Regression analysis was conducted to identify the contribution of the significantly correlated variables to the NCLEX-RN first-attempt passing status.
- A significant relationship was found [$F(3, 208)=19.39, p < .001$] with an R^2 of .47.
- This indicates that **22%** of the variance in NCLEX passage among these second-degree students can be accounted for by performance in the 2 courses (developmental psychology and health assessment) and the NCLEX-RN predictor exam.
- The predictor exam alone accounted for **16%** of the variance in NCLEX-RN passage.

CONCLUSION

The importance of understanding the components of the ASDN curriculum that most influence first-time pass rates for NCLEX-RN cannot be overstated. This information can guide us in evaluating the overall effectiveness of our ASDN program and outcomes. Identifying the nursing and pre-nursing courses that are most linked to student success on the NCLEX-RN significantly aids in identifying those students at risk of failing. Including pre-nursing courses in this analysis allows us to identify at-risk students early in the program, enabling nursing faculty to intervene with supportive measures or to counsel struggling students toward a more fitting path. Overall, this ability makes a significant contribution to more effective use of limited resources in a strained nursing education system.

REFERENCES

- Abbott, A., Schwartz, M., Hercinger, M., Miller, C., & Foyt, M. (2008). Predictors of success on national council licensure examination for registered nurses for accelerated Baccalaureate nursing graduates. *Nurse Educator*, 33(1), 5-6.
- American Association of Colleges of Nursing (AACN). (2011). Enhancing diversity in the nursing workforce. Available at <http://www.aacn.nche.edu/media-relations/factsheets/enhancing-diversity>. Date last accessed on August 8, 2012.
- American Association of Colleges of Nursing (AACN). Accelerated Baccalaureate and Master's Degree in Nursing. Available at <http://www.aacn.nche.edu/media/factsheets/acceleratedprog.htm>. Date last accessed on August 8, 2012.
- Meyer, G., Hoover, K., & Maposa, S. (2006). A profile of accelerated BSN graduates. *Journal of Nursing Education*, 45(8), 324-327.
- Penprase, B., & Koczara, S. (2009). Understanding the experiences of accelerated second-degree nursing students and graduates: A review of the literature. *The Journal of Continuing Education in Nursing*, 40(2), 74-79.
- Rouse, S., & Rooda, L. (2010). Factors for attrition in an accelerated baccalaureate nursing program. *Journal of Nursing Education*, 49(6), 359-362. <http://dx.doi.org/10.3928/014834-20100217-05>



“SPEED DATING” TO FACILITATE NEAR PEER MENTORING AMONG NCIN SCHOLARS

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

Patrick_Hopkins@urmc.rochester.edu
William_Clark@URMC.Rochester.edu

BACKGROUND

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-one faculty mentor, self-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, well-educated and many have previous leadership experiences. We believe these unique attributes of RWJ 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.

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 RWJ 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 data base for all recipients and
- 2) The desire for NCIN Scholar graduates to formulate near-peer mentoring relationships with current NCIN students 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/ACCN, 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.



CONCLUSION

A speed dating format may provide a useful and efficient way to pair up peer and near peer mentors. This was a successful pilot program. The initiative will be reoffered this fall after integrating the feedback from previous participants regarding environmental and process issues. The participants suggested that, ultimately, this program should be offered to all accelerated students within the SON. Data will continue to be collected from the students regarding the resilience and usefulness of these new mentoring relationships



UNIVERSITY of
ROCHESTER
MEDICAL CENTER

SCHOOL OF
NURSING



ALUMNI NURSE MENTORS: AN INNOVATIVE PROGRAM FOR UNDERREPRESENTED ACCELERATED NURSING STUDENTS

Leland, Natasha, RN, BSN, Le, John, RN, BSN, & Amidi-Nouri, Aara, RN, PhD
School of Nursing

BACKGROUND

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.

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 through retention rates
- Evaluate 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 10 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 Toolkit and chose exercises to implement with the mentees, and modified the exercises based on the allotted meeting time and scholars' needs. 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 complete a formal survey, designed by the ANMS at the end of the program. The ANMs will also evaluate the program. To date, scholars, have provided feedback regarding ANMs to the NCIN Program Liaison.

