

TRANSCULTURAL SELF-EFFICACY IN ACCELERATED NURSING STUDENTS

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BACKGROUND

What is known:

•The process of cultural competence occurs over time (The National Center for Cultural Competence, 2013).

•Professional caring includes provision of culturally sensitive care.

•American Association of Colleges of Nursing (2008), National League for Nursing (2009) and Institute of Medicine (2011) emphasize the importance of culturally competent nurses.

What is needed:

•New models of education with outcomes that address attitudes, skills, and knowledge regarding cultural competence.

What was done:

•Jeffreys' (2010) Cultural Competence and Confidence (CCC) model was used as the theoretical framework for the study.

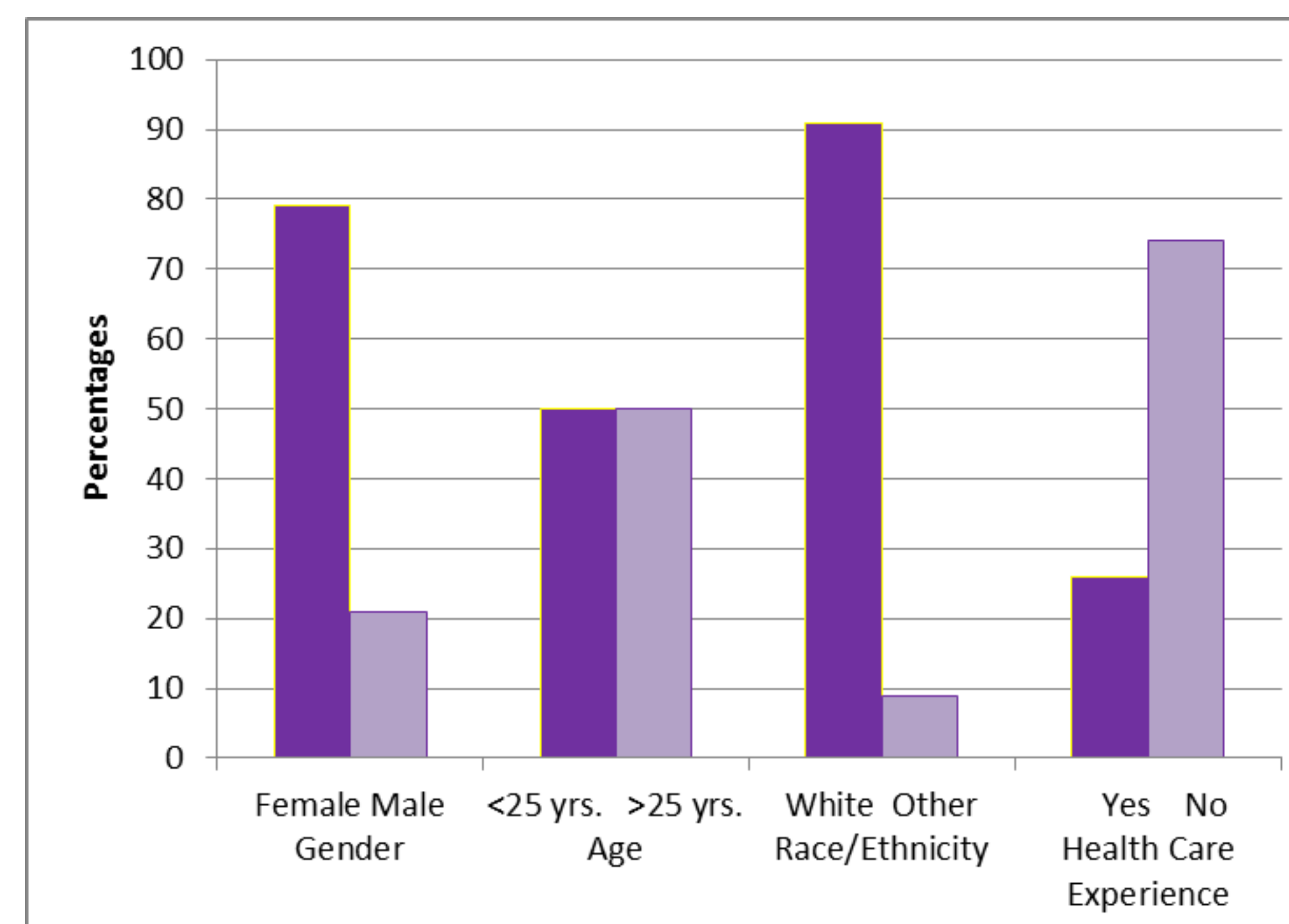
•The model incorporates the construct of transcultural self-efficacy (TSE) as a factor that influences the enhancement of cultural competence.

•Formal educational experiences using transcultural concepts were incorporated throughout the curriculum, including didactic, laboratory, and clinical.



PURPOSE

The purpose of this study was to evaluate the influence of cultural educational offerings on the transcultural self-efficacy perceptions in accelerated, second-degree, nursing students.



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The New Careers in Nursing Program
An initiative of American Association of Colleges of Nursing
and the Robert Wood Johnson Foundation

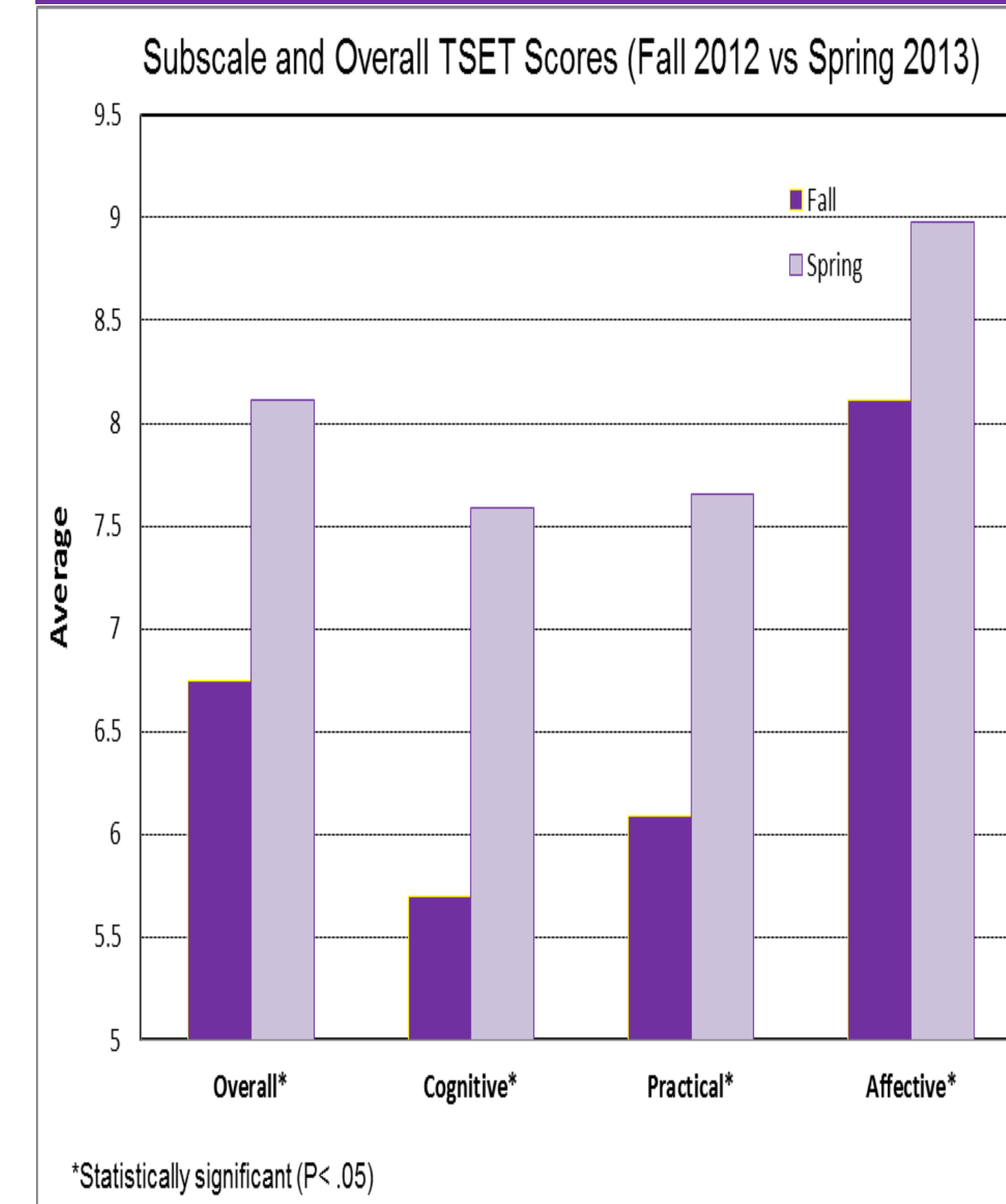


Grant #D11HP22187-01-00, Nurse Education, Practice, Quality and Retention (NEPQR).

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RESULTS



	Fall Semester	Spring Semester
Overall		
Mean	6.7513	8.1141
SD	1.2958	1.2625
t-test	4.100 (p = 0.000)	
Cognitive		
Mean	5.6951	7.5883
SD	1.5556	1.5031
t-test	4.521 (p = 0.000)	
Practical		
Mean	6.0903	7.6571
SD	1.9057	1.7550
t-test	3.089 (p = 0.005)	
Affective		
Mean	7.1136	8.9778
SD	1.1691	0.9992
t-test	3.693 (p = 0.000)	

- An HSRB approved procedure allowed the matching of questionnaires while still maintaining anonymity of the students.
- The TSET tool was administered to accelerated students in fall (N=38) and spring (N=25) semesters.
- The usable and matching data gathered in the longitudinal sample was analyzed (N=24) using SPSS 19.0.
- Univariate analysis was repeated for the accelerated students for the fall and spring semester.
- For this pre-test and post-test longitudinal sample, the standard parametric paired t-test was conducted to determine if the overall and three subscale scores changed during the academic year within the same group of students.
- **Statistically significant changes were demonstrated in self-efficacy scores for the overall and three subscale average scores. Significance level was set at P<.05.**



METHODS

Transcultural Self-Efficacy Tool (TSET) (Jeffreys, 2010) administered at the beginning and end of the nursing program.

Interventions included:

- Attendance at a conference in fall and spring semesters with transcultural nursing scholars.
- Inclusion of culturally relevant course outcomes in nursing course syllabi.
- Cultural assessments on clinical assignments.
- Culturally enriched simulated patient experiences.
- Cultural immersion experiences outside of the classroom were available.

CONCLUSIONS

- Intentionally integrating cultural outcomes in courses including simulated laboratory and clinical experiences and providing cultural conferences and immersion experiences were effective in positively impacting transcultural self-efficacy perceptions in accelerated nursing students.
- Integrating cultural concepts in a highly visible manner did effect change in second degree accelerated nursing students.
- Administrative leadership and faculty engagement is key to effective integration of cultural education in the curriculum.

A HOLISTIC APPROACH TO FACILITATING PROFESSIONAL SOCIALIZATION OF ACCELERATED SECOND BACCALAUAREATE DEGREE NURSING STUDENTS

BACKGROUND

The demographics of students entering nursing education is changing. Trends demonstrate an increase in the number of students entering nursing education at an older age, having earned previous degrees unrelated to nursing, and seeking accelerated programs of study. Current literature describes adult learners in accelerated nursing education programs as having different needs from traditional college students. Socialization into the role of professional nurse is imperative to successful progression and matriculation in these fast-paced programs. Socialization begins with effectively coping with the psychosocial stressors of returning to school. Faculty in the Ida V. Moffett School of Nursing are taking a holistic approach to facilitating professional socialization by assessing the perceived stressors and coping mechanisms of accelerated second baccalaureate degree nursing students.

PURPOSE

The purpose of this ongoing program evaluation is to assess the perceived stressors and self-coping mechanisms of accelerated second baccalaureate degree nursing students at the beginning, middle, and end of a 15-month program.

METHODS

Using the available literature, including the Returning to School Syndrome Model (Shane, 1980), three IRB approved surveys were developed in 2011 to answer the following questions:

1. What are the perceived stressors and coping mechanisms of students enrolled in an accelerated second baccalaureate degree nursing program?
2. Do the perceived stressors and coping mechanisms change or remain the same throughout the program?

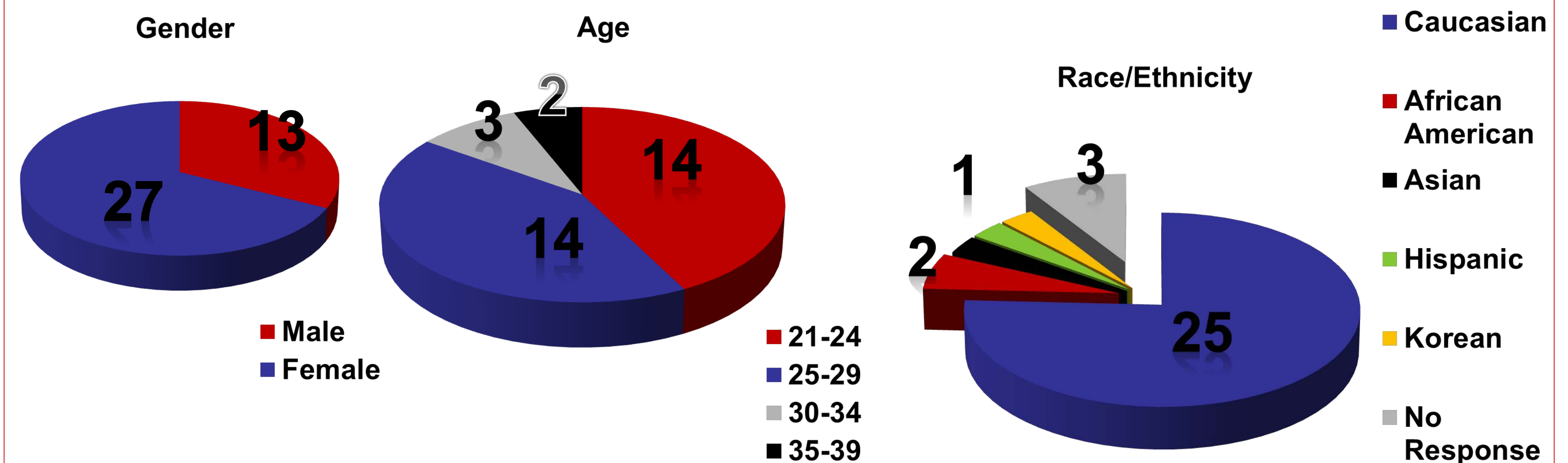
Three cohorts of accelerated second degree students were provided the opportunity to anonymously complete a survey at the beginning, middle, and end of the accelerated nursing program.

The results are being utilized to further develop the Pre-Entry Immersion Program (PIP), Leadership Development Plan, and Mentoring Program for current and future cohorts.



Results

Results of the ongoing program evaluation include the responses of three accelerated second baccalaureate degree cohorts between 2011 and 2013. Perceived stressors and coping mechanisms were similar among the cohorts, and did not change throughout the program.



Perceived Stressors

Coping Mechanisms

Financial Burdens	Prayer/Bible Study
Not Knowing What to Expect	Exercise
Balancing Time Between Family and School	Talking with Friends and Family
Lack of Time to Prepare Academically	Adhering to a Study Schedule

CONCLUSION

Although this evaluation is limited by low response rates, responses are consistent with the literature. Program enhancements are being implemented to further address each stressor, and facilitate effective coping mechanisms. Enhancements include increasing the initial orientation to 3 days, and the PIP to 6 weeks to allow time for involvement from representatives from the university's Campus Life, Counseling Services, and Disability Services; involving faculty from the traditional program in the leadership development plan to streamline course activities; and introducing mentoring activities earlier in the program for all accelerated nursing students. Innovative strategies are being explored and developed to decrease financial burdens, such as alternative course delivery methods and course schedules. Regularly scheduled meetings between the students and the program coordinator are conducted to individualize study strategies based on preferred learning styles and knowledge base. The newest cohort has voiced great satisfaction with the enhanced orientation, PIP, and increased student-faculty interactions.

Funded by
 The New Careers in Nursing Program



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

ACKNOWLEDGEMENTS

Janet Alexander, EdD, RN, CNE
 Tracey Dick, MSN, RN, CNE
 Gretchen McDaniel, DSN, RN, CNE

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ALUMNI NURSE TUTORS: AN INNOVATIVE APPROACH FOR SUPPORTING UNDERREPRESENTED NURSING STUDENTS

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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. Multiple role responsibilities, multiple role stress, and cultural incongruence are contributing factors to attrition of underrepresented students. Moreover, the first few weeks of college are critical times for students in developing study groups, a key to success in nursing programs. Mentoring of students has been identified as one of the key components of successful retention.

Only one traditional Bachelor of Science Nursing (BSN) program is offered in the city of Oakland, CA, and it is at Samuel Merritt University (SMU). The traditional BSN program is the most diverse program at the university, with many underrepresented students being first-generation college students. Many of the underrepresented students choose the program because it is located in their hometown, where they can maintain their ties to their families and communities. Though the elementary school education in Oakland is improving, young adults enrolling in the program are often underprepared for the rigors of the nursing program, despite high GPAs on their admissions transcripts.

Free tutoring is offered to all students at SMU; however, many underrepresented students do not avail themselves to these resources until late in the semester when they are already failing a course. The literature suggests that first-generation-college students often lack the skills in how to navigate the academic terrain of higher education. Retention of underrepresented students and successful passage of NCLEX are top priorities for the program. The Alumni Nurse Tutor program was created as an approach to addressing both the mentoring and tutoring needs of underrepresented traditional BSN students, by pairing RWJ NCIN Scholar alumni with underrepresented students in the traditional BSN program.

