

Linking Centralized and Decentralized Nursing Education

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Development of CETL Role

A large hospital system in Central Ohio with over 22,000 associates adopted an innovative approach to link the system centralized education department and decentralized unit based clinical educator role.

The goals of this approach were to: develop a standardized approach and process to professional development and training across the system; create and promulgate effective training and development to advance the mission and strategy of the organization; and continue to share knowledge and best practices across the organization.

This led to the role of Clinical Education Team Lead.

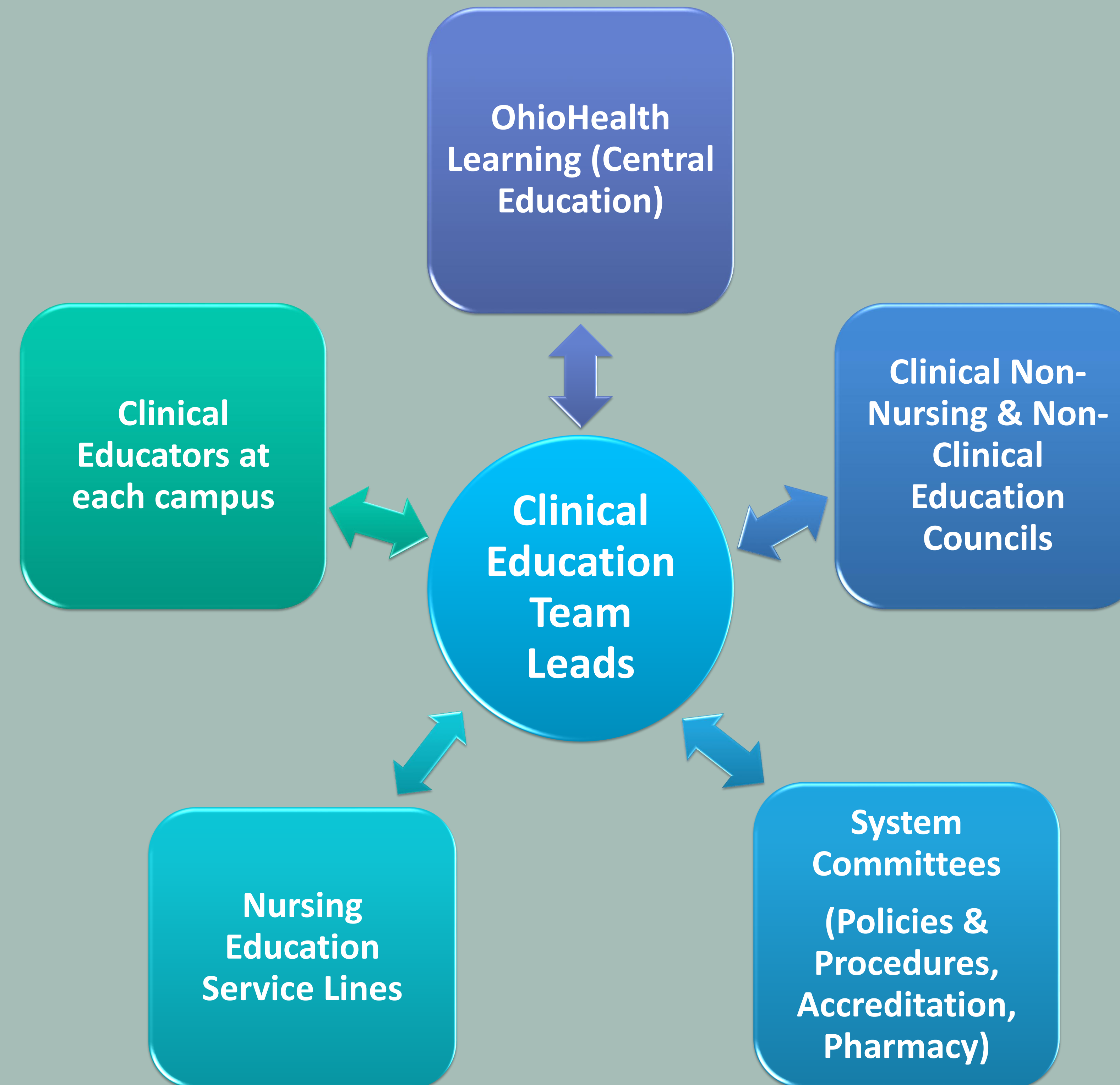
What is a Clinical Education Team Lead (CETL)?

- The Clinical Education Team Lead supports the hospital as an educational support liaison, including strategic planning based on educational needs.
- Ensures standardization of education including but not limited to orientation and annual competency assessment. Assists in the design of education based on educational standards, evidenced based practice and system policy.
- This position serves as the liaison between the centralized system education department and decentralized educators at the campus level, campus leadership and other system non-nursing groups.

Work Division for CETLs

- The hospitals in the system were divided into three groups according to location. Each CETL works as a mentor with the group of educators at the campuses they are responsible for.
- Reporting at their campus levels, the three CETLs worked to establish a mentoring system for the clinical educators and service line liaisons (SLLs) which ensures alignment and consistency among educators.
- The SLLs lead service line groups with representation from each hospital. The service lines comprise of Behavioral Health, Critical Care, Emergency Department, Medical/Surgical, Oncology, Peri-Operative, and Women's Health.

Clinical Education Team Lead as Liaison



Outcomes from Development of CETL Role

Standardization

Information and resources shared amongst service lines are standardized.
Associates at all ten campuses receive consistent messaging.

Core content for Skills days agreed upon per service line.
Associates can attend at other campuses if needed.

Decreased Duplication

Hospital courses taught at individual campuses were combined into system wide courses

Educational materials for new products/policies etc. developed by one group and shared throughout the system.

Shared Resources

Materials are shared within service lines via shared drives.
Resources are also shared amongst educators at SLL meetings. Time is not wasted on re-work.

Educators share responsibility of teaching system classes which decreases individual time commitment.

Improved Communication

Point person available for campus and service line

A communication pathway has been developed to connect all areas across the system.

Quicker turn around time on projects due to more efficient communication system in place

Successes

- Neuro educators developed Primary Stroke Certification tool kit and have shared with other campuses.
- Peri-op and Women's health service lines created onboarding for associates utilizing experiential learning which is attended by all campuses and taught in a central location.
- All hospitals able to send associates to Oncology and Critical Care Development Classes taught in a central location.
- Pharmacy Nursing Symposium last fall. Featured lectures by pharmacy-nursing teams to address common topics to both disciplines.
- Oncology group worked together to support six of the hospitals within the system gain MD Anderson certification.

Challenges

- Differing education structures at individual campuses
- Travel
- Various mental models
- Differing equipment
- Differing EMRs at newer member hospitals
- Communication and understanding of the new CETL role
- Early involvement of the CETL in projects that affect nursing

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