RESULTS

Participation rate has been 100%. Overall evaluation of the program to date has been extremely positive. The Pre- entry Immersion Program (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%, 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. The ANMs have had the opportunity to develop their leadership skills through the mentorship, and in developing this pilot program and its evaluation.

CONCLUSION

The greatest challenges in launching this pilot program was in hiring the ANMs. Given the nature of mentorship, the hours varied considerably month to month, therefore contracting for a certain number of hours was a challenge. It took a few months to create and fund the positions. Based on the preliminary success, the Office of Alumni Affairs and the Office of Diversity are considering expanding the program to support a greater number of students by hiring more ANMs. Mentorship has been identified as a key component of retention of underrepresented students. Peer mentorship is challenging in accelerated programs, as there is rarely time for the students to get together. One of our four campuses has instituted a buddy program, pairing up first semester accelerated BSN students with second semester accelerated BSN students. Alumni mentorship has the added benefit to the scholars by providing role models who successfully completed the program and passed the NCLEX. Moreover scholars gained a deeper understanding of the process of obtaining employment as a new graduate RN. The scholars' cohesiveness and 100% retention is a testament to the excellent mentorship from the Alumni Nurse Mentors.

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

REFERENCES

Campinha-Bacote, J. (2010). A Culturally Conscious Model of Mentoring. *Nurse Educator*, 35 (3), 130-135.

Childs, G., Jones, R., Nugent, K.E., & Cook, P. (2004). Retention of African-American Students in Baccalaureate Nursing Programs: Are We Doing Enough? *Journal of Professional Nursing*, 20, 129-133.

Institute of Medicine (IOM). (2010). *Future of Nursing: Leading Change Advancing Health*. Available at: <http://www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>

Sedlacek, W. E., Benjamin, E., Schlosser, L. Z., & Sheu, H. B. (2007). Mentoring in academia: Considerations for diverse populations. In T. D. Allen & L. T. Eby (Eds.), *The Blackwell handbook of mentoring: A multiple perspectives approach* (pp. 259-280). Malden, MA: Blackwell.

CONNECTING THE DOTS: THE RUSH - SCHWEITZER MENTORING PROGRAM

Lisa Rosenberg, PhD, RN
Rush University College of Nursing

BACKGROUND

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 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.

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 in the process. The program is structured in terms of surveying mentors and mentees to create optimal dyads, attendance at an orientation dinner with goal setting, term reports from mentees and attendance at other required events.

During the orientation dinner mentors and mentees work on completing a Mentoring Contract. Questions posed in the contract are:

What interests you most about having a Schweitzer Mentor? What do you see as the potential benefit of this program to your development as a nurse?

Identify at least 3 goals you would like to work on with your Schweitzer Mentor over the next two years. Recommended topics: Personal wellness/self care, Academic support/encouragement, Professional/Leadership Development. (Note: your goals can be changed in the future if your interests or needs change.) Together with your mentor, please complete the following:

What is the first (then 2nd and 3rd) goals you and your Schweitzer Mentor will focus on? What are some ideas you both have to address these goals? Plan a first meeting together to discuss action steps.

At the end of each term scholars are asked to complete a Term Report that consists of three questions:

1) Reflect on your progress this term related to your development as a nurse. Please describe any accomplishments or roadblocks that stood out for you. What were curricular, leadership development or professional growth areas that sparked interest for you or that you could use some future guidance with?

2) Looking ahead, what are some goals, areas of focus and possible challenges you anticipate in the coming term?

3) Please describe meetings or communications that you had with your mentor, advice that was given, and any next steps you took or plan to take as a result. In what areas will you be looking to your mentor for advice in the coming term?

RESULTS

Through Rounds 3 and 4 of funding there has been no attrition of NCIN scholars. Term reports indicate multiple points of contact between mentee and mentor during the term. Scholars indicate in their term 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.