PURPOSE

The purpose of this pilot program was to develop an alumni nurse tutoring program, where underrepresented students in the traditional BSN program would receive tutoring from underrepresented alumni. It was expected that the program would serve two aims:

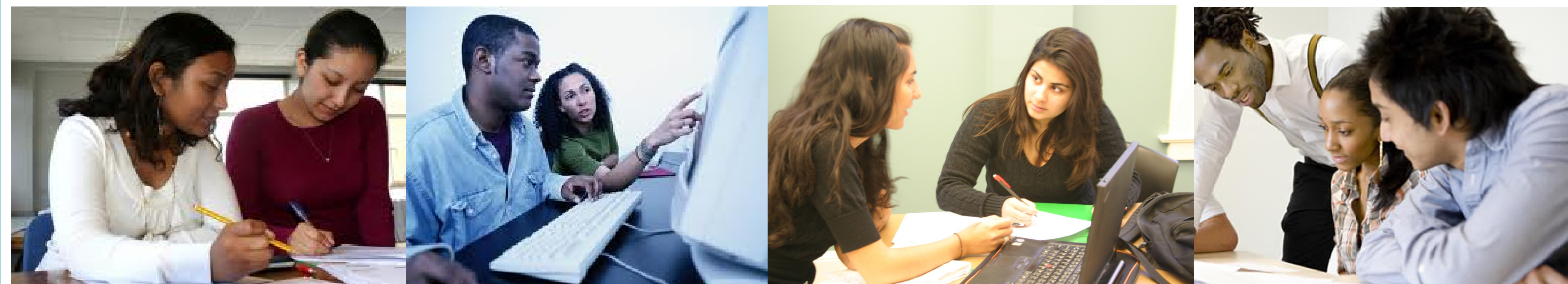
1. To provide BSN students with a 'like me' tutor who might also serve as a role model and informal mentor
2. To provide employment to recent graduates in job market adversely affected by the economic climate.

METHODS

Alumni Nurse Tutors who were RWJ NCIN Scholar alumni were hired as casual employees through the affiliated parent medical organization, based on applications that were submitted to the Office of Academic & Disability Support (ADS). Priority hiring was given to RWJ NCIN scholar graduates. Hiring and training of Alumni Nurse Tutors were conducted by ADS coordinator and director. Underrepresented BSN students who were at greatest academic risk were identified through pre-nursing GPA and TEAS scores by the program coordinator, and matched with tutors.

RESULTS (preliminary)

- A total of four new graduate nurse tutors were hired. All tutors passed the NCLEX on the first attempt, and were hired within one month of passing NCLEX.
- Nine underrepresented first-generation students in the traditional BSN program were given priority for tutoring, and each received a minimum of four hours of tutoring per week.
- In addition to individual tutoring, 3-hour group tutoring sessions were offered on Saturday mornings by the Alumni Nurse Tutors, open to all students, with priority to underrepresented students.
- All 9 students remained enrolled in the program at the end of Spring term, four of the 9 students increased their GPAs by 0.5-1.0 on a 4.0 scale. One student gained such confidence, that she emerged as a leader in her class, and was elected as class representative at the end of the term.
- All Alumni Nurse Tutors were successfully hired as RNs within two-four months of becoming a tutor, and continued their tutoring until the end of the spring term (2013).



CONCLUSION

The RWJ NCIN Alumni Nurse Tutors reported having a sense of confidence in their prospective job interviews, and feeling that they were providing a meaningful and significant service to the school. An unexpected benefit of the program was that being a tutor increased the marketability and competitiveness of the new graduates in the current limited market for new graduate nurses. Each of them was gainfully employed as a registered nurse within a short time of working as a tutor, much sooner than their peer graduates.

There were also several benefits to the students such as: 1. Increased availability of alumni nurse tutors relative to peer tutors. 2. Improved understanding of relevance of course material to NCLEX. Having just passed the NCLEX, the alumni nurse tutors are keenly aware of how the coursework is linked with successful passage of the NCLEX. 3. Role modeling and mentoring: Alumni nurse tutors served as informal mentors, and since these tutors were also underrepresented ethnic minorities, the students were able to envision themselves as future nurses just like their tutors.

Based on this pilot program, the university has decided to fund an alumni nurse tutor program to enhance the current tutoring program for all nursing students, which began in Fall 2013.

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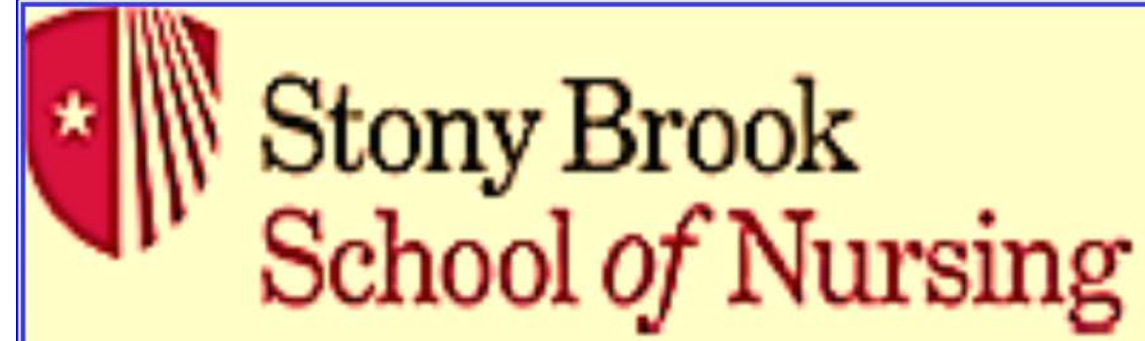


An initiative of American Association of
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LEADERSHIP AND MENTORSHIP ENRICHMENT ACTIVITIES: AN ASSESSMENT WITHIN AN ACCELERATED NURSING PROGRAM



Lori A. Escallier, PhD, RN, CPNP, and Judith Fullerton, PhD, RN, CNM
Stony Brook University, School of Nursing

BACKGROUND

- Accelerated second-degree programs are a common feature in Schools of Nursing
- It is essential to examine the attributes of these graduates as they transition into professional practice
- Faculty who teach accelerated students report differences in support that accelerated nursing students need

PURPOSE

- To assess the effectiveness of the mentorship strategies as perceived by the RWJ graduates
- To assess the workforce impact that stemmed from the focus on leadership development
- To assess faculty perceptions of the characteristics of accelerated students

METHODS

- An outcome and impact evaluation was designed in accord with the guiding principles of the School of Nursing evaluation plan and based on CCNE's Standards for Accreditation and the theoretical frameworks offered by Stufflebeam¹ and Piskurich.²
- A mixed-method survey design was used

Instruments

1. A student survey instrument was designed soliciting information about experiences since transition into the nursing workforce
2. Faculty were asked to provide 5 adjectives that best characterize the accelerated student, and describe the type of support that the faculty expected to provide that differed from support provided to other students

Sample/Procedure: Surveys were sent via electronic mail to 22 RWJ Scholar graduates

RESULTS

- 45% response rate was achieved (n=10)
- Six (6) faculty provided responses concerning their perceptions of students

Graduate Demographics

- Age Range 24-43 (n=10)
- Male (n=5)
- Female (n=5)
- 100% NCLEX Pass Rate (first attempt)
- 100% Employment Rate (within 6 months of graduation)

Latino	n=2
Caucasian	n=2
Black	n=2
Asian	n=2
Unknown	n=2

Graduates

- 80% Chose nursing as a career to find meaning in work
- Short duration of program- major advantage
- Peer mentoring and support groups continue after graduation via a social network to help transition from student to professional
- Effectiveness of Leadership and Mentorship Strategies uniformly positive ("very well" or " well" on 5 point Likert Scale)

Faculty

5 adjectives: *motivated, experienced, mature, self-directed, focused*

- Require more flexibility, and accommodation for life pressures and events
- Less support for time-management, test taking and writing skills



CONCLUSION

Accelerated second-degree students have unique characteristics that merit continued assessment to maximize benefits of these programs to students, educators, and nursing profession

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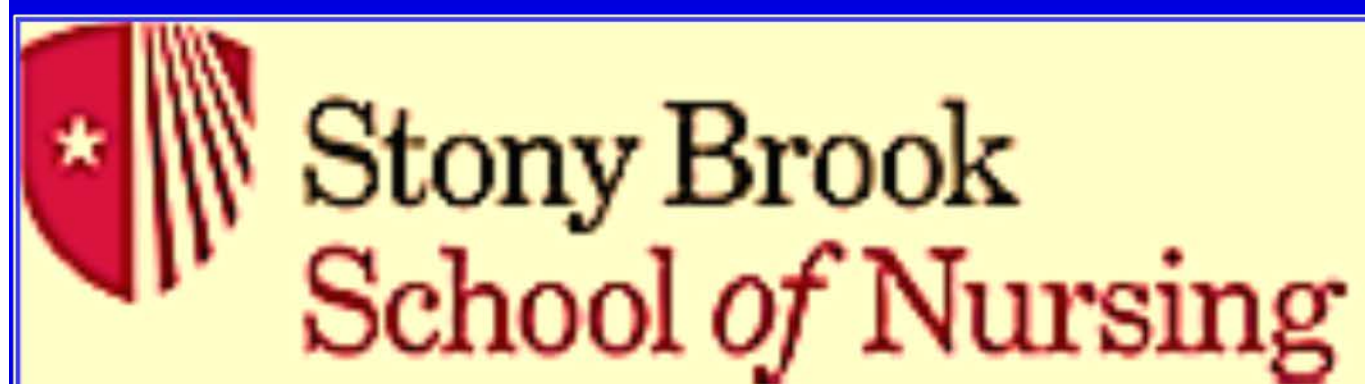
**The Robert Wood Johnson Foundation
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2. Piskurich, G. Self-directed learning: A practical guide to design, development, and implementation. San Francisco: Josey-Bass Publishers; 1993.

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CHOOSING DOCTORAL EDUCATION: FACTORS INFLUENCING PURSUIT OF DOCTORAL EDUCATION BY PREVIOUS NEW CAREERS IN NURSING SCHOLARSHIP RECIPIENTS

BACKGROUND

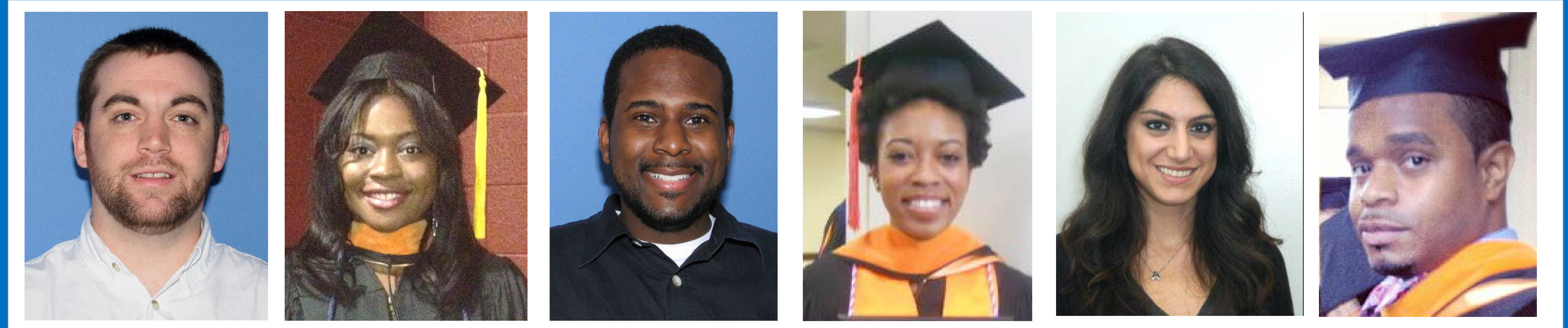
- Cultural diversity within the nursing workforce is essential to meet health care demands and reduce health disparities.
- Higher levels of nursing education promote knowledgeable nurses in research and technology advancements.
- From 2002-2013 there has been a 29.3% increase of minority nursing students in master's programs and 27.7% in research focused doctoral programs.¹
- The number of men in nursing programs has remained relatively stable (11% of master's students and 7.9% of research-focused doctoral students).¹
- Only 16.8% of registered nurses with graduate degrees are minorities.¹

PURPOSE

- To explore the factors contributing to pursuit of doctoral education of previous New Careers in Nursing (NCIN) scholarship recipients.

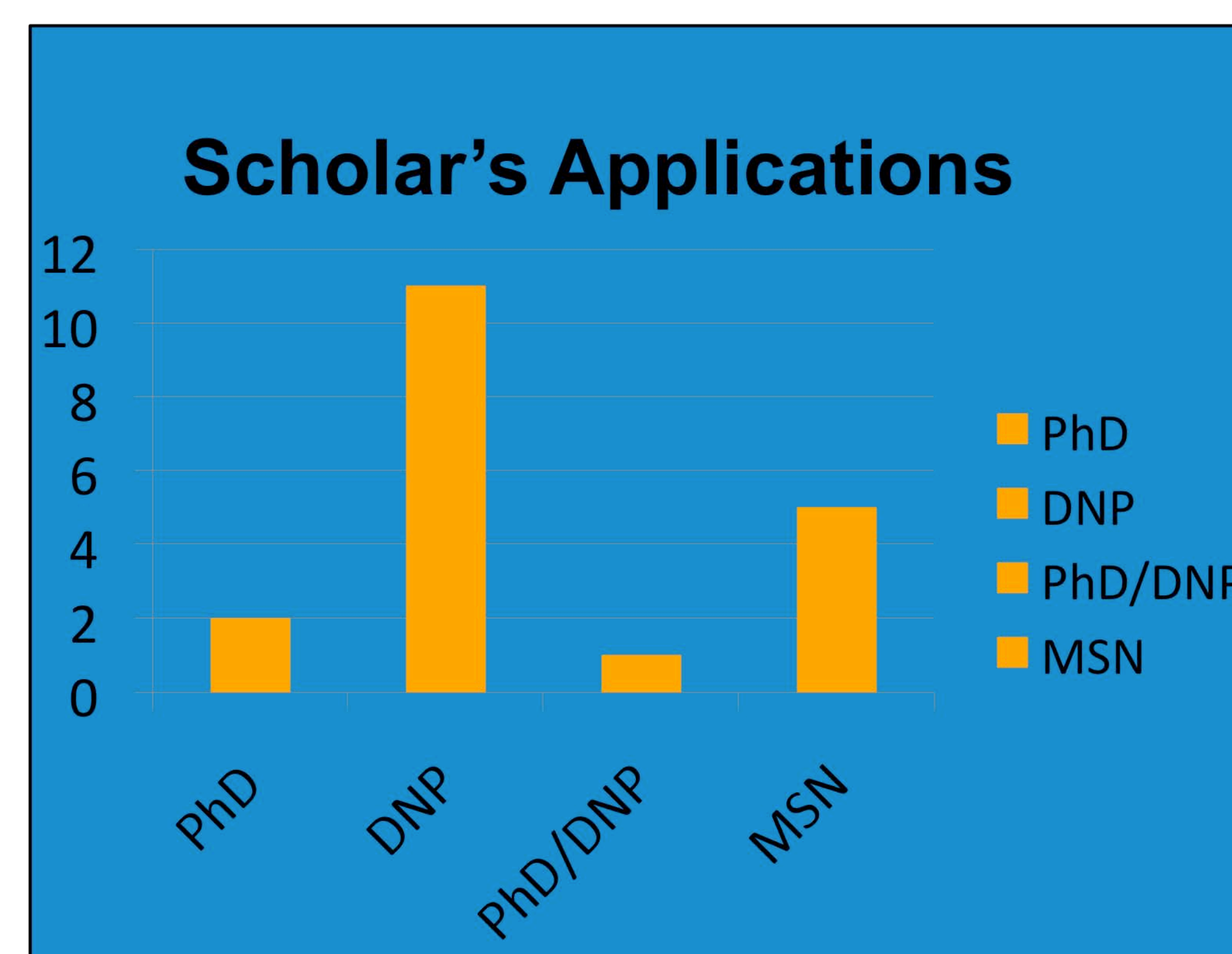
METHODS

- Forty NCIN scholarship recipients (37.5% male, 85% minority, 97% disadvantaged) were contacted via telephone or email following completion of their initial licensure program to ascertain factors influencing their pursuit of further nursing education.
- Questions posed to scholars included:
 1. What factors contributed to your decision-making process of applying to graduate school?
 2. Were there any individuals, activities, or life experiences that contributed to your desire to further your nursing education?
 3. What could the College of Nursing and the NCIN have done to assist or prepare you to continue your education?



RESULTS

- Of these 40 individuals, 42.5% applied to graduate programs
- **Male students** reported that exposure and interactions through NCIN with other males that were enrolled in doctoral programs positively influenced their decision to enroll in the Doctor of Nursing Practice (DNP) Program.
- **Female students** responded that frequent encounters, through the NCIN program, with female faculty members (PhD and DNP) played a large role in their decision to pursue doctoral education.
- **Both males and females** relied on family support and indicated that faculty affirmation of their ability to succeed in the programs assisted in their decision-making process.
- **Financial support** through scholarships and loans (DNP) and tuition waivers and stipends (PhD) was crucial in their decision-making process.
 - PhD students received tuition waiver yearly, plus 1st year stipend support of \$13,500 to \$25,000.
 - One PhD student was awarded the Southern Regional Education Board Fellowship that included \$20,000 per year stipend support for up to 5 years.



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1. American Association of Colleges of Nursing. (2013). *Enhancing diversity in the nursing workforce* [Fact Sheet]. Retrieved from <http://www.aacn.nche.edu/media-relations/diversityFS.pdf>

CONCLUSION

- Collectively, past scholars were pleased with the College of Nursing's and NCIN's efforts in educating them about the significance of pursuing advanced nursing degrees.
- Exposure, encouragement, and family and financial support positively influenced past scholars' decisions to pursue graduate education.
- Further investigations are needed to ascertain factors that facilitate pursuit of a research-focused doctorate in minority students and men.



