Nurse Educator’s Role in Transforming Education Systems for the Future

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What is the role of nursing education in realizing a transformed health care system?

What is the role of the nurse educator?
Use forces of change in education and health care to guide the transformation of nursing education systems.

Consider the implications for the academic preparation and retooling required of nurse educators to prepare students for practice in shifting health care environments.
Forces of Change

- Health Care
- Higher Education
- Nursing Education
Background: Directions for Change

- IOM *Future of Nursing*
- AACN et al. *Core Competencies for Interprofessional Practice*
- Benner, *Educating Nurses* (Carnegie report)
- The Lancet, *Health Professionals for a New Century*
- NLN, Educator competencies; Vision statement, doctoral education
- AACN, NLN Curriculum Essentials
Changes in Healthcare

- Acute care → population-based care
- Local → global
- Culture of illness → health
- Individual → interprofessional practice
- Use of data → health information, management, and process improvement
Changes in Higher Education

- Cost effective programs
- Emphasis on completion
- Diversity of students
- IT-Empowered learning
- Use of learning analytics
- Portfolios for assessment
Changes in Nursing Education

- Diversity of students
- “Mobile learners”
- Statewide curriculum planning
- Curriculum shift to community-based care
- Increased access to programs; seamless progression
Changes in Nursing Education: Student Diversity

- Experience
- Learning styles
- Culture
- Age/generation
Changes in Nursing Education: “M-learners” and IT-Empowered Learning

- Want access, convenience
- Learn “just in time”
- Flipped classrooms
- Hand held/internet accessible
- Health information technology: Patient-centered “apps” and “stay in place technologies”
Changes in Nursing Education: Responding to Forces of Change ~ The Curriculum

- Patient-centered care
- Patient safety
- Population/Community-based care
- Care of older adults
- IPE, team-based care
- Statewide curricula; consortia
Transforming Nursing Education
Transforming Nursing Education

- Building Faculty Capacity
- Ensuring Diversity
- Promoting Academic Progression
- Assuring Smooth Transitions
- Redesigning the Curriculum
- Developing New Models of Clinical Education
- Designing Academic/Practice Models of Collaboration
Building Faculty Capacity

It is not just about the numbers!
Building faculty capacity will take...

- Attracting nurses to a career in academia
- Facilitating academic progression
- Preparing novice educators for the role
- Retooling current faculty
- Increasing faculty diversity
- Planning leadership succession
Faculty Workforce Issues

- Aging faculty
- Compensation and workload
- Length of time to graduate degree
- Insufficient pipeline
- Lack of diversity
Ensuring diversity in nursing education will take... 

- Nurturing the pipeline 
- Fostering academic progression 
- Role models and mentors in practice and education 
- Leadership development
Building a Diverse Faculty

- Key to building student diversity
- Under-representation of males, racial and ethnic minorities; rural/urban environments
- Nursing lags behind other academic disciplines
- Impacts development of cultural competence among our students
Addressing the Future of Nursing recommendations
- Increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020.
- Double the number of nurses with a doctorate by 2020.
- Ensure that nurses engage in lifelong learning.

Providing transitions to higher degrees

Creating partnerships
Embrace diversity through multiple points of entry

Endorse academic progression options for all nurses - LPN/LVN → Doctorate

Include diverse pathways for advanced nursing practice

Develop seamless curricular models
Responding to statewide education: national competency models

- Oregon Consortium for Nursing Education
- Massachusetts Nurse of the Future Nursing Core Competencies
Assuring Smooth Transitions

Education-Practice-Education Cycle
Residency models: Improving transition to practice

- Why residency programs?
  - Newly licensed RNs unprepared for complexity and acuity; limited experience, lack of confidence
  - Residency as recruitment strategy
  - Improved transition to practice results in retention; decreased costs; improved nurse confidence and satisfaction; quality care
Designing/redesigning Academic Programs
Developing New Models of Clinical Education

- Clinical models focused on...
  - Patient-centered approach spanning the continuum of care
  - Managing transitions among settings
  - Interprofessional education/collaborative practice
  - Seamless learning environments
  - Leadership development
Partnering for the future to...

- Assure that graduates are prepared to practice in current and future practice environments
- Leverage resources
- Evaluate emerging clinical education models

Designing Academic/Practice Models of Collaboration
Preparation for Nursing Educator Roles

FOUNDATIONAL NE COMPETENCIES

DOCTORAL LEVEL NE COMPETENCIES

CONTINUOUS IMPROVEMENT AS A NE
Foundational Educator Competencies

- NLN Educator competencies

  Facilitate learning
  Facilitate learner development
  Use assessment/evaluation strategies
  Participate in curriculum design and evaluation
  Pursue CQI
  Engage in scholarship, service, leadership
### Doctoral Level Educator Competencies
(NLN: Double number of doctorally prepared nurse educators)

