Academic-Practice Partnerships and Dedicated Educational Units: The Past, Present, and Future of Clinical Nursing Education

Academic Practice Partnerships: Mutual Benefits of a Dedicated Educational Unit
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Dedicated Educational Nursing Units: Clinical Instructors Role Perceptions and Learning Needs
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A Comparison of the Staff Nurses Perceptions of the Effectiveness of a Preceptor Experience on a DEU versus a Traditional Clinical Preceptorship for Senior Nursing Students
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Disclosure Statement

• Neither the planner(s) or presenter(s) indicated any real or perceived vested interest that relate to this presentation.
• The contents do not represent the views of the U.S. Department of Veterans Affairs or the United States Government.
Academic Practice Partnerships: Mutual Benefits of a Dedicated Educational Unit

• Learner Objectives
  • At the end of this presentation, the learner will be able to
    • Identify the mission and goals for academic practice partnerships
    • Discuss the benefits of academic practice partnerships
    • Discuss the implementation of Dedicated Educational Nursing Units
    • Evaluate the outcomes of Dedicated Educational Nursing Units
IOM: Future of Nursing 2010

• Nurses should practice to the full extent of their education and training.

• Nurses should achieve higher levels of education and training through an improved educational system that promotes seamless academic progression.

• Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.

• Effective workforce planning and policy making requires better data collection and information infrastructure.
AACN-AONE Academic-Practice Partnership Steering Committee (2012)

- Collaborative relationships between academia and practice are established and sustained
- Mutual respect and trust are the cornerstones of the practice/academia relationship
- Knowledge is shared among partners
- A commitment is shared by partners to maximize the potential of each registered nurse to reach the highest level within his/her individual scope of practice
- A commitment is shared by partners to work together to determine an evidence based transition program for students and new graduates
- A commitment is shared by partners to develop, implement, and evaluate organizational processes and structures that support and recognize academic or educational achievements
- A commitment is shared by partners to support opportunities for nurses to lead and develop collaborative models that redesign practice environments
Northeast Region VA Nursing Alliance

- NERVANA
- Formed in 2007
- Academic Partnership between the Boston/Bedford VA Healthcare System and 6 Schools of Nursing
  - Boston College
  - Northeastern University
  - Regis College
  - Simmons College
  - University of Massachusetts Boston
  - University of Massachusetts Lowell
Development of NERVANA

- 2007: VA Nursing Academy (VANA)
- Office of Academic Affiliates called for applications to the funded program
- NERVANA applied on 2 separate cycles: Denied
- Feedback
  - Model with 1 practice partner and 6 schools of nursing...too complex
  - Not sustainable
NERVANA GOALS

• Maintain and refine the infrastructure for sustaining the mission, and supportive activities of NERVANA
• Increase the number of VA staff nurses to serve in the role of faculty to teach in nursing programs and NERVANA
• Create novel clinical rotations including interprofessional Dedicated Educational Units (DEU) for BSN programs, APN rotations for MSN and DNP students
• Establish a culture for evidence based practice/research opportunities for students and staff interested in the care of Veterans within the academic/practice partnerships
• Educate students, faculty and the community regarding the uniqueness of the health needs of the Veteran population
• Expand programs at partnering schools to address healthcare issues related to the Veteran (Care of the American Veteran Colloquia series)
• Translate knowledge to develop best practices for Veterans in all healthcare settings.
NERVANA Initiatives

- Appointments of NERVANA VA Program Director and affiliate Nurse Scientist positions
- Continue creation and expansion of novel clinical rotations
- VA nursing personnel serving as clinical adjunct NERVANA faculty
- VA clinical nurses serving in the role of preceptors and DEU clinical instructors
- Increased nursing EBP and research initiatives
- CCNE accreditation of the VA Nurse Residency program
- NP Mental Health Nurse Residency Program
- Creation of innovative curricular activities addressing the unique needs of Veterans
- Invitations to VA staff to sit on Advisory Boards at the partnering schools
- Invitations to VA staff/faculty to lecture at partnering schools
- Increased journal publications related to a variety of nursing and patient care issues.
Awards: AACN/AONE Exemplary Academic Practice Partnership 2014 Network Directors ICARE Award
Dedicated Nursing Educational Units

• New Model of Nursing Education
• Staff Nurses assume the role of clinical educators
• 2:1 ratio
• Academic Partners provide support for the clinical staff nurses
  • Patient assignments
  • Critical thinking
  • Post conference activities
  • Evaluation Process
Dedicated Educational Units

• NERVANA
  • A total of 5 DEU currently at the Boston/Bedford VA Boston Healthcare System
  • Medical/Surgical Units
  • Long Term Care Units
  • Senior Capstone DEU
  • Senior Capstone Spinal Cord Injury Unit DEU
Keys to Successful Implementation