BACKGROUND

Incorporating leadership activities into the hectic, full schedule of an accelerated BSN student is challenging. University of Delaware (UD) New Career In Nursing (NCIN) scholars are paired with practicing nurse mentors, periodically meet with local nurse leaders, attend at least one professional meeting, and complete the required professional/leadership seminars in the nursing curriculum to meet the leadership goals of the NCIN program. These opportunities are advantageous but integrating teaching and research assistant requirements into the NCIN program further builds knowledge, skill and confidence.

PURPOSE

To describe innovative leadership opportunities as research assistants and teaching assistants in the New Careers in Nursing program for accelerated BSN students in the University of Delaware (UD) School of Nursing.

METHODS

- Required one semester teaching or research assistantship for NCIN scholars during final 6 months of accelerated BSN program.
- Following completion of a year in the program, students are asked if they prefer to be a teaching (TA) or research assistant (RA).
- Program liaison and accelerated BSN program coordinator work with each student to determine the best match. Students' decisions are influenced by course success, relationships with faculty members, and previous life/work/school experiences.
- TAs required to earn ≥ 3.0 overall GPA, at least a B in the course in which they would like to assist. No minimal GPA to function as RA.
- Students provide 28 hours of service under faculty supervision.



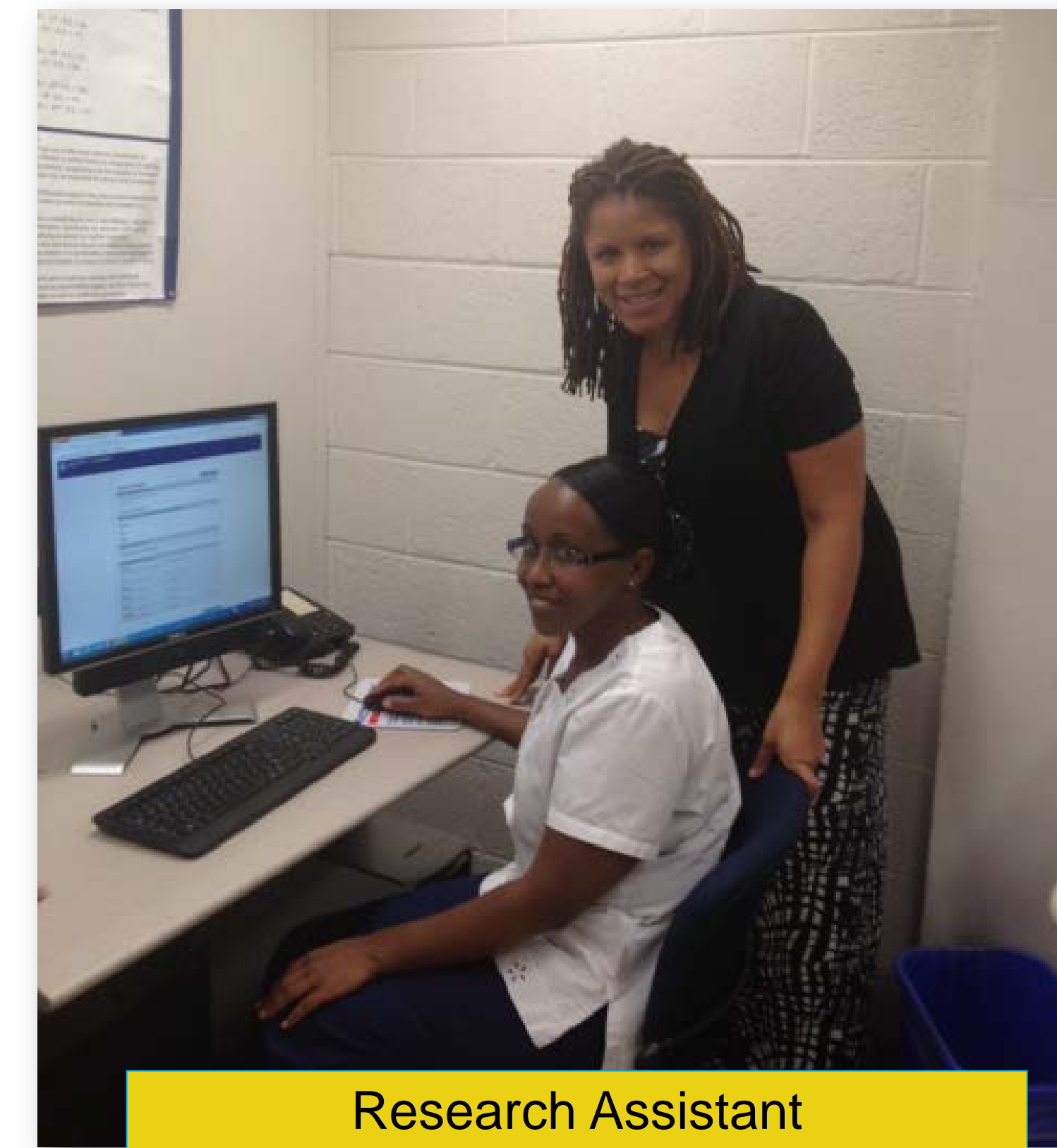
Teaching Assistant
Simulation Lab

- TAs assigned by professional staff member and approved by course faculty.
- Interested faculty interview the prospective RA after reviewing student resumes. The faculty researcher approves the RA and delegates responsibilities based on individual student capabilities.
- Reflection on leadership qualities and competencies gained through these experiences are incorporated through periodic individual/group meetings with the NCIN cohort, program liaison and program coordinator.

RESULTS

Three students in the 2011-2012 program participated in TA activities, specifically, in a sophomore level pathophysiology course, in a junior level adult health course, and in the simulation laboratory setting.

Outcomes observed and/or informally reported included in-depth knowledge of content, enhanced organizational and communication skills, nurturing of the seeds of mentoring, and instillation of confidence in their ability to be successful in the program and in the profession.



Research Assistant
Searching the Literature With Her
Faculty Mentor



Research Assistant
"PD Shoe" Study
Data Collection

Two NCIN scholars in the 2012-2013 program are functioning as TAs in the simulation laboratory and three students are RAs this fall semester.

For the RAs, assigned studies include either quantitative or qualitative research on topics such as cognitive functioning in elderly African Americans, improving functional status of individuals with Parkinson's disease, and medication-taking behaviors in people with Parkinson's Disease.

CONCLUSION

Incorporation of teaching and research assistantships can be successful with interested and dedicated faculty mentors and careful matching of NCIN scholar to type of activity.

Areas for improvement of this leadership initiative include additional direction to the faculty member supervisors/mentors and more focused NCIN scholar discussion and analysis of leadership competencies developed through TA/RA activities. A formal evaluation will be completed by scholars and involved faculty to assist in future planning.



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

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Lived Experiences of Racially and Ethnically Underrepresented Minority Nursing Students: New Implications for Recruitment and Retention

Cynthia Diefenbeck*, PsyD, APRN, BC, Robbi Alexander*, MSN, RN, and Barret Michalec**, PhD
University of Delaware School of Nursing* and Department of Sociology**

BACKGROUND

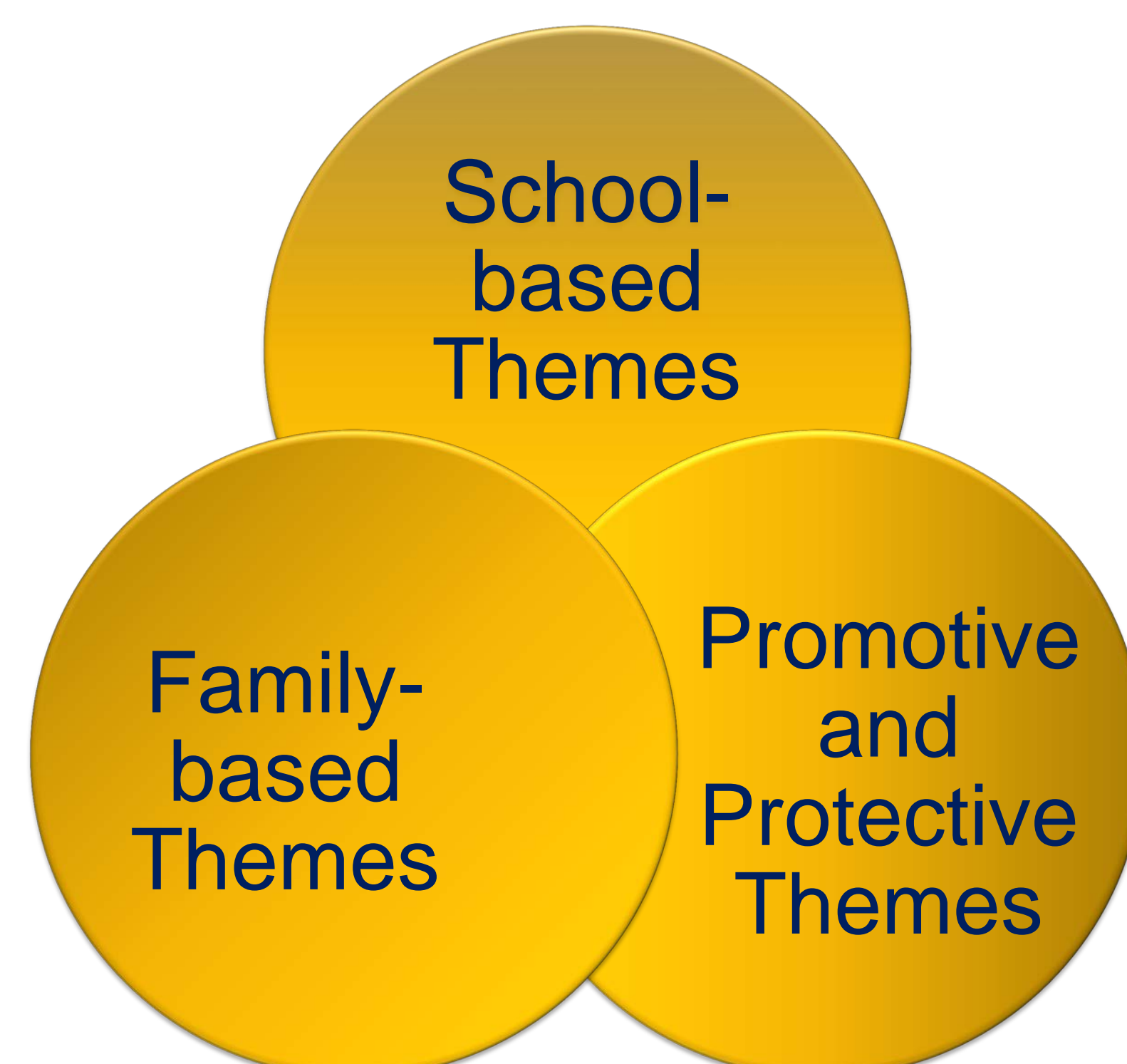
The growing diversity of the U.S. population is outpacing efforts to diversify the nation's nursing workforce (HRSA, 2010; Humes, Jones, & Ramirez, 2011). The IOM, ANA, and others have cited the need for diversifying healthcare professions which will enhance the patient outcomes and improve minority health disparities (NRC, 2003, 2004; Sullivan Commission, 2004). Nationwide, nursing education programs are not producing sufficient numbers of minority nurses to create a critical mass which leads scholars to predict that this diversity gap will widen (IOM, 2004, 2010). Previous research suggests addressing barriers to the recruitment and retention of underrepresented minority (URM) groups remains a challenge (NRC, 2003, 2004; AACN, 2011). In order to cultivate a racially/ethnically diverse nursing workforce, it is essential to understand minority students' lived experiences in their pursuit of a nursing degree. Additional research is needed to explore URM motivation for choosing a career in nursing, perceptions of their education, interactions in and around their schools, and how outside forces such as family play a role in their progression in and engagement with their curriculum, faculty, and peers. Previous work has featured a variety of samples that are not necessarily generalizable, such as community colleges or other commuter schools, in schools with high minority student populations, ESL students, and returning adult students.

PURPOSE

The purpose of this study was to 1.) Examine the experiences of currently enrolled African-American and Latina nursing students in and outside of their predominantly white BSN program and 2.) Highlight the hurdles and promotive elements nested within and around nursing education that may impact URM student recruitment and retention.

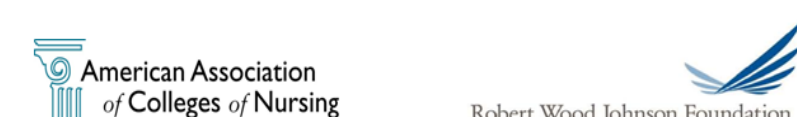
METHODS

- Invitations to participate were emailed to junior and senior undergraduate students in the School of Nursing (SON) who identified (on their admission application) as African-American or Latina (N=40). Twelve (7 African-Americans and 5 Latinas) completed the study. All participants were female, and ages of the participants ranged from 19-22. Three participants were born in countries other than the U.S. Participants were offered a \$25.00 American Express gift card for their participation.
- Participants were emailed a weekly questionnaire for five consecutive weeks. Each week's questionnaire contained different questions pertaining to specific topics of interest regarding the experiences of African-American and Latina nursing students. Participants chose a unique study ID code to protect confidentiality and placed the ID code on the questionnaires returned each week. Participants were asked to return a hard-copy of their completed questionnaires to a secured office in the SON. Follow-up emails were sent to the participants after seven days if they had yet to return their weekly responses.
- Data were analyzed using a multi-step coding process. Initially, transcripts were read by each author independently to identify reoccurring concepts. This inductive process identified key factors impacting the experiences of URM nursing students. Once these factors were clearly conceptualized by the researchers, a frequency analysis was conducted to identify how many times each factor was actually raised and how many independent sources raised each specific factor. To ensure a satisfactory level of inter-coder reliability the authors met at the beginning and end of each stage of analysis to discuss findings, memos, and notations. Differences between team members regarding particular findings were openly discussed and decisions were based upon consensus. The analysis of the qualitative data was led by a non-nursing school-affiliated co-author to minimize potential bias.



Themes	# References	# Sources
Interactions/Experiences with Faculty/Advisors (+/-)	46	12
Interactions with Students/Peers (+/-)	35	12
Drive to be a Nurse/Strong Desire to "Help"	25	12
Financial Issues	25	10
Family Support (+/-)	24	12
Lack of Formal Support Structures	19	9
Diversity in Curriculum (+/-)	18	12
Lived Experiences	17	10
Lack of Diversity in SON / University	18	9
Proximity to Home	15	9
Academic Difficulties	14	9
Motivation/Determination	11	7
Reputation of SON	10	6
Family in Health Care Profession	8	6
Faith / Religion	5	2
Strong Interest in Science	4	3

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RESULTS

- Interactions, both positive and negative, with faculty and advisors are the most referenced theme. Students have starkly different experiences.

"So many times I have been mixed up with another African American girl and it doesn't seem like a big deal to them. Time after time, it becomes a nuisance and quite annoying."

"I have great relationships with all of my professors. ... I am constantly approaching them for guidance and I feel that they are more than just welcoming towards me. They are truly interested and invested in my success and well-being."

- Interactions, both positive and negative, with peers is the second most referenced theme and also displays highly polarized responses.

"As far as other students, I feel recognized and an equal, peer, and nursing student. I think other students definitely see me and my participation in labs as a knowledgeable student."

"When there is group work I am likely the last candidate to be chosen to be in a group. When I speak my mind I often times feel like I am being ignored."

- Drive to be a nurse is distinct from general motivation/determination to reach goals.

"I stayed in nursing as a profession because I truly love taking care of people and wouldn't want any other career."

- Family support may or may not be present. In fact, some students felt quite alienated.

"My family isn't really a part of my student experience. I don't talk to my dad, and my mom just asks how I'm doing in school. She's been to UD two times in the three years I've been here."

- Student are concerned by the lack of diversity, lack of cultural competence in the curriculum, and lack of formal support structures for minority students.

"I have not yet had an African American professor teaching any of my nursing classes. And it seems almost unbelievable that this has occurred. I would expect the School of Nursing to recognize this and diversify its staff."

- Proximity to home and family in a health care profession were promotive factors for choosing the school and the nursing major, respectively. Financial issues remain a consistent barrier for students.

- Faith and religion were not particularly salient protective factors for most participants. A strong interest in science was not universal among this sample.

CONCLUSION

- Study supports existing research on barriers/facilitators of minority recruitment and retention in nursing education.
- Additional research is needed to explore factors influencing the highly polarized responses regarding faculty and peers.
- Recruitment efforts may benefit from further exploration of the specific desire to become a nurse that is distinct from general determination and motivation to succeed in one's life goals. Moreover, school selection may be influenced by proximity to home. Choice of nursing as a career may be influenced by family members in health care professions.
- Continued efforts to diversify nursing faculty and student bodies and to provide culturally relevant curricula and support programs is essential.
- Retention efforts may benefit from effectively engaging family.
- Limitations: sample size precludes generalizability; variation within the sample; limitations with e-questionnaire methodology; unclear how this differs from white students.

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HOW TO BUILD A SUCCESSFUL MENTORING PROGRAM FOR NURSING STUDENTS

Tiffany Murphy, MS, Assistant Director, Student Success Center

Gail Schoen Lemaire, PhD, PMHCNS, BC, CNL, Director, Clinical Nurse Leader Program

University of Maryland School of Nursing

BACKGROUND

The retention and academic success of students are important outcomes of nursing education. Programs that provide academic and peer support for students are likely to enhance student success. Mentoring is described as a reciprocal relationship where both students share in the personal growth and development of one another. Career advancement and psychosocial support are often identified as primary reasons mentees engage in the mentorship process (Ehrich, Hansford, & Tennent, 2004). The outcomes of mentoring in nursing, according to Dorey & Baker (2004), are enhanced self-efficacy, career progression, professional competence, and networking. In addition, Dorey & Baker considered mentoring as an approach to increase diversity in advance nursing programs and as a tool for student retention, helping students cope with the stressors of nursing education.