Below are some excerpts from scholar reports:

"I've become pretty close with my mentor. We talk frequently through email, text and on the phone. He has given me tips and has been very encouraging. He is very helpful with giving me academic advice . . . Overall, he believes in me and that has given me confidence in school. I really appreciate the relationship we have developed and I anticipate it will be helpful later on in the program. "

"My mentor and I saw each other almost every week this quarter. I am so grateful to her for her continued support/words of wisdom and for her finding a volunteer opportunity for me. I have enjoyed it so much so far. This quarter I will ask for her help specifically with my portfolio in preparation for my application to Sigma Theta Tau."

"As always, I know that my mentor is always someone that I can rely on for support and help when I need it. I am grateful to know that I have someone who I can turn to in those stressful moments. She really helps to remind me of the big picture when I start to pick at the small stuff that should not be stressing me out."



Scholars and their mentors

CONCLUSION

The establishment and refinement of the mentoring process through RWJF-NCIN funding has allowed Rush University College of Nursing and the Chicago Area Schweitzer Fellows Program to establish a substantive experience with outcomes that appear satisfying to both mentees and mentors. Our plan is to jointly continue this relationship of providing mentors to underrepresented students along with the provision of internal scholarships even when funding ceases; in essence, sustaining and continuing the process that RWJF-NCIN started.

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.

Funded by
The New Careers in Nursing Program



An initiative of American Association of
Colleges of Nursing and the Robert Wood
Johnson Foundation.

[The Albert Schweitzer Fellowship](http://www.schweitzerfellowship.org)
www.schweitzerfellowship.org



Mentor and mentee at orientation dinner



Mutual Mentoring: Impact on Student and Faculty Retention

Donna M. Zucker RN PhD FAAN, Genevieve E. Chandler PhD, RN,
Margaret Curnin RN MSN

School of Nursing University of Massachusetts Amherst, MA
5th Annual New Careers in Nursing Summit, 2012



BACKGROUND

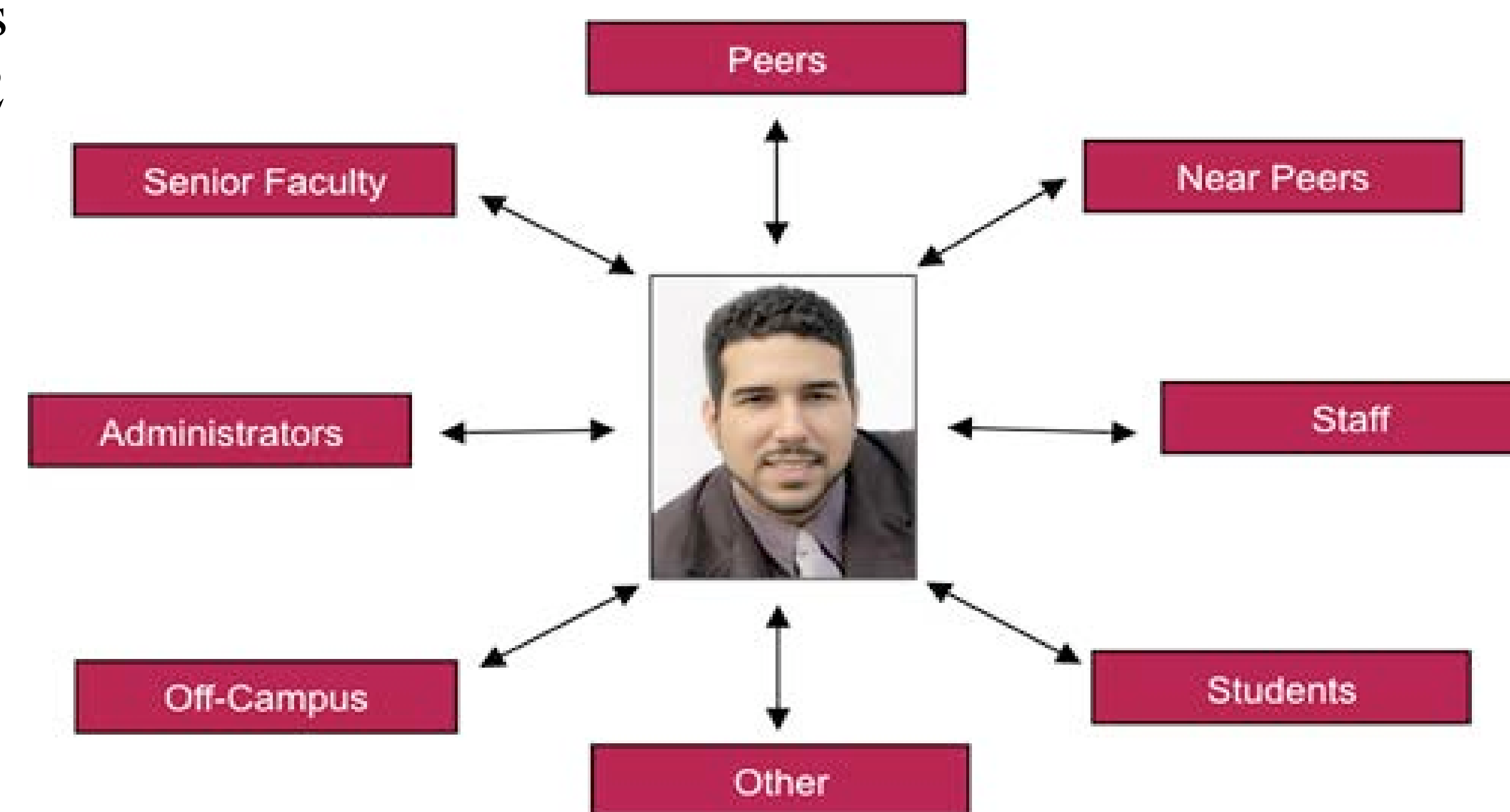
Our Accelerated Second Bachelor (ASB) program was the recipient of the prestigious 2008, 2009 and 2012 Robert Wood Johnson (RWJ) New Careers in Nursing (NCIN) scholarship award for a total of 25 recipients. Noteworthy was the simultaneous development of two successful Mellon Mutual Mentoring (M³) Team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