**Academic Partner**
- Careful selection of Faculty liaison
- Provide orientation of the clinical objectives
- Provide the course syllabus
- Be present on the units
- Provide teaching feedback
- Provide guidance in evaluations

**Practice Partner**
- Management commits to the necessary staffing for success
- Staff Nurses (CI) are supported and recognized for their work
- Staff Nurses develop competencies based on the patient population
Outcomes of a Successful Partnership

Academic Partner
- Student Success
- Increased number of staff nurses able to assume clinical faculty teaching positions
- Improved relations with practice partners

Practice Partner
- Potential New Graduate Candidates for staff nurse positions
- Development of CI in the role of nursing education
- Improved morale and educational culture on the units
VA Boston DEUs
Dedicated Educational Units: Clinical Instructors, Role Perceptions and Learning Needs

Purpose of this Qualitative Study

• To identify the role perceptions of staff nurse’s participating as clinical instructors on a Dedicated Educational Unit (DEU)
• To identify the perceived educational learning needs of experienced staff nurses participating in the role of the Clinical Instructors on a DEU

Background

• The outcomes of the DEU model supports an improved clinical educational outcome for the student nurse

• Little research has been completed to evaluate the role perceptions of the Clinical Instructors (CI) and the perceived learning needs of the expert staff nurses serving in this role.

• The goals of academic practice partnerships and a DEU must be mutual (Beal et al., 2011),

• Need to evaluate the expert nurses learning needs related to the role of CI is important to prepare future clinical and academic instructors.
Methods

• Qualitative Study
• VA Boston Healthcare System
• 14 staff Nurses who served in the role of CI participated in the interview process
• Participants represented two of the colleges of nursing DEU projects
• 8 of the 14 staff nurses agreed to participate in study
• Audio taped-transcribed verbatim
• Content analysis for common themes to code and synthesize from the interviews
Interview Questions

Participants were asked to:
• Describe the CI’s perceptions of the role
• Preparation for the role
• Perceived support from the academic affiliate
• Identification of additional learning/support to enhance the role of the CI
• Willingness to participate in the DEU in the future
Results

Three theme emerged regarding the perceptions of the role of Clinical Instructor

- Mentoring
- Ensuring Competency with Basic Skills and Tasks
- Begin the Critical Thinking Component of Nursing Education
Mentoring

“I did not feel supported during my clinical rotations as a nursing student. Now I always think that I am working with my students and I feel that I am suppose to be there as their mentor and ensure the best experience.”
Ensuring Competency with Basic Skills and Tasks

“My role was to investigate what knowledge the student had to begin with and build up from there. Any weakness that might be missing and improve their nursing skills. From obtaining blood pressure to assessment to any more involved skill like changing a foley to wound care”
Begin the Critical Thinking Component of Nursing Education

“Nursing involves more critical thinking and my role of clinical instructor allows me to work with the students to put those puzzle pieces together and develop crucial thinking skills. I work with the student to advance their assessment skills and apply their classroom knowledge to the patient situation.”
Results

Perceived Learning needs of the staff functioning in the CI role

- Clear Objectives from the Academic Affiliate
- Acknowledgement by the Academic Affiliate of the CI role
Clear Objectives from the Academic Affiliate

“I feel that if you don’t have clear objectives as to what needs to be obtained in a certain timeframe, we cannot truly assess student clinical learning. Benchmarks are important. With time to remediate. To be consistent, the clinical instructors on our unit developed goals for our students on a weekly basis.”
Acknowledgement by the Academic Affiliate of the CI Role

“I would love to receive timely feedback from the previous semester and therefore could grow from that feedback”

Several nurses discussed the desire to receive an adjunct faculty appointment for their participation.
Results

One more theme emerged related to support from both the academic and practice nursing leadership

• Learning needs related to student's with diverse learning needs and accommodation
Learning needs related to student's with diverse learning needs and accommodation

“I asked the girl to write a SOAP note and it was scattered and I was confused. She could never get her focus to write a clear note. She stated that she had a learning accommodation, but I did not have the background to work with her.”
Discussions

DEU represents an important collaboration between academic and practice partnerships. This study:

• Identified the role perceptions of the staff nurses functioning in the role of CI....the role of mentor, educator and advisor were apparent.

• Reported the need to strengthen orientation and communication with academic affiliate to merge theory, practice and acknowledgement of contribution.