As part of the Robert Wood Johnson Foundation (RWJF) New Careers in Nursing (NCIN) scholarship program, the University of Maryland School of Nursing (UMSON) developed a mentoring program for students in the Clinical Nurse Leader (CNL) option. The CNL option is designed to prepare individuals with a baccalaureate degree in non-nursing discipline for a career in nursing. The NCIN program provides scholarship funding to nursing students from underrepresented groups in nursing or those from disadvantaged backgrounds who are enrolled in accelerated (second degree) nursing programs.

PURPOSE

The purpose of the CNL Mentoring Program is to offer support and resources to students as they acclimate to UMSON and the nursing profession.

PROGRAM DEVELOPMENT & IMPLEMENTATION

Recruitment:

- Letters were sent to potential mentors from the Assistant Director, Student Success Center
- 14 second-semester students served as mentors in Spring 2013
- RWJF Scholars were expected to participate as part of their requirements
- The CNL Mentor Program was promoted during the Student Success Immersion Programs and Campus Orientation
- Of the 40 newly admitted CNL students in Spring 2013, 68% participated in the program
- Mentors and mentees were required to fill out a matching survey, which also served as an agreement to participate.
- A second-semester RWJF Scholar accepted the leadership role of Mentor Liaison and provided follow-up to first-semester students and assisted with on-going communication to both mentors and mentees

Goals and Expectations:

- Mentors:
 - Be in good academic standing
 - Attend a mandatory training
 - Participate in two social networking events
 - Attend monthly meetings
 - Communicate with Mentor Liaison and mentees
 - Create S.M.A.R.T goals & develop expectations for the mentor/mentee relationship
- Mentees:
 - Complete a matching survey
 - Participate in two social networking events
 - Respond promptly to communication efforts
 - Develop S.M.A.R.T. goals with mentor

Resources:

- *Peer Mentor Companion* by Sanft, Jensen, McMurray (2008)
- Student Success Center's Blackboard community (calendar, training presentation, course syllabi, campus resources, and Pre-entry Immersion Program Online)

PROGRAM EVALUATION

To evaluate the program, an online survey was created using Survey Monkey. The survey contained 10 items, which were measured on a 5-point Likert Scale ranging from "Strongly Agree to Strongly Disagree." There were also three short answer questions. Students were asked to include their names for tracking purposes only. The survey was distributed via email at the end of each semester. The mentors and mentees received parallel surveys. The survey links were accompanied by a letter thanking students for participating in the program.

Sample Questions:

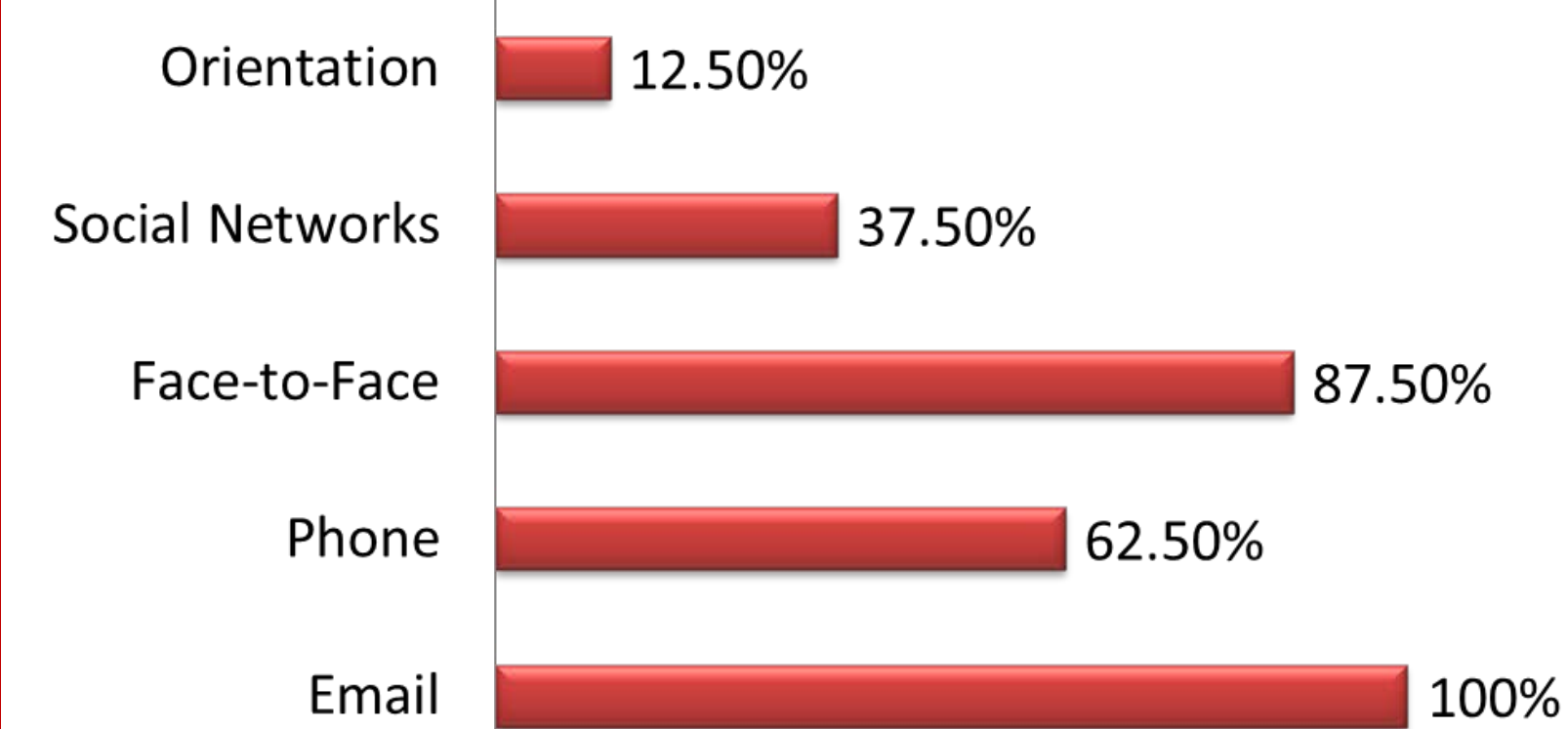
1. The goals and expectations of the mentor/mentee relationship were clear (multiple choice).
2. The support I received from my mentor better prepared me to navigate UMSON (multiple choice).
3. Would you participate in more organized activities? If so, what type of activities (short answer)?

RESULTS

Spring 2013 Results:

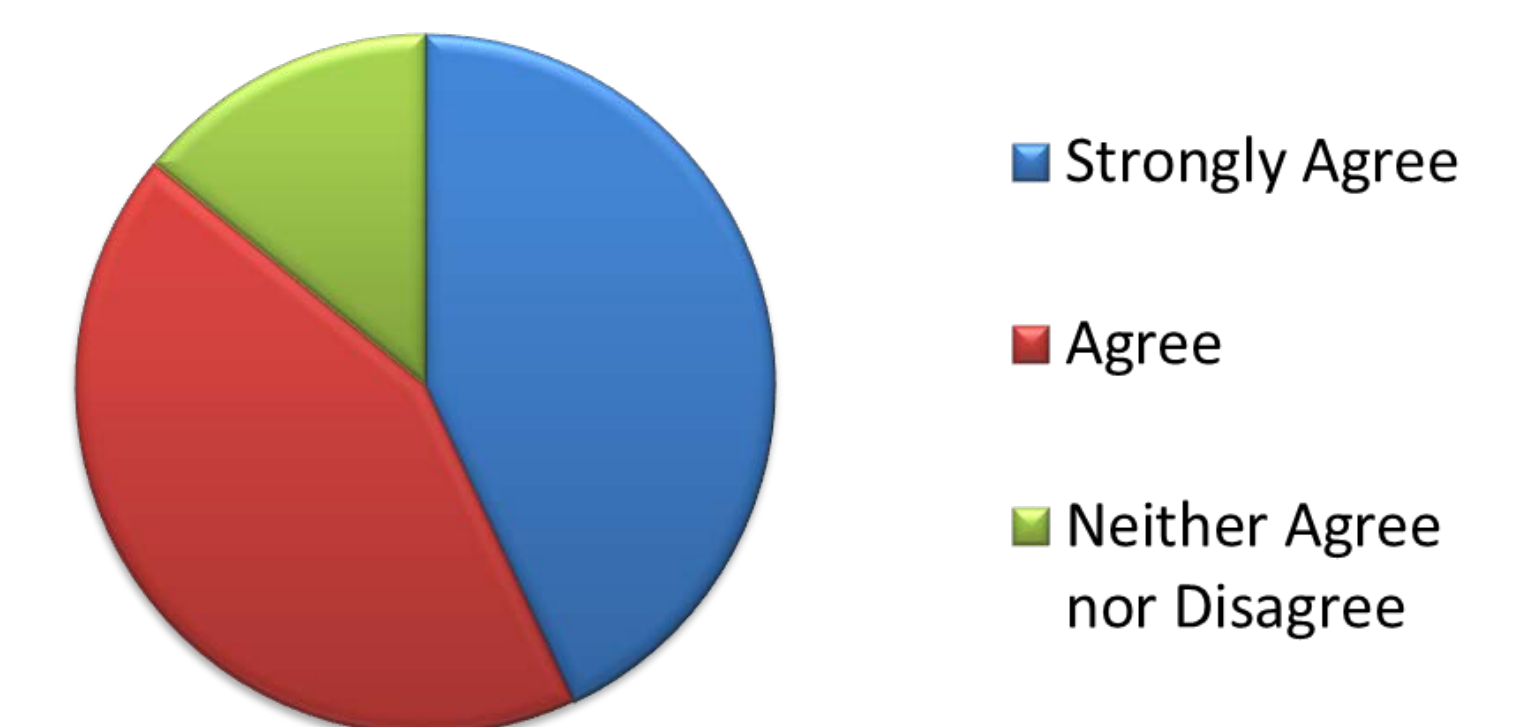
- 54% of participants completed the electronic survey
- 100% of mentors and mentees communicated via email messages
- 85.7% of the surveyed participants agreed or strongly agreed that they felt comfortable communicating with their mentor
- 46.5% of the surveyed participants agreed, the goals and expectations for the mentor relationship were clear (mentees were more likely to agree with this statement than mentors)
- 87.5% of the participants wanted to continue in the program the following semester

I communicated with my mentees through:

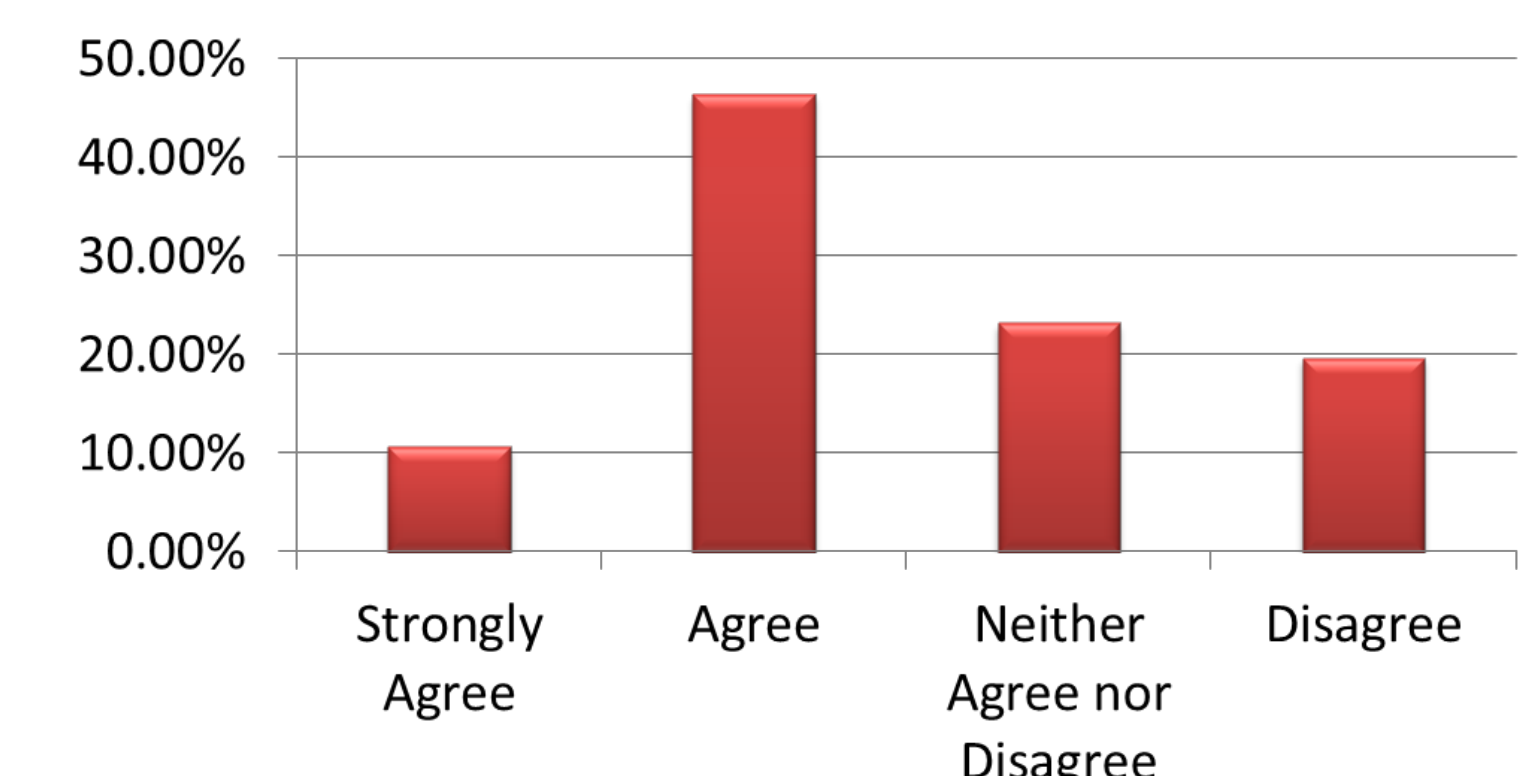


<http://www.nursing.umaryland.edu/faculty-and-staff/room-request>

I felt comfortable communicating with my mentor



The goals and expectations of the mentor/mentee relationship were clear



OUTCOMES/FUTURE IMPLICATIONS

Fall 2013 Outcomes:

- Admitted 53 first-semester CNL students for Fall 2013
- Of the newly admitted students, 74% are participating in the program
- Recruited 27 mentors (2nd & 3rd semester students)
- Created and implemented a new matching survey
- Continued mentorship from third-semester to second-semester students
- Conducted refresher training to veteran mentors
- Conducted new mentor training
- Developed and distributed CNL mentoring manuals (adapted from *Peer Mentor Companion*)
- Collaborated with the Graduate Nursing Association for the welcome event
- Distributed promotional materials for the program
- Implemented themed monthly meetings/workshops
- Recruited two additional Mentor Liaisons
- Added additional resources to the Student Success Center's Blackboard Community

Future Implications

- Increase the number of participants
- Strengthen mentor program by setting clearer goals and expectations for the relationships
- Evaluate the use of Schlossberg's Transition Theory and S.M.A.R.T.E.R. goal planning as a training tool
- Reevaluate the matching process
- Revise the online survey

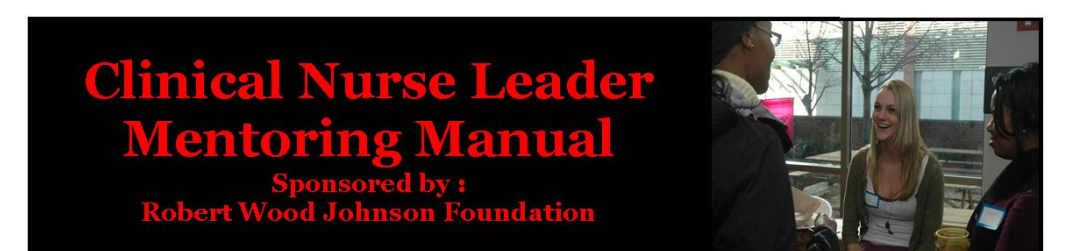


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Helping Students Make the Transition	Fig. 3
Campus Resources	Fig. 4
Setting Goals & Expectations	Fig. 5
Fall 2013 Calendar	Fig. 7

What is mentoring?
Mentoring is a reciprocal learning relationship in which mentor and mentee agree to a partnership where they will work collaboratively toward achievement of mutually defined goals that will develop a mentee's skills, abilities, knowledge, and/or thinking.

What is a peer mentor?
A peer mentor is a student who has learned from experience and has developed skills to successfully help other students at the University of Maryland School of Nursing.

What is the difference between formal and informal mentoring?
Informal mentoring describes the situation in which someone takes on the mentor role without being assigned. This type of mentoring often occurs in a family or friendship setting.

Formal mentoring usually takes place in a work or educational setting. Someone is either assigned or sought out to help another "learn the ropes." As part of the Clinical Nurse Leader Mentoring Program, you will be assigned a mentor and/or a mentee, which means you are in a formal mentoring situation.