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<th>Research-focused competencies</th>
<th>Practice-focused competencies</th>
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<td>➢ Advance the science</td>
<td>➢ <strong>Facilitate learning</strong>: Link outcomes to practice; manage global connections; create learning environments to support diversity; integrate IT-empowered learning systems</td>
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<td>➢ Develop new knowledge</td>
<td>➢ <strong>Evaluate</strong>: outcomes of practice innovations; cost effectiveness of programs</td>
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<td>➢ Generate external evidence</td>
<td>➢ <strong>Curriculum design</strong>: academic and health care systems; lead change</td>
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<td>➢ Steward the profession</td>
<td>➢ <strong>CQI</strong>: Develop an integrated NE role; mentor others; advance career</td>
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<td>➢ <strong>Scholarship, service, leadership</strong>: translate/disseminate EBP—generate internal evidence; lead systems</td>
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Continuous Quality Improvement: Faculty Development and Mentoring

- Seek highest degree; pursue lifelong learning
- Foster reflective teaching
- Educator competencies develop over time
- Have a mentor, be a mentor
Faculty development opportunities

- STTI-Chamberlain Center for Excellence in Nursing Education
- NLN
- AACN
- Continuing education/professional development offices at Schools of Nursing
Disruptive Leaders Needed!
Leading Nursing into the Future: Are You Ready?

Future of Nursing: Leading Change, Advancing Health (IOM, 2011)
Key Messages

- Nurses should practice to the full extent of their education
- Nurses should achieve higher levels of education through seamless academic progression
- **Nurses should be full partners in redesigning health care in the U.S.**
- Effective workforce planning requires improved data collection and information infrastructures

IOM, 2011
Achieving a transformed health care system will require strong nursing leadership....
Will we heed the call as a profession?
Will Nursing Hear the Call to Lead?

- Nursing students
- Frontline nurses
- Community nurses
- Chief nursing officers
- Nurse educators
- Nursing organizations
What will this new leadership require?

- Focusing on evidence-based improvements to care
- Translating research into practice
- Ensuring nursing education is reflective of changes in practice
- Serving as patient advocates
- Shaping health policy proactively

IOM, 2011
Nursing Leadership Competencies of the Future: The Foundation

- Knowledge of the changing health care delivery system
- Ability to effectively work in teams
- Skill in inter/intra-professional collaboration
- Understanding of the principles of ethical care
- Theories of innovation
- Concepts of quality and safety improvement

IOM, 2011
“The Call for Nurses to Lead”

Demonstrating intentionality in developing nursing leaders is an Imperative !!!
Convey and nurture the expectation with your students that they are leaders!

Integrate leadership competencies throughout the curricula of all programs
  - Why do we teach leadership LAST?

Design interprofessional education opportunities

Seek opportunities to develop skills in patient advocacy and health policy

Collaborate with practice partners to ensure that curriculum reflects contemporary practice
Integrate leadership competencies throughout the curricula

Re-examine your curriculum - are you teaching Management or Leadership?

Develop mentoring opportunities through internships, residencies

Create learning experiences that focus on health policy, patient advocacy, interprofessional collaboration
“If your actions inspire others to dream more, learn more, do more and become more, you are a leader.”

John Quincy Adams
Nurse educators function as change agents and leaders to create a preferred future for nursing education and nursing practice.

NLN, 2005
Models cultural sensitivity when advocating for change

Integrates a long-term, innovative, and creative perspective into the nurse educator role

Participates in interdisciplinary efforts to address health care and educational needs locally, regionally, nationally, or internationally

Evaluates organizational effectiveness in nursing education (NLN, 2005)
Change Agent/Leader Competencies

- Implements strategies for organizational change
- Provides leadership in the parent institution as well as in the nursing program to enhance the visibility of nursing and its contributions to the academic community
- Promotes innovative practices in educational environments
- Develops leadership skills to shape and implement change  (NLN, 2005)
Becoming a Nurse Faculty Leader

- NLN/Johnson and Johnson Faculty Leadership Development Program (First Cohort – 2007)
- Qualitative study to explore the lived experience of becoming a nurse faculty leader
- Interpretive phenomenological approach
- 24 nurse faculty leaders interviewed
- Asked to describe their experiences of becoming a nurse faculty leader
What is it like to become an academic leader? How does one become a leader?

Three primary themes emerged:

- Being Thrust into Leadership
- Taking Risks
- Facing Challenges

Young, Pearsall, Stiles and Horton-Deutsch, 2011
Strategies to Develop Future Nurse Leaders – Novice Educators

- Preparation for the educator role
- Support for transition from practice to academia
- Formal mentoring programs
- Encouragement to pursue leadership opportunities
- Create an inclusive, supportive environment, one that values risk-taking
Formal leadership development opportunities
Mentors to guide leadership skill development
Encourage reflection on a “call to lead”
Conflict resolution training
Cultivate strategic risk-taking
Create an environment that challenges the status quo
Leadership succession planning
LEAD Program for Emerging Leaders in Nursing Education

Leadership Development Program for Simulation Educators

Advancing Care Excellence for Seniors (ACES)

Nurse Faculty Leadership Academy (NFLA)

Geriatric Nursing Leadership Academy (GNLA)

Maternal-Child Health Leadership Academy (MCH-NLA)

Experienced Nurse Faculty Leadership Academy (ENFLA)

Emerging Educational Administrator Program for Department chairs/Program Directors

Leadership for Academic Leaders

Nurse Faculty Scholars
BE ready for a Challenge
BE Prepared to see the positive
Will nurses heed the call to lead?

The future is in our hands...and it is up to us to say YES!!!