• Requested education when dealing with students with learning accommodations
Discussions

• Practice Partners need to ensure commitment to provide the necessary staffing to support the role of the CI is consistent
• Staff nurses are faced with increased patient acuity, shortened length of stay and increased demands to provide quality patient care
• VA employs Staffing Methodology-(student mentoring, DEUs, preceptorships) – need to be accounted
• Key stakeholders Involvement and commitment-Nursing Leadership and unit management
Conclusions

• Current practices of CI and preceptor preparation must continue to be examined

• Healthcare systems are constantly changing

• Academic faculty, clinical faculty, clinical staff leadership, clinical staff faculty, clinical staff and students must engage in interactive teaching, sharing and communication

• Academic Practice Partnerships must demonstrate a commitment to provide the infrastructure necessary to support nursing students and staff nurses serving in the CI role.
Conclusions

Clinical Role continues to expand

• Research evaluating the development of clinical judgment and reasoning in nursing students within the DEU model
• Expanding the DEU model to Senior Capstone experiences
• Career growth and movement to the proficient level of performance (Benner)
A Comparison of the Staff Nurses Perceptions of the Effectiveness of a Preceptor Experience on a DEU versus a Traditional Clinical Preceptorship for Senior Nursing Students

• Learner Objectives
  • At the end of this presentation, the learner will be able to
    • Identify the benefits and challenges of the traditional preceptorship model
    • Discuss the implementation of the DEU model for Senior Preceptorships
    • Evaluate the clinical nurses’ perceptions of the clinical teaching experience in a Senior Capstone DEU model as compared to traditional one-to-one preceptor experience.
    • Evaluate the clinical nurses’ perceptions of senior nursing students’ readiness for transition to practice as compared to traditional one-to-one preceptor experience.

Background

• Traditional senior BSN students placed with an experienced nurse for a one-to-one precepted clinical rotation
• Ongoing successful implementation of dedicated educational nursing clinical units (DEU) for sophomore and junior students
• Challenges identified with the traditional senior preceptorship approach
• Academic practice partners agree to combine the approaches and pilot a Senior Preceptorship DEU on an acute medical unit
Methods

• Descriptive pilot study
• 13 nursing students from academic partner assigned to the Senior DEU unit
• Clinical Instructors (CI) recruited based on interest and established inclusion criteria
• Clinical Instructors assigned to 1 or 2 nursing students
• 27 senior nursing students assigned to the traditional 1:1 preceptorship group
Methods

- CI Orientation
  - Role
  - Clinical educational objectives
  - PowerPoint® presentation highlighting the history of the DEU, potential advantages for both students and staff, and a comparison of the traditional vs. DEU model

- Survey Tool
  - Staff nurses serving as CIs and traditional preceptors were asked to complete a Qualtrics® Survey tool
  - 21 Questions (7 dedicated to demographics)
Methods

• Survey Tool questions assessed satisfaction with:
  • Clinical role expectations
  • Academic partner support
  • Available learning opportunities for students
  • Learning atmosphere on the clinical unit
  • Integration of students on the clinical unit
  • Development of critical thinking and clinical reasoning skills
  • Available resources as necessary
  • Preparation of students for professional practice
  • Influence of the experience on professional practice
Results

• 23 clinical nurses participated
  • 11 from the traditional preceptorship cohort
  • 12 from the Senior DEU cohort

• 65% of respondents had greater than 10 years of RN experience

• Majority of respondents have precepted nursing students in the past, while 30% responded that this was their first experience
Results

• Academic partner support
  • 92% of staff in the DEU cohort felt supported
  • 73% of staff in the traditional preceptorship cohort felt supported

• Influence of the experience on professional practice
  • 90% of staff in the DEU cohort felt the experience strengthened their professional practice
  • 82% of staff in the traditional preceptorship cohort felt the experience strengthened their professional practice
Results

• Integration into the workflow of the unit
  • 100% of both cohorts agreed that students were integrated into the workflow of the unit

• Development of critical thinking and clinical reasoning skills
  • 100% of both cohorts agreed that students were encouraged to develop critical thinking and clinical reasoning skills

• Prepared for professional practice
  • 83% of staff in the DEU cohort felt the students were prepared for professional practice
  • 91% of staff in the traditional preceptorship cohort felt the students were prepared for professional practice
Limitations

• Study was conducted on one unit with nurses who were familiar with the DEU model
• Small sample size
• Survey tool not evaluated for validity
Discussion

• Results suggest that there is no perceived difference in clinical nurses’ perceptions when comparing the DEU experience to a one-to-one preceptorship model.

• However:
  • Nursing leadership on the Senior DEU unit reports:
    • New found sense of “teamwork and education”
    • Pre implementation: Preceptorship = burden or a task
    • Post implementation: Preceptorship = professional development opportunity
    • Increased interest from staff to precept
    • Recruitment opportunities
Questions