How to be a more effective formal peer mentor:

1. Help students understand your role. Students may not understand why you have been assigned to be their peer mentor and what you can do to help them. It is your responsibility to communicate your expectations and understand them.
2. Focus on building a relationship. In a formal mentoring relationship, you must consciously work to build trust and develop a relationship. Your genuine interest in the students who are assigned to you will help you close the gap that initially exists between you and them.
3. Give students space. Don't be overbearing. Sometimes peer mentors are overly enthusiastic about helping new students. Give students an opportunity to decide what kind of help they need, and don't be discouraged or offended if they don't want your help.
4. Share ideas with other mentors. When you are part of a mentoring program, you have the advantage of a network of mentors. You can support one another and help each other meet the responsibilities of your assignments.
5. Ask for help. If you are having difficulty mentoring a student, you can turn to others for assistance. Talk to your fellow peer mentors, a member of the Student Success Center, or a faculty member to get ideas about how to make the relationship more successful.

The Clinical Nurse Leader Mentoring Manual was adapted from *Peer Mentor Companion*, M. Sanft, E. McMurray, & M. Jensen. Utah Valley State College.

"Mentoring is a brain to pick, an ear to listen, and a push in the right direction."
-John Crosby

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IMPLEMENTING TRANSFORMATIONAL LEADERSHIP THEORY IN AN ACADEMIC PEER MENTORSHIP PROGRAM TO IMPROVE CLINICAL LEADERSHIP SKILLS

JEANANN SOUSOU, DNP, RN, CNM-FA
RUTGERS SCHOOL OF NURSING

BACKGROUND

James MacGregor Burns (1978) developed transformational leadership theory based on ideals and characteristics of charismatic leaders who made change and were admired by their followers. Examples of such leaders include John F Kennedy, Martin Luther King Jr., and Ghandi. Bernard Bass (1985) expanded on this theory based this on the perception that leaders who possess idealized influence (attributes and behaviors), inspirational motivation, intellectual consideration, and individualized consideration are transformational leader and was the theory that guided this pilot study. This theory has been identified on several levels and in many studies as having positive influence on leadership performance, follower performance, job satisfaction, as well as increased self-esteem and self-confidence within a mentoring relationship.

PURPOSE

There is no published literature this researcher could locate specific to Rutgers School of Nursing (formally UMDNJ-SON), focusing on improvement of clinical leadership skills among Accelerated Bachelor of Science in Nursing (ABSN) nursing students in leadership and mentoring programs using Bass transformational leadership theory. The question asked was *whether clinical leadership skills improve among students mentoring and mentored after implementation of the Bass transformational leadership theory when compared to traditional curriculum?*

METHODS

Project Design

Two phase Pilot Study: Quantitative cross sectional design tested four separate homogenous groups of nursing students
Fall 2012 semester (Phase I- traditional leadership curriculum) and Spring 2013 semester (Phase II- implementing transformational leadership theory training session).
Evaluation instrument – MLQ-- rendered at two different points during each semesters for 4 total collections points during both Phases.
Phase I was the baseline in which no implementation of theory training session was rendered to upper level nursing students, while Phase II had the implementation of theory training. During both Phases, upper level students volunteered time mentoring lower level students in available campus skills and open lab sessions. Lower level students received no training session in either Phase.

Population of study

Accelerated Bachelor of Science in Nursing (ABSN) students- 15 month program/4 semesters- Level 1 (lower level) and Level 4 (upper level) students
Age range: 18-89, Fulltime status, no restriction with grade point average or academic standing. Invitational consent was rendered to all and participation was voluntary.

Evaluation Instrument Used

Multifactor Leadership Questionnaire (MLQ 5x Short Form) developed by B.M Bass based on the Full Range Leadership Model. Several studies have shown this instrument to have stable validity results in different leader roles, organizations, gender, and cultures worldwide (Casida & Parker, 2011).

Implementation of Training Session

During Phase I of the fall semester 2012, level fours subjects were not offered a formal training session on Bass transformational leadership theory in Nursing 420, but learned and discussed its significance among other leadership theories.
During Phase II of the spring semester 2013, level four subjects received the same required didactic learning objectives and course material, along with a training session devoted to transformational leadership theory focusing on the mentoring relationship.
No intervention with level one students except for attending regularly scheduled skills lab session in which level four volunteered assisting in the mentoring role.

RESULTS

A means comparison was conducted using SPSS version 20 for the following 3 comparisons. Overall, there was **no statistically significant data** to indicate improved clinical leadership skills among level one and level four students, even after implementing the Bass transformational leadership training session to level four students during Phase II. A Likert Scale was used with the following scale in identifying characteristics of each leadership quality of the Full Range Leadership Model: 1= not at all, 2= once in a while, 3= sometimes, 4= fairly often, 5= frequently.

When comparing the two phases, Level 1 students in both phases **Sometimes to Fairly Often** conformed to transformational leadership characteristics, more so than transactional and passive avoidant.

LEVEL ONE: PHASE I VERSUS PHASE II MEANS COMPARISON

	LEVEL ONE PHASES	N	Mean	Std. Deviation	Std. Error Mean
TRANSFORMATIONAL LEADERSHIP	Phase I	22	3.8977	.46687	.09954
	Phase II	11	3.8227	.36971	.11147
TRANSACTIONAL LEADERSHIP	Phase I	23	3.5924	.49603	.10343
	Phase II	14	3.3750	.39831	.10645
PASSIVE AVOIDANT LEADERSHIP	Phase I	25	1.9900	.54237	.10847
	Phase II	17	1.9044	.41817	.10142

When comparing the two phases, Level 4 students in both phases **Fairly Often** conform to transformational leadership characteristics, more so than transactional and passive avoidant. Ideally, passive avoidant characteristics were seen less often in the level 4 students than in the level 1 students.

LEVEL FOUR: PHASE I VERSUS PHASE II MEANS COMPARISON

	LEVEL FOUR PHASES	N	Mean	Std. Deviation	Std. Error Mean
TRANSFORMATIONAL LEADERSHIP	Phase I	19	4.0342	.55253	.12676
	Phase II	11	3.7091	.56295	.16973
TRANSACTIONAL LEADERSHIP	Phase I	19	3.3947	.55787	.12798
	Phase II	12	3.3021	.61111	.17641
PASSIVE AVOIDANT LEADERSHIP	Phase I	22	1.6648	.43709	.09319
	Phase II	12	1.7188	.47710	.13773

When comparing pre to post implementation of the training session, although there was no significant change with the means comparison after implementation, the data demonstrates that lower and upper level students conform **Sometimes to Fairly Often** to elements of transformational leadership characteristics more so than transactional and passive avoidant.

PRE-IMPLEMENTATION VERSUS IMPLEMENTATION: MEANS COMPARISON

	PRE VERUS POST IMPLEMENTATION	N	Mean	Std. Deviation	Std. Error Mean
TRANSFORMATIONAL LEADERSHIP	Pre-Implementation	56	3.8991	.51597	.06895
	Implementation	7	3.8429	.35406	.13382
TRANSACTIONAL LEADERSHIP	Pre-Implementation	61	3.4529	.53676	.06872
	Implementation	7	3.3393	.33630	.12711
PASSIVE AVOIDANT LEADERSHIP	Pre-Implementation	68	1.8217	.50247	.06093
	Implementation	8	1.9375	.34718	.12275

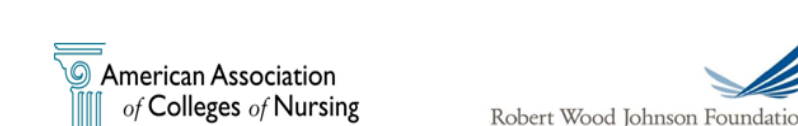
CONCLUSION

Discussion and Implications for future studies

Although the results were statistically insignificant as shown above, as a nurse educator in an Accelerated BSN program, these results are an encouraging finding for this group of non-traditional students. The results do not suggest that transformational leadership does not improve with training, but that *students entering this ABSN program as non traditional students are already transformational leaders representing elements of the theory characteristics. The greater means comparisons with the level 4 students show that they only improve upon those characteristics as they progress in the program from level to level.*

It is the role of nurse educator faculty to enhance these leadership skills in their students by encouraging future student leaders by getting involved in the various leadership and community roles and programs their campus and community has to offer, thereby translating them further into their practice as a future nursing professional. Future implications for this study include comparing traditional with non traditional programs, using a heterogeneous population and including other allied health schools, and including a qualitative arm by using focus groups.

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Evaluation of the Pre-Entry Immersion Program for the Robert Wood Johnson Scholars on Blackboard®



Deborah Salani, DNP, ARNP, Katherine Hauck-Perez, BSN, RN, Kenya Snowden, DNP, ACNP-BC, and Nilda Peragallo Montano, DrPH, RN, FAAN
 University of Miami School of Nursing and Health Studies

Background

The 7-week Pre-Entry Immersion Program (PIP) at the University of Miami School of Nursing and Health Studies (SONHS) was designed to prepare Robert Wood Johnson Scholar students with the fundamentals of an undergraduate accelerated academic program. The Pre-Entry Immersion Program utilizes Blackboard® online technology to introduce and prepare students in academic success strategies including mathematics, medical terminology, life preparedness, and time management. Unique to this program is faculty member leadership in the online units in order to reinforce the information and allow for questions. The purpose of this study was to evaluate the Pre-Entry Immersion Program presented in the learning platform.



Methods

Two cohorts of accelerated option students completed the PIP prior to beginning their program. They received a questionnaire within 6 months after completing the PIP asking for their feedback on the strengths and suggestions for improvement of the PIP. Twelve out of fourteen students returned the questionnaires.

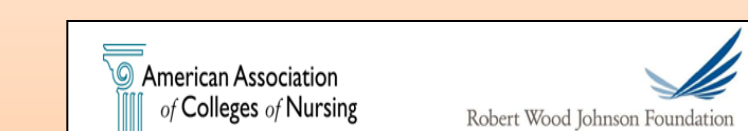
Results



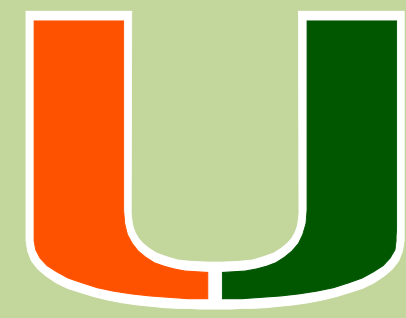
Conclusion

Modifications will be incorporated into the Pre-Entry Immersion Program to promote a successful transition into the rigorous accelerated nursing program.

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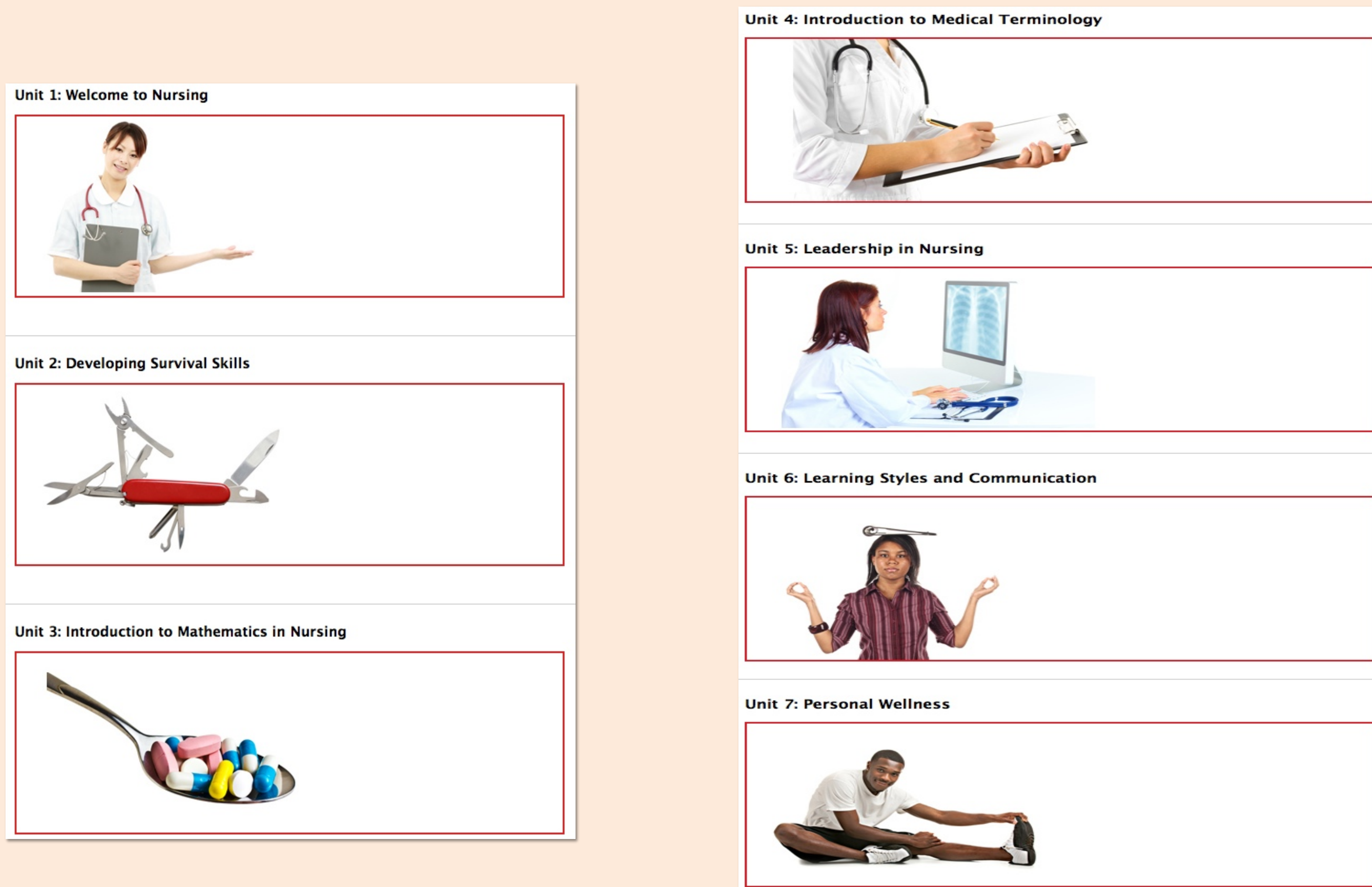
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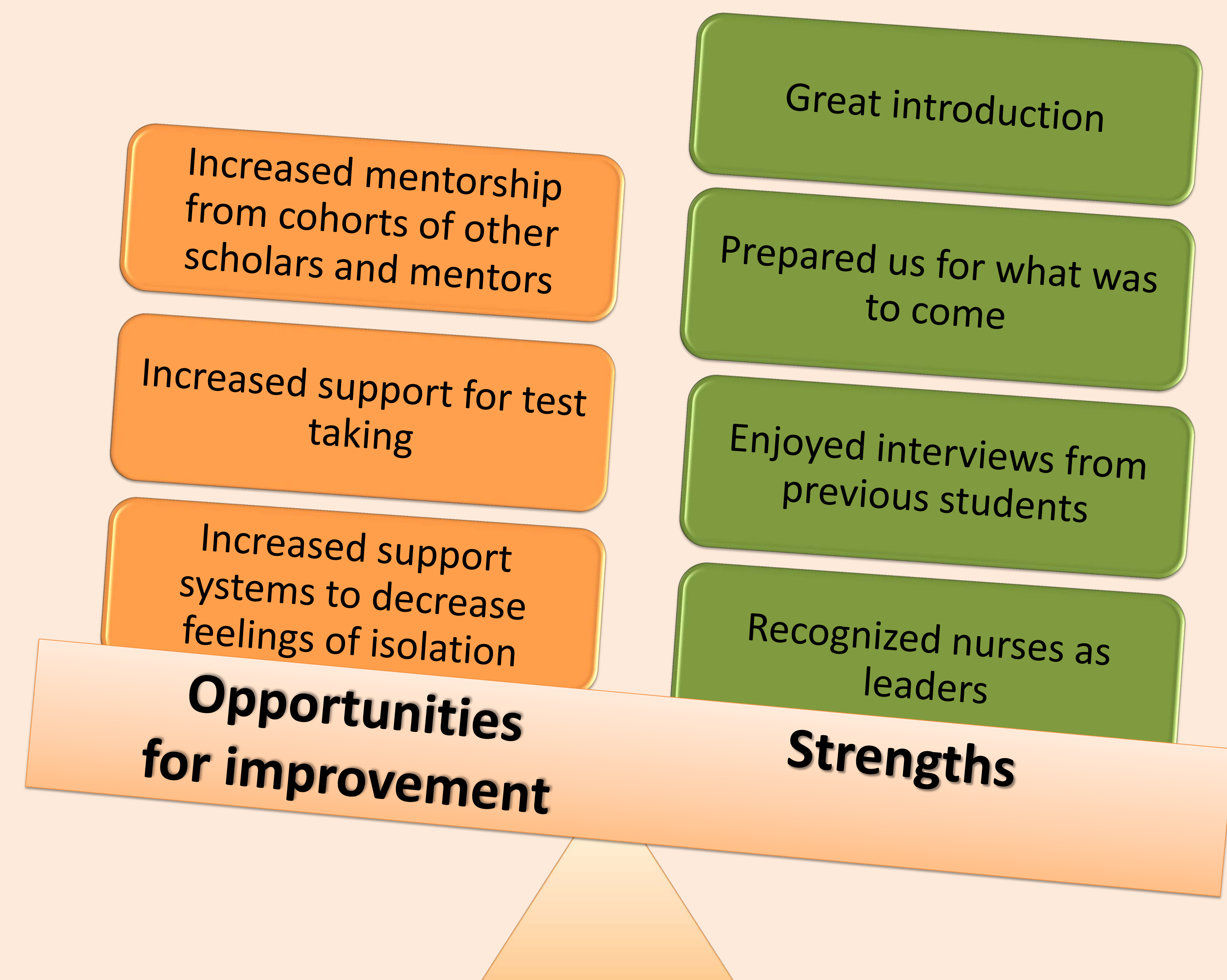
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EXPLORING THE FILM "WIT" TO CREATE A TRANSFORMATIONAL LEARNING EXPERIENCE IN THERAPEUTIC COMMUNICATION FOR ACCELERATED NURSING STUDENTS