PURPOSE

Our aims were 1) to promote new faculty scholarship and leadership 2) to promote and develop student leadership through faculty-student mentoring program and 3) to develop student mentoring and leadership through student-to-student collaboration.

METHODS

Components of the Relational-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 (Roche, Morsi & Chandler, 2009). The RWJ Projects created a mentoring climate and structured leadership events for student development. Senior level RWJ ABS students planned social networking picnics, invited nurse leaders to speak on campus and coached junior ASB and traditional pre-licensure students in the skills lab. Simultaneously, the M³ Project 1 afforded senior faculty the opportunity to mentor junior faculty in developing a career vision, initiating a program of scholarship, designing a career plan and discussing the balance of work/life. M³ Project 2 expanded opportunities for faculty to facilitate mentoring relationships to provide information, support and resources for a more comprehensive ABS and all-school mentoring network.



Mutual Mentoring Model©

RESULTS

The NCIN led to tripling our underrepresented students, including our male population, by building on our program's history of innovation. There was no attrition from the RWJ program, several honors college graduates and strong leadership potential. Simultaneously, the 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 in conjunction with the NCIN program, a sustainable mentoring model was developed for graduate and undergraduate programs that will use advising groups to initiate peer mentoring in all programs.

CONCLUSIONS

Involvement in parallel mentoring programs, the M³ project and RWJ NCIN program, provided significant momentum for faculty and students to create and invest in an all-school Mentoring Program.

RECOMMENDATIONS

Expand beyond School of Nursing; collaborate with other programs to broaden the mentoring program to address global health care priorities.

REFERENCES

- Chandler, G. (2012). Motivating underrepresented students to pursue faculty roles. *Nurse Educator*, 37(6), Nov. /Dec. in press.
- Roche, J., Morsi, D. & Chandler, G. (2009). Testing a work environment- work relationship model to explain expertise in experienced acute care nurses. *Journal of Nursing Administration*. 39(3), 115-122.

ACKNOWLEDGEMENTS

Funded by
The New Careers in Nursing Program



An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

*With Gratitude to
The Mellon Mutual Mentoring Program©, Center for Faculty and Professional Development, University of Massachusetts Amherst*