Danielle McGinnis, MSN, RN, Waynesburg University, Pennsylvania
Barbara Summers, MSN, RN, West Virginia University, West Virginia
Amanda Machesky, MSN, RN, Waynesburg University, Pennsylvania



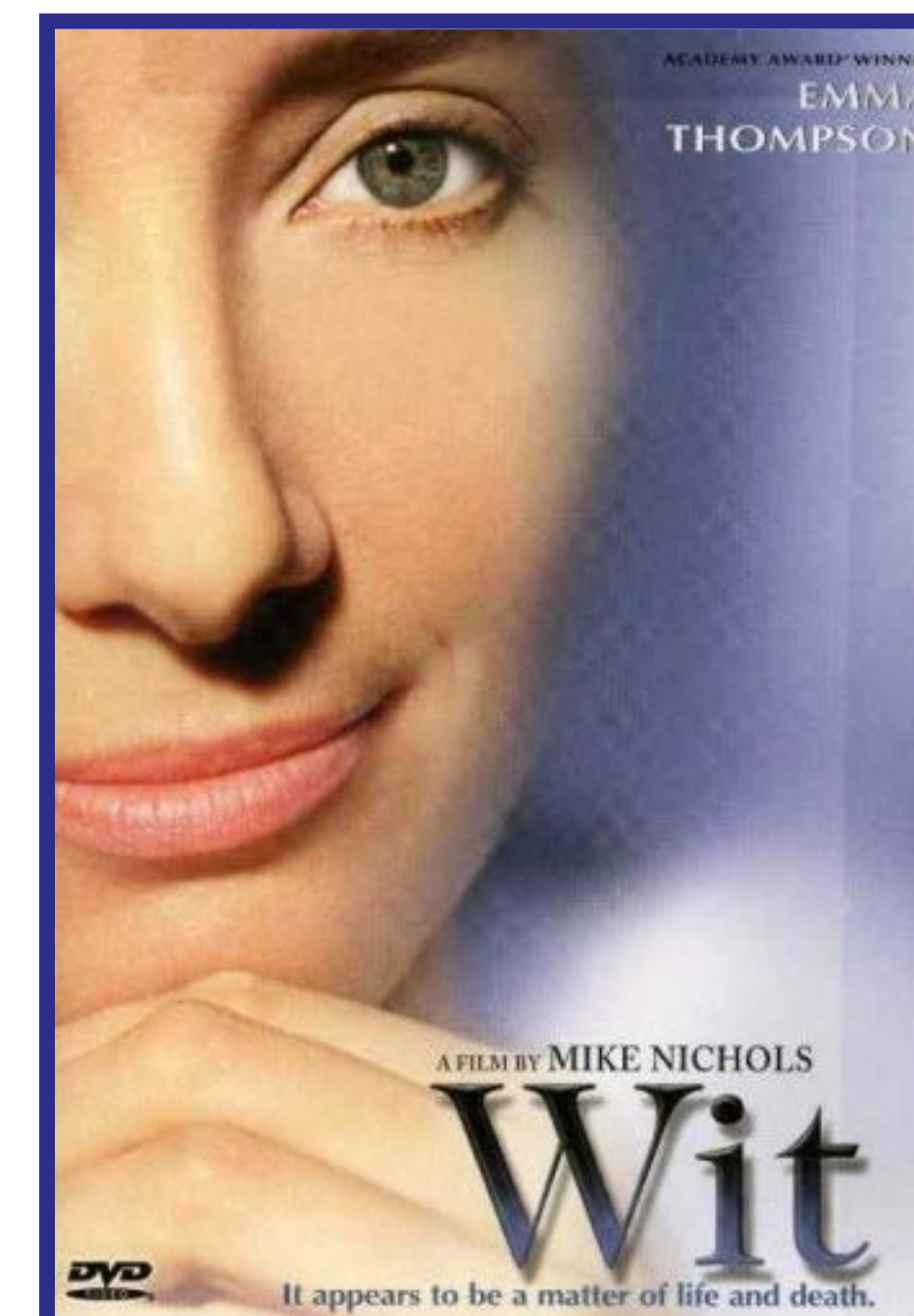
BACKGROUND

Innovative program designs, in addition to traditional lecture format, offer students both cognitive and affective experiences which transform learning beyond the simple accumulation of facts. The film "WIT" inspires students to transcend the role of passive observer, to become absorbed in the subtleties of human responses portrayed. Accelerated nursing students learn through contextual understanding, interpreting meaning in the context of their own lives. Students vicariously live the jarring experiences dramatized in "WIT." Subsequently, they formulate therapeutic, empathetic, and caring communication to replace the non-therapeutic communication exhibited in the film. As a result, students begin to expand their world view of nursing and of themselves.

METHODS

Students attend a traditional lecture on therapeutic and non-therapeutic communication; later, they watch the film "WIT." In groups of 7-9, students are assigned 2 scenes from the film to identify and analyze therapeutic and non-therapeutic communication. Students formulate therapeutic responses where the film is non-therapeutic. Together as the class watches the analyzed scenes, the film is paused and the group's findings are presented to and discussed with the class. Students answer the following 3 questions:

1. What are your thoughts when first viewing your assigned scenes?
2. Using the definitions from lecture, label interactions between the patient and the healthcare providers.
3. What would you do differently? Why?



PURPOSE

The purpose of this program is to use the film "WIT," a portrayal of a vulnerable cancer patient, to enhance accelerated students' ability to understand therapeutic and non-therapeutic communication.

Goals:

1. To evaluate the value of the innovative use of film on student learning
2. To improve student knowledge of therapeutic and non-therapeutic communication
3. To enhance student understanding of the unique role of empathy in nursing

RESULTS

Student comments were positive. Students indicated they valued the use of film: "this was a helpful method" and "this (film) helped me understand the subject material in a tangible...visual way." An improved knowledge of therapeutic & non-therapeutic communication was reported with comments such as, "the movie and in-class exercise clearly drove the point home regarding therapeutic communications and the do's and don'ts," and "it gave us a chance to think about how we might approach a situation differently" and "we were able to apply what we learned." Students also reported an enhanced understanding of empathy with comments such as, "it reinforces all of the concepts of nursing we have talked about...such as advocacy and empathy."

The DNP: Knowledge and Perceptions of Students in an Accelerated Master's Program in Nursing

Young-Me Lee, Karyn Holm, Elizabeth Florez, Megan Gauser, & Erin Haswell
DePaul University
School of Nursing

BACKGROUND

In 2004, members of the American Association of Colleges of Nursing released a position statement recommending that the Doctorate of Nursing Practice (DNP) replace the current master's degree as the entry level degree for advanced practice nurses by 2015. (AACN, 2004) Despite the disagreement and confusion surrounding the DNP recommendation, the number of DNP programs in the U.S. is steadily growing with 217 DNP programs in 2012 compared to 20 DNP programs in 2006 (AACN, 2013). While the nursing community generally agrees that the DNP degree will strengthen nursing as an academic discipline, there is little known and understudied about students' perceptions of the advanced degree.

PURPOSE

The purpose of this descriptive study was to examine knowledge and perceptions of the DNP as the standard entry-level degree for advanced practice nurses from the perspective of students enrolled in an accelerated masters program in nursing.

RESEARCH QUESTIONS

1. What is the level of knowledge of the Doctorate of Nursing Practice (DNP) among nursing students in an accelerated master's program in nursing?
2. What are nursing students' perceptions of the impact that the DNP degree requirement will have on nursing as a discipline, professional career paths, and the public/consumers' perceptions of nursing?

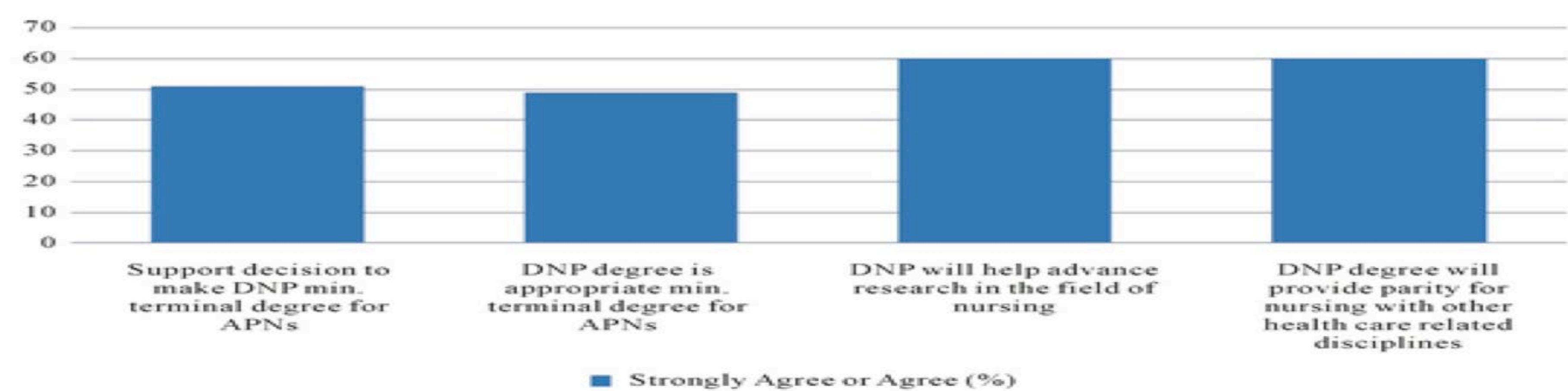
METHODS

- A quantitative descriptive design was conducted to identify and describe DNP knowledge and perceptions of students currently enrolled in an accelerated master's program in nursing.
- A literature guided questionnaire was developed to answer the study's research questions. The questionnaire included three sections: (1) demographic questions, (2) level of knowledge about the DNP, and (3) perceived impact of the DNP on nursing as a discipline on his/her personal career in nursing and on the general public.

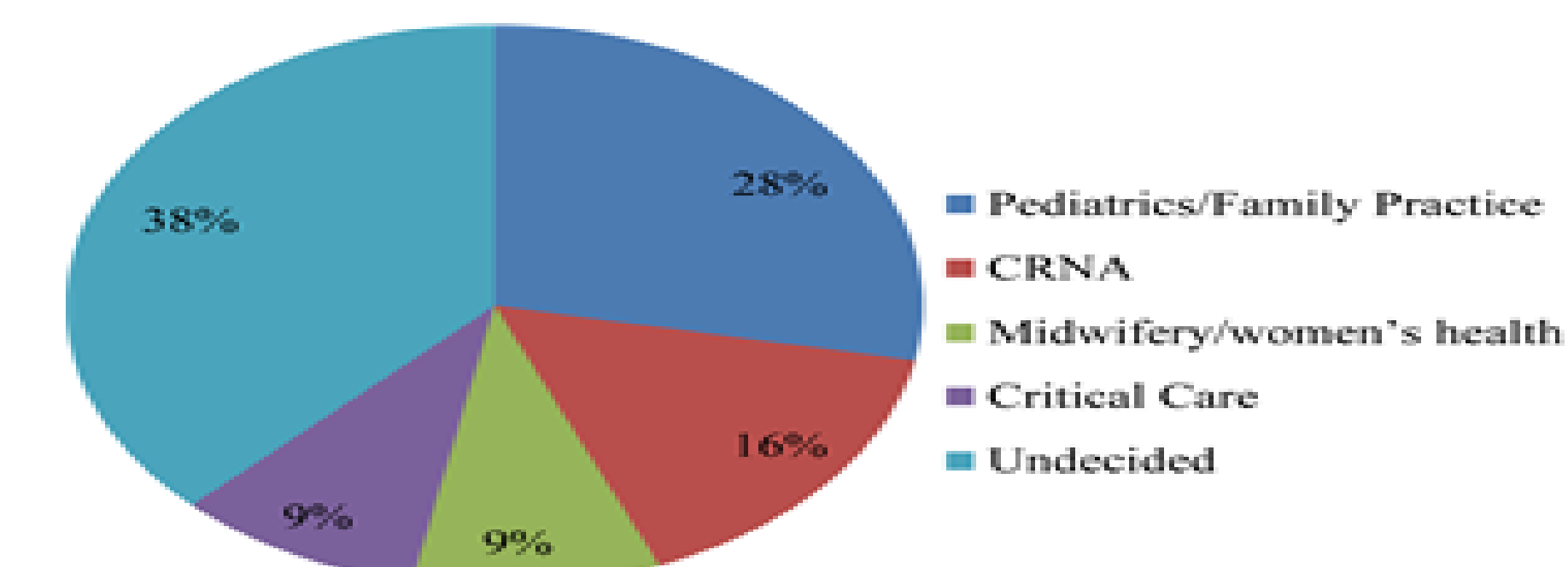
RESULTS

- 45 students participated in the study. The age range of participants was 21-57 years old with 88.9% female and 11.1% male.
- 97.8% were aware of the DNP transition, while just 88.9% were aware of the proposed transition date of 2015.

Nursing Students' Perceptions of the DNP Degree



Planned APN Career Paths

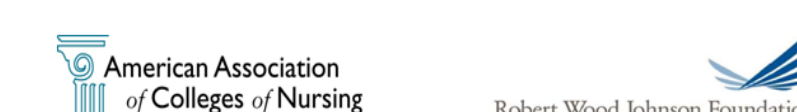


- 71.1% planned to pursue a career in advanced practice with 81.3% of these students planning to pursue a career in advanced practice even if the DNP is required.
- All of the participants planned to complete their advanced practice education within the next ten years, with over half the students, 56.3%, preferring a part-time program.
- 60% agreed or strongly agreed that the DNP will improve the public perception of nursing as a profession, with 65% of participants also agreeing the DNP degree will improve the public perception of advanced practice nurses.
- 35.6% were unsure/undecided if nurses who receive their DNP should be called "doctor". The majority (71.1%) agreed or strongly agreed that the title of "doctor" for DNPs will confuse patients.

CONCLUSION

The results of this study suggest that the majority of students in an accelerated master's program in nursing were interested in careers in advanced practice nursing. Participants in this study were accepting, though not entirely supportive of the transition to the DNP. Therefore there is a need to educate current nursing students about the DNP to alleviate concerns, while enhancing their level of support for the new degree. Nursing faculty members were one of the main sources of information about the DNP for the students in this survey, indicating faculty can play an important role in facilitating a smooth transition. Therefore schools/colleges of nursing must take a more formal role in providing an accurate and consistent information to students about the DNP. This information should address the practical changes that will impact the students' career decisions as well as the school's position on the issue.

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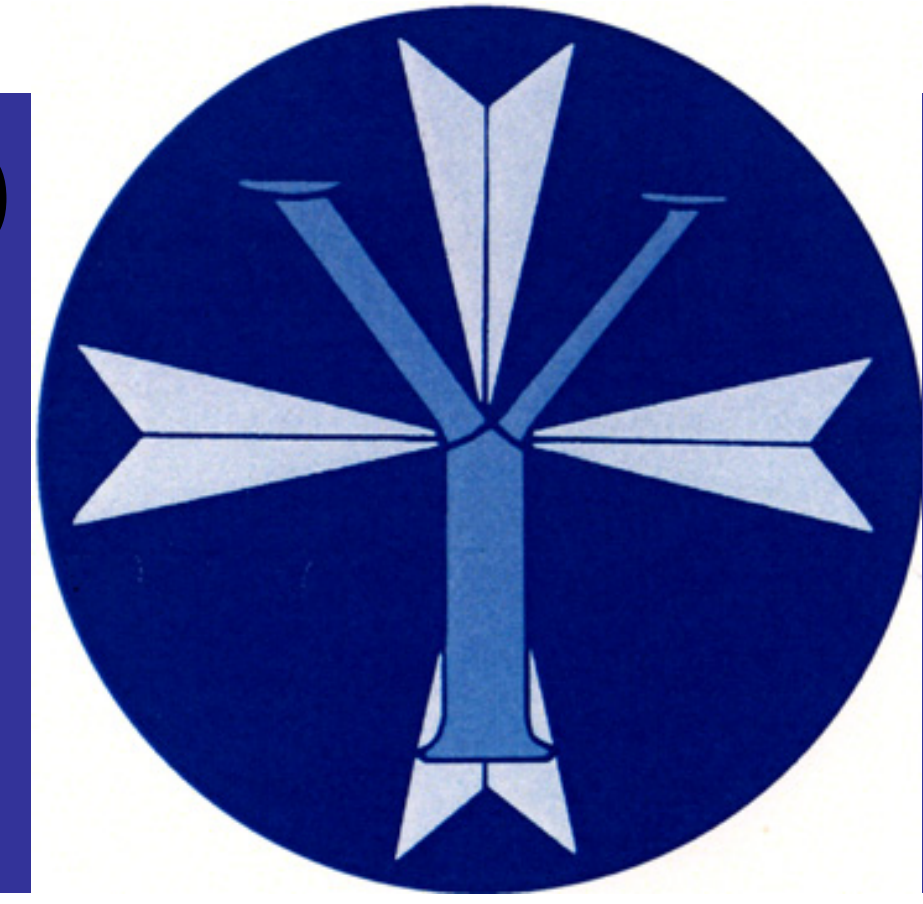


An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

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THE USE OF ART AND MUSIC TO IMPROVE NURSING STUDENTS OBSERVATIONAL AND AUSCULTATIVE ABILITIES



Pellico, L. H., Fennie, K., Friedlaender, L., & Duffy, T.C. Yale School of Nursing, Yale Center for British Art, and Yale School of Music

BACKGROUND

Observation and auditory skills are essential competencies for nursing practice. Research studies reveal observational abilities are improved with visual training in an art museum and that the standing competence of auscultative skills is inadequate. This initiative demonstrated that there are numerous avenues to pursue in learning, refining, and integrating our senses as we educate future generation of nurses. Given that the skill of physical examination is multisensory, curriculum that enhances the skills of observing, touching and hearing logically has potential for improved competency. This intervention will be beneficial in any educational or profession setting that requires observation and assessment and is currently being translated to all basic nursing students.

PURPOSE

Given that observational and auditory skills take time to perfect, the concern revolves around accelerated students' ability to master proficiency in a timely manner. We developed an innovative program "looking is not seeing and listening is not hearing" where art work and visual training (*Looking is not seeing* aspect) and music auditory training (*Listening is not hearing* component) for nursing students in an accelerated masters entry program demonstrated efficacy on their competence in detecting of heart, lung and bowel sounds and improved observational and diagnostic reasoning skills.

METHODS

A pretest—posttest experimental design was used in which 77 students in an accelerated master's program for non-nursing college graduates were randomized to receive either music auditory training by a music professor in a music hall and observation training in a museum with a gallery instructor using artwork, versus viewing a DVD of the music intervention and observation training in a classroom with a nursing instructor using handheld images and artwork display via power point. All students were given a pre-test during the first week of nursing school and asked about their history of music and art training. Testing consisted of students ability to identify which organ was associated with specific body sounds, as well as their ability to interpret a total of 25 sounds (10- lung, 11-heart, 4-bowel sounds), and interpretation of pictorial images of specific disease states.



RESULTS

Our previous research revealed that nursing students who participated in observational training using artwork in a museum under the direction of an art docent and clinical faculty member observed more signs or symptoms, identified more objective clinical findings, and offered more alternative diagnoses when performing a differential diagnoses with a clinical picture compared those nursing students who received traditional classroom and clinical teaching (Pellico et al, 2009). Additionally, our research on the use of music auditory training in a music hall with a distinguished composer and music expert demonstrated significant improvement in bowel, heart, and lung sounds ($p < .0001$), in nursing students (Pellico et al, 2012). The ability to label normal and abnormal heart sounds doubled with this two hour intervention, interpretation of normal and abnormal lung sounds improved by 50%, while bowel sounds interpretation improved three fold. Cognizant that many colleges and universities do not have access to museums, music halls, art and music experts, the aim of this study was to test a portable music and art program and compare results to our traditional research efforts thereby testing equivalency of the two teaching modalities.

Results reveal that students correctly identified approximately 68% of bowel sounds, 38% of lung sounds, and 26% of heart sounds after this two hour intervention, and significantly improved their observational abilities over time ($p < .0001$) on all measures with few exceptions. In addition, there were no differences between the groups over time for most measures, suggesting that the classroom experience is an effective pedagogy for improving the observational skills of nursing students. In addition, there were no differences between the groups over time for most measures, suggesting that the classroom experience is an effective pedagogy for improving the observational skills of nursing students.

Listening (Sounds)	Intervention				Total		Significance*
	Traditional (n=38)		Images and DVD (n=39)		Count ± sd		
	Count ± sd		Count ± sd		Pre	Post	
	Pre	Post	Pre	Post	Pre	Post	
Heart							
Correctly identified organ	6.7±2.0	9.0±2.3	7.1±1.7	8.8±2.7	6.9±1.9	8.9±2.5	§
Correctly identified sounds	0.1±0.3	3.0±2.1	0.1±0.2	2.9±2.1	0.1±0.3	2.9±2.1	§
Lung							
Correctly identified organ	3.4±1.6	8.1±2.1	4.0±1.6	8.0±3.0	3.7±1.6	8.0±2.7	§
Correctly identified sounds	0.8±0.9	4.0±1.9	0.7±0.8	3.6±2.2	0.8±0.9	3.8±2.0	§
Bowel							
Correctly identified organ	0.3±0.5	3.8±1.4	0.7±0.8	3.9±1.4	0.5±0.7	3.8±1.4	§,J
Correctly identified sounds	0.0±0.0	2.6±1.4	0.1±0.2	2.7±1.5	0.02±0.2	2.7±1.4	§

CONCLUSION

Educators are faced with the challenge of developing best-practice teaching-learning strategies to help students attain clinical competency in RN and APRN roles, and our research reveals that that use of arts (visual and auditory) improves students' clinical competency. The activities of viewing works of art and aural training using music sharpens the observational and reasoning skills of nursing students and auscultative interpretive abilities, and holds promise for future medical education. The efficacy of our DVD delivery opens the door to inexpensive, mass distribution.

Funded by
The New Careers in Nursing Program



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

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A COST-CONSCIENCE ASSESSMENT TOOL KIT FOR IDENTIFYING PREDICTORS OF NCLEX-RN SUCCESS IN ACCELERATED SECOND DEGREE STUDENTS

Joan Such Lockhart, PhD, RN, CORLN, AOCN, CNE, ANEF, FAAN - Frank D'Amico, PhD
Kate DeLuca, MBA - Rosanna Henry, MSN, RN - Leah Vota Cunningham, MNEd, RN

 **DUQUESNE UNIVERSITY**
SCHOOL OF NURSING
PITTSBURGH, PA

BACKGROUND

- Accelerated Second Degree Nursing programs support our nation's goal of increasing the number of baccalaureate prepared nurses to 80% by 2020 (Institute of Medicine, 2010).
- Failure to attain first-time success on the NCLEX-RN licensure exam poses challenges for graduates, schools of nursing, and health care organizations.
- NCLEX-RN failures also delay the impact of national initiatives, like the Robert Wood Johnson Foundation New Careers in Nursing Program, aimed at developing a more diverse nursing workforce (RWJF NCIN, 2013).
- Therefore, it is vital that schools of nursing utilize resource-conscious continuous quality improvement strategies to systematically identify factors that predict students' first time success so that early, tailored interventions can be used to support at-risk students upon admission.



PURPOSE

Describe the process used to create, implement, and evaluate Duquesne University School of Nursing's assessment plan to determine factors to predict first-time NCLEX-RN success of Accelerated Second Degree Nursing students who completed a 1- year program.

METHODS

A 10 step-approach was used to accomplish our purpose and goals:

- 1) Create a team, identify a leader, and assign roles & responsibilities
- 2) Define project purpose and aims
- 3) Review past NCLEX-RN research
- 4) Seek potential funding sources
- 5) Develop a proposal (design, sample/setting, key variables, procedures for data collection and analysis, timeline)
- 6) Obtain IRB approval
- 7) Create code book & database
- 8) Collect data
- 9) Analyze data
- 10) Disseminate results (suggested action plan based on comparison of actual vs. targeted results).



RESULTS

- The NCLEX-RN Assessment Team was comprised of the Associate Dean for Academic Affairs, Assistant Dean for Student Services, Academic Advisor, faculty engaged in NCLEX-RN preparation, and a statistician.
- A descriptive, correlational study was initially used to retrospectively identify demographic, pre-admission, academic, diagnostic, test anxiety, and self-prediction variables from graduates since 2009..
- A 3-phase data analysis process helped us develop a model that provided evidence for decision-making.
- Results were reported at the undergraduate program committee who is responsible for developing an action plan.
- Curriculum and policy changes (admission, grading, progression, etc.) allocation/reallocation of resources are being implemented.
- Decisions are recorded in committee minutes for ongoing tracking for continuous quality improvement purposes.



CONCLUSION

- Designing and implementing a successful NCLEX-RN assessment plan requires careful preparation, ongoing communication, detailed analysis, precise monitoring, and a qualified team dedicated to continuous follow-up.



- Our model was developed after studying data collected since 2009 based on basic and second degree graduates.
- University Mini-Assessment Grant (\$2,000) provided funds to support the first study year; similar ongoing annual support from School of Nursing has enabled sustainability..
- Our model can be used by other schools in their efforts to strengthen NCLEX-RN success.
- Recent curriculum and grading changes will be incorporated into the model as an integral part of continuous quality improvement.

Funded by
The New Careers in Nursing Program

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



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Project funded by Duquesne University Mini-Assessment Grant, Provost's Office, and the Duquesne University School of Nursing

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Student Mentoring: A Program Evaluation



College of Nursing and Health Professions
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Background

Future nurses need the knowledge, skills, and attitudes necessary to continuously improve the quality and safety of the healthcare systems in which they work. The American Association of Colleges of Nursing's Essentials of Baccalaureate Education for Professional Nursing Practice states that graduates must be able to communicate and collaborate among healthcare professionals to deliver high quality and safe patient care (AACN, 2008). Mentorship programs have been shown to have a positive impact on practice, personal satisfaction, and professional success (LaFleur & White, 2010). Therefore, the implementation of a student mentoring program should create opportunities to practice these necessary skills, gain related benefits, and integrate the AACN's Essentials.

Purpose

The purpose was to evaluate a new Peer Mentoring Program for Baccalaureate to BSN (BAC/BSN) nursing students. Mixed methods used included quantitative evaluation of the program's strengths, benefits, and weaknesses using a scored survey while qualitative data were collected from participants' comments. This study was approved by the University's Institutional Review Board.

Methods

Design: Prospective, cross-sectional using a mixed-methods approach.

Sample: Second-semester Sophomore, and Junior and Senior Undergraduate BAC/BSN nursing students.

Program: A formal "Meet and Greet" event included an educational presentation on mentorship to delineate roles, expectations, and goals of the participants. They were able to meet and talk with potential mentors/mentees using a speed-dating format. Post-event, investigators finalized the matches utilizing participant preference sheets. The mentor and mentee included the frequency and method of their communication in their signed contract. An assigned investigator followed up monthly on the progress of the relationship. An end-of-the year event was held for the participants that included a keynote speaker, participant testimonials and distribution of certificates of achievement.

Evaluation: A newly-developed survey by Jaensch, Lowe, Thorpe, and Torres (2010) was completed by the participants at the end of the program. The survey consisted of 23 items using 5-point Likert-scale questions and 3 open-ended questions. The survey included four subscales to evaluate the program, the relationship match, the school, and personal benefits. For analysis of the participant comments, common themes and key concepts were determined and tabulated by two independent investigators.

Results

Quantitative:

- Total score = 93.53 ± 19.95 (23 – 115)

Subscales:

- Program subscale = 33.49 ± 6.60 (8 – 40)
- Relationship subscale score = 29.59 ± 6.60 (7 – 35)
- School subscale = 11.64 ± 3.37 (3 – 15)
- Personal Benefits subscale = 18.80 ± 5.14 (5 – 25)
- The overall scores reflect a positive evaluation of the program. Furthermore, 59% of the participants would recommend the program to others.

Qualitative:

The weaknesses identified from the participants' surveys included the following:

- scheduling conflicts
- maintaining contact with mentor/mentee
- losing sight of program goals

The common recommendations for the program included:

- enhancing communication and/or contact with their match
- having the mentor/mentee be only one semester apart in the program

The results from the participants' surveys indicated the following benefits:

- being helpful
- providing emotional support and encouragement
- receiving emotional support
- reducing anxiety and stress
- building confidence
- being better prepared
- having a relationship with someone who has had the same experiences

Conclusion

The newly implemented Peer Mentoring Program provided participants the opportunity for a unique relationship among mentors and mentees that likely would not have occurred without the program. This unique relationship increased social interaction for the benefit of student productiveness, confidence, well-being, and personal growth.

Future research is suggested to identify ways to improve academic performance and professional skills. The peer mentoring program will continue to be offered for BAC/BSN nursing students and participation will be expanded for a trial with traditional undergraduate nursing students. The investigators will enhance the program for future enrollment based on participant evaluation data.

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Funded by The New Careers in Nursing Program
An initiative of American Association of Colleges of Nursing and the Robert Wood Johnson Foundation.

BACKGROUND

Peer Resource Network (PRN) is a peer-mentoring program that benefits entering nursing students at Linfield College. PRN matches students in the first semester of nursing school with peers who have successfully progressed in the program. The goal of PRN is to help new students successfully transition into nursing school. Historically, the program relied on volunteer mentors who were paired one-to-one with new student mentees. Up to 40 mentoring pairs had to be assigned and coordinated making the program challenging to manage. Because there were so many volunteer mentors, it was impossible to provide adequate training on good mentoring practices. Additionally, it was difficult to ensure that all of the mentors were adequately communicating with their assigned mentees throughout the semester.

PURPOSE

The purpose of redesigning the Peer Resource Network was to make the program more manageable and effective, provide more communication between mentors and mentees, increase accountability, and provide more opportunities for data collection and assessment.

METHODS

- Reduced number of mentors from 40 to 6.
- Mentor candidates submitted a job application and were interviewed for the positions.
- Mentors participated in half-day training where they learned about best practices in mentoring.
- Potential mentees submitted online application prior to start of classes.
- Each mentor was assigned four to six mentees.
- Mentors reviewed mentee applications to determine best fit.
- Mentors were paid two hours per week for their time communicating with assigned mentees.
- Mentor-Mentee Meetup at the beginning of each semester was hosted to allow for first face-to-face contact.
- Throughout semester, mentors kept track of mentee communications and interactions using a weekly log sheet.
- Monthly mentor team meetings took place to facilitate discussions and ongoing training.

RESULTS

The redesign of the PRN mentoring program allowed us to improve the leadership of the program, hire highly qualified mentors, and create more opportunities for mentors and mentees to interact. Highlights of the redesigned program include:

- Two mentors from the spring semester continued on with student leadership and became student body president and vice-president, respectively.
- Hired six accelerated students as mentors for our new accelerated cohort, two of whom were NCIN scholars.
- Hosted three successful PRN meetups to create space for face-to-face interaction.

Next steps to continue improving PRN include:

- Monthly communication logs submitted by the mentors to the program coordinator.
- Developing new ways to engage mentees such as, hosting small group gatherings throughout the semester.
- Developing pre and post surveys to ensure the program is meeting the needs and learning objectives of the mentees.



The PRN Mentor board displays mentors profiles for new students.



Enjoying lunch together at the PRN Mentor training.



A mentor provides advice for her group of mentees at the Meetup.

Funded by
The New Careers in Nursing Program



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

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OUTCOMES OF THE ROBERT WOOD JOHNSON FOUNDATION NEW CAREERS IN NURSING PROGRAM FOR ACCELERATED STUDENTS



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BACKGROUND

The Institute of Medicine (2010) has called for a transformation of the nursing workforce to meet the complex health needs of future diverse populations, and identified the need for more nurse leaders and faculty. Accelerated nursing programs offer a fast track solution to address these demands (AACN, 2012).

As a result, nursing schools must: a) increase the numbers of individuals from underrepresented groups; b) provide financial aid for accelerated students; and c) cultivate highly educated entry-level nurses to become future leaders and educators.

PURPOSE

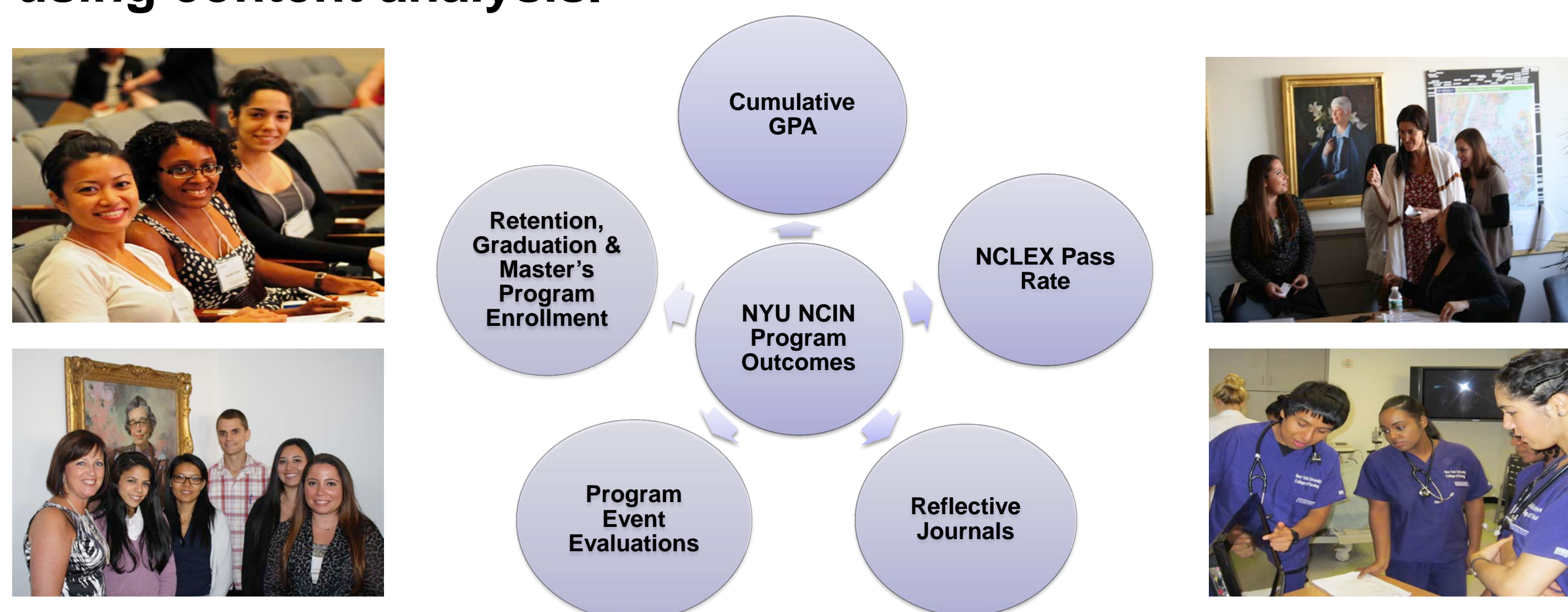
The aim was to assess the outcomes of the Robert Wood Johnson Foundation New Careers in Nursing (NCIN) Scholarship Program to provide leadership development and mentoring, along with scholarships, to accelerated baccalaureate (BS) nursing students from underrepresented and/or disadvantaged groups.

METHODS

Program outcomes were measured using mixed methods. Students ($N = 30$) were enrolled in a 15-month accelerated BS curriculum and were selected for the NCIN Program from a competitive pool of 137 qualified applicants.

Formalized mentoring and leadership development activities were provided pre-entry and during each semester. Descriptive statistics were calculated for program evaluation scores; cumulative GPA; retention, 15-month graduation, and NCLEX pass rates; as well as enrollment in graduate study.

Periodic assessments through reflective journals and comments on program evaluations were analyzed for themes using content analysis.



RESULTS

A majority of students (80%) were financially disadvantaged and comprised underrepresented groups in nursing, including Hispanic/Latinos (40%), African-Americans (17%), Asians (13%), and males (27%).

Retention, graduation, and NCLEX pass rates were 100% with an average cumulative GPA of 3.57. Graduates from the first cohort (27%) and the entire second cohort have enrolled in a master's program or taken graduate courses. Current students have a cumulative GPA of 3.52, are engaged as student leaders, and have taken advantage of research, practice, and professional development opportunities.

Overall ratings for all NCIN program activities were excellent (mean = 4, on 1-4 scale). Comments on program offerings included the themes: 1) feeling prepared for the accelerated BS program, 2) increased self-awareness, and 3) developing new ways of thinking.

Content analysis of the reflective journals revealed five themes: 1) full engagement, 2) time flying by, 3) personal and academic growth, 4) connections between education and practice, and 5) professional development through mentoring and support.



CONCLUSIONS

The NCIN Scholarship Program has been successful in supporting the professional growth of accelerated entry-level nursing students from underrepresented and/or disadvantaged groups through leadership development and mentoring. In addition to offering financial support, the program implemented effective strategies that provided students with leadership, research, clinical, and professional development opportunities and sparked their interest in graduate study.

Continued cultivation of highly educated nurses representing diverse populations with the potential to be future leaders and educators is necessary to transform the nursing workforce in order to provide quality health care to patients with complex needs.

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Funded by
The New Careers in Nursing Program



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

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A NEW KIND OF NURSE: IMPLEMENTING A VISION FOR A GENERALIST ENTRY MASTER'S (GEM) PROGRAM

Lisa Rosenberg, PhD, RN and Frank D. Hicks, PhD, RN
Rush University College of Nursing

BACKGROUND

The need to improve safety and quality at the point of care has been well documented in the literature (e.g., Institute of Medicine reports). The role of the CNL has been devised specifically for the nurse to be a leader at the point of care who can drive improved clinical outcomes because of their graduate education and experiences. To address this need, the faculty of Rush University College of Nursing made the bold move to eliminate baccalaureate education in lieu of a master's entry program that would produce not only a competent provider of nursing care, but also a leader at the point of care equipped with the necessary knowledge and abilities to improve care processes in the microsystem.

PURPOSE

The purpose of this poster is to articulate the vision that drove the development and implementation of a master's entry level Clinical Nurse Leader program and provide specific examples of how that vision was operationalized within the context of the curricular structure. The goal is to present relevant outcome data that demonstrates attainment of the curriculum's terminal objectives and the CNL competencies.

METHODS

It was important to first envision the nurse we wished to create before engaging in curriculum and course development. The terminal program objectives, as crafted by the faculty, arose from a synthesis of the literature pertaining to health care reform, future trends, the AACN's CNL white paper (2007), and conversations with leadership of our primary practice partner, Rush University Medical Center.

Though the curriculum followed traditional lines in terms of grouping and sequencing courses, particular attention was paid to ensuring the pedagogical approaches provided students with ample opportunities to:

- a) **Develop high-level analytical capabilities in patient care and systems;**
- b) **Develop and apply leadership abilities;**
- c) **Integrate professional role and values into practice; and**
- d) **Gain an ability to contextualize care based on culture, clinical setting, and inter-professional communication patterns.**

The faculty committed to having high expectations of these graduate learners, believing them capable of comprehending and integrating the "big picture" of delivering patient-centered care while concurrently learning dense scientific information.

An important adjunct to the GEM curriculum is the provision of opportunities for students to participate in interprofessional service learning experiences.

RESULTS

Since the program's inception, the following outcomes have been realized:

- NCLEX pass rate of 97%
- CNL pass rate of 92%
- QSEN competency attainment
- HESI scores, as assessed by the QSEN blue print, are above benchmark
- Surveys indicate employers are "very satisfied" with Rush graduates and rate them highly on clinical judgment, evaluating outcomes, advocating for patients, administering safe, competent and culturally sensitive care, and teaching patients and families.
- Comments on NCIN scholar reports:

"Looking back on the last trimester, my learning skills have grown exponentially. I learned to assess a patient holistically and focus on continuity of care. My thought process included questions like, 'What was the patient like before hospitalization? How has this hospitalization affected the patient? What will happen afterwards? What support system does this patient have?' . . . In addition, I became very involved in extracurricular activities this last trimester. I am currently still on the steering committee for both Buddies and RU Caring, where I am able to organize and be a part of health care fairs and scheduling. I also have collaborated with medical students in serving the community at Chinatown whether exercising with seniors or performing health screenings for Hepatitis B."
- Capstone projects that have made improvements in various microsystems:
 - ❑ An analysis of causal factors of falls on a cardiac and neurosurgical unit
 - ❑ Enhancing inter-professional communication by improving bedside procedure documentation in EPIC
 - ❑ Increasing interpreter services utilization: A "call" to action
- A majority of students participate in at least one community service learning opportunity
- Rush Oak Park Hospital, our CNL partner, has utilized our graduates to design, pilot, and implement a CNL clinical model. Another partner that employs a number of our graduates, the Rehabilitation Institute of Chicago, is also designing and implementing a CNL clinical model.

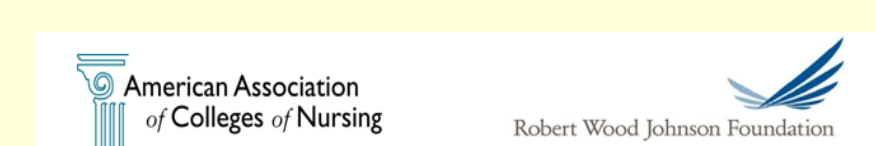
CONCLUSION

The GEM program has surpassed our expectations in preparing a new generation of nurses. Our students graduate with a strong foundation in clinical care and leadership.

Moving from a BSN to MSN pre-licensure curriculum requires a commitment from faculty to believe in the notion that education is informed by practice but must take the lead in developing and implementing innovation in the practice environment. Students will rise to the level of expectation we set as educators based on our collective vision of health care delivery now and in the future.



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Background

Nurses of color comprise a disproportionate number of nursing professionals compared to the U.S. population with African Americans and Hispanics representing 5.4% and 3.6% of nurses respectively. 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.

Data for five graduating cohorts at an Accelerated Baccalaureate School of Nursing (ABS/N) 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 for minority students in an accelerated nursing program.

Goals of this program are to increase retention and decrease attrition for minority nursing students, and to increase comfort and decrease anxiety in the nursing program with the primary objective to increase diversity in the nursing workforce.

Methods

The NALC program

- nine days, starting six weeks prior to the first day of the actual ABSN program

- NALC focuses on three broad domains.

- The first domain comprised the languages of nursing, such as medical terminology, anatomy and physiology reviews and medication math.
- The second domain consisted of activities designed to enhance student learning and included development of effective reading, note-taking and test-taking skills.
- The third domain focused on helping the students understand the unique culture of the profession of nursing and nursing education. Social activities (e.g., lunches with faculty, alumni and peers) and small group discussions intended to help develop professional relationships between student and faculty were included in the third domain.

- Kolcaba’s (2003) holistic comfort theory applied to the nursing education environment was utilized during the development and implementation of the NALC program. A comfortable and supportive education environment decreases fear and anxiety and students are further supported toward program success.

Results

- Scores on the Test of Essential Academic Skills (TEAS) were merged with enrollment data. Overall TEAS scores were used to control for academic skill.
- Post-program surveys administered at the completion of the program and again at the end of the first semester measured students’ satisfaction with the

NALC program and their levels of comfort with the ABSN program. NALC program participation and race/ethnicity were the two focal independent variables.

- Race/ethnicity was a categorical variable of whether or not the respondent reported non-Hispanic white, non-white, or unknown race.
- Risk ratios for attrition by NALC participation were calculated separately by race/ethnicity. A log-binomial regression was then used to adjust the risk ratio for pre-program TEAS scores. A squared term for TEAS was included in the regression model to account for the quadratic relationship of TEAS to program withdrawal.

Conclusion

- Results indicated that attrition was equal between NALC and non-NALC students, and between Caucasian and minority students. Given that TEAS scores were lower among NALC participants, an attrition rate equal to students with higher TEAS scores may indicate that the NALC program was successful in its goal of reducing attrition for minority nursing students.
- NALC students also reported a high level of comfort with the faculty and fellow students and a moderate level of comfort with the nursing program, and rated program content and quality as excellent.
- It is anticipated that the NALC program may help to increase diversity in the nursing profession.

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For More Information

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Minority and Caucasian Enrollment & Graduation in 2008

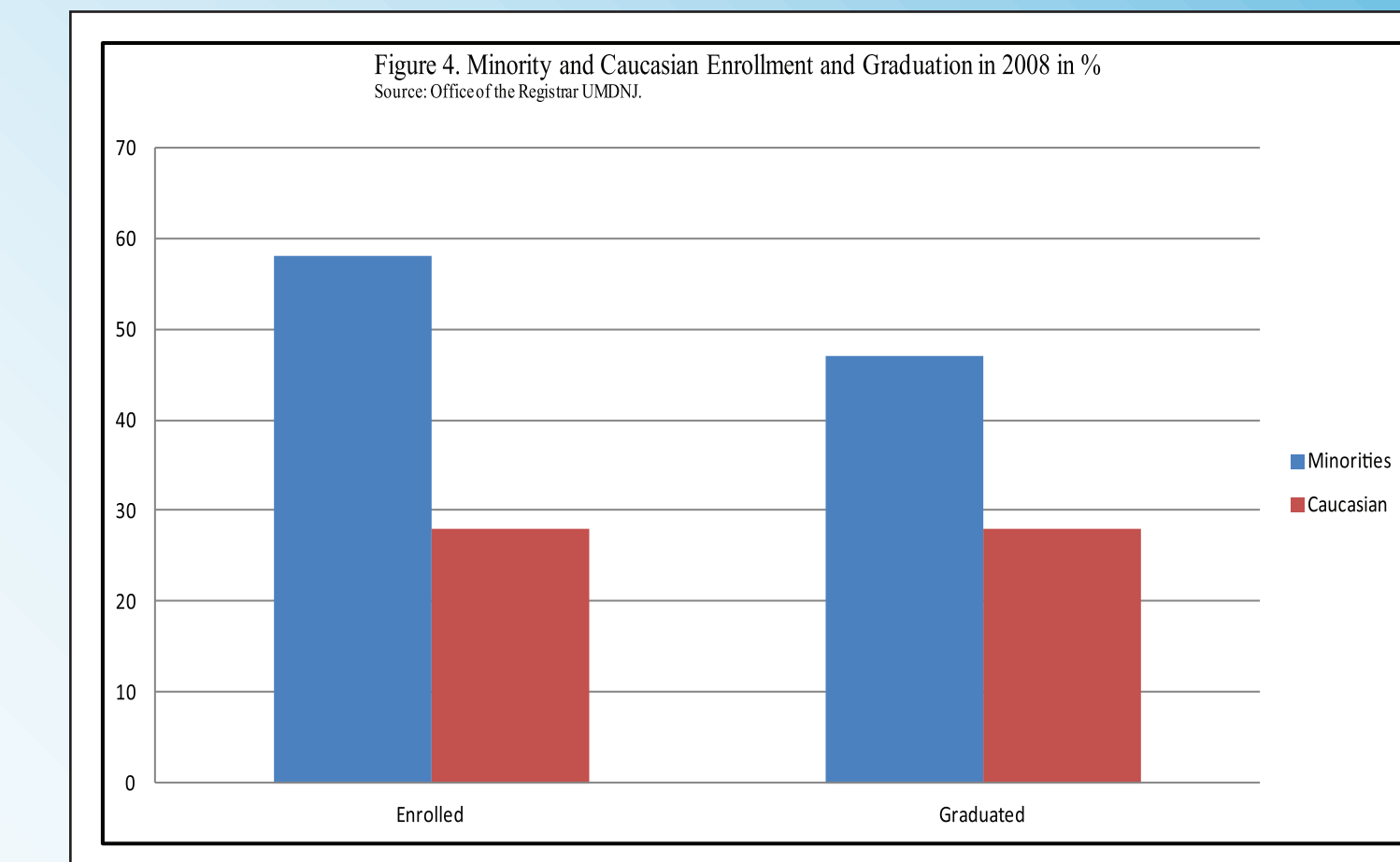


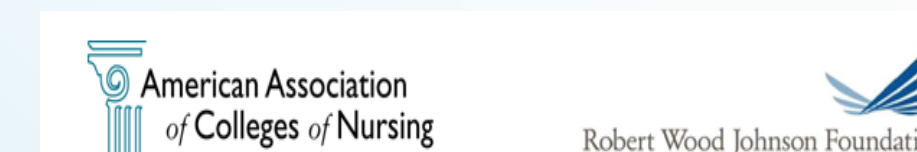
Table 1. Descriptive Statistics

*P<.05 t-test for equality of means by NALC participation

Characteristic	NALC (N=98)	Non-NALC (N=282)	Overall (N=380)
	%	%	%
Race			
White	33.7	35.1	34.7
Non-White	35.7	31.9	32.9
Unknown	30.6	33	32.4
	M (SD)	M (SD)	M (SD)
Overall TEAS Score*	75.4 (9.2)	77.8 (8.7)	77.2 (8.9)



Funded by
The New Careers in Nursing Program



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

SOLVING A SILO CHALLENGE: INTERPROFESSIONAL EDUCATION FOR ACCELERATED STUDENTS

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BACKGROUND

- ❖ Team-based work patterns are important for medical challenges and complex patient needs. (Institute of Medicine, 2001)
- ❖ Traditional education is uni-professional. Students, particularly accelerated, may be poorly prepared for a team based environment. Issues include lack of knowledge of roles, lack of teamwork skills, variable levels of respect. (Curran, Sharpe, Forristall, & Flynn, 2008))
- ❖ Students in an interprofessional education (IPE) paradigm learn teamwork and may improve patient outcomes. (Bridges & Tomkowiak, 2010)
- ❖ IPE is students from two or more health professions learning about, from and with each other to enable effective collaboration. (World Health Organization, 2010)
- ❖ Health professions' educational standards acknowledge the need for IPE, including nursing's Essential VI (American Association of Colleges of Nursing, 2008).

PURPOSE

1. Outline the design of IPE for accelerated BSN and MSN students at SLU.
2. Explore challenges and barriers to IPE in post-baccalaureate, prelicensure programs
3. Present study in progress about the Interprofessional Team Seminars.

IPE AT SAINT LOUIS UNIVERSITY

Undergraduate

In 2006, faculty and administration developed required courses for all undergraduate health professions students.

IPE 110 Introduction to Interprofessional Health Care

IPE 350 Health Care System and Health Promotion

IPE 420 Applied Decision-Making in Interprofessional Practice

IPE 490 Integrative Interprofessional Practicum Experience

Post-baccalaureate, Pre-licensure

- ❖ These students have unique learning needs. In 2009, we joined with the St. Louis College of Pharmacy to develop a required course.
- ❖ Series of six seminars in the academic year, using case-based patient discussions and standardized patients to develop interprofessional team communications and strategies to improve care outcomes and patient safety.
- ❖ Seminars for four academic years. Modified annually, from faculty & student input.
- ❖ Health professions include:

Social Work	Physical Therapy	Nursing
Medicine	Physician Assistant	Pharmacy
Occupational Therapy		

INTERPROFESSIONAL TEAM SEMINARS (IPTS)

Course objectives:

- ❖ Communicate professional role & responsibilities clearly to patients, families & other care professionals, explain the roles & responsibilities including how you will work as a team.
- ❖ Understand the relationship between effective team communication & improved patient safety/health outcomes. Choose effective communication tools & techniques to enhance team function.
- ❖ Demonstrate skills at effective interprofessional (IP) team & patient-centered communications integrating the knowledge & experience of the team, which includes patients.

Course logistics:

- ❖ 650 students in 2013-14. Both ABSN and AMSN students
- ❖ 45 small groups, each with at least 5 professions. Wednesdays 4:30 to 6 p.m. Three per semester.
- ❖ Group composition the same across seminars for cohesion, faculty facilitators may change.

DETAILS & PRELIMINARY RESULTS

This is a unique longitudinal (year long) seminar series embedded in curricula for post baccalaureate students.

Topics for 2013-14:

- Share length of professional training, scope of practice, professional role identification in cases
- Three cases with chart notes, team huddles, identify issues for shift report and hand-offs
- IP collaboration to support decision making with clinical vignettes about difficult patient/family discussions.
- Case studies using IP collaboration for rapid cycles of shared decision making.
- Adverse outcomes or consequences from team dysfunction using a systems focus on case study.
- Student critical reflections, compare & contrast views from different professions

Challenges: Facilities for large and small groups, scheduling, faculty availability, student volume

System barriers: Curricula, faculty engagement, standardized patients (actors)

Pre/post survey: Administered at start and end. Response rate 67% in 2012-13

Factors assessed: Attitudes about IP communication, IP learning, value of IPE in care of patients, respect across disciplines. Self ratings about communication style, comfort level in teamwork, confidence in profession.

Early survey results: Certain factors decreased from start to end of seminars, possibly indicating students are learning how much they have to learn.

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