

Nursing Faculty Development: Implementation of QSEN Competencies for Clinical Faculty Development

Presented by
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Results and Evaluations from RNFD Participants

Pre and Post-Test Scores

Name of the survey or questionnaire	Pre-test mean score (S.D.)	Post-test mean score (S.D.)	Z	p
	18 (S.D. 2.6)	21 (S.D. 3.0)	11.10	<0.000

Demographics

N=312		Nursing Education Experience	
Age	M (SD) Range n %	6-2 years	87 28%
Gender		3-5 years	67 22%
Female	298 97%	6-10 years	64 21%
Male	8 3%	10+ years	87 29%
Race		Clinical Faculty	
White	272 87%	Yes	229 73%
Black	13 4%	No	77 27%
Other	27 9%	Program Type	
Employment Status		Undergraduate (AD/BSN)	203 65%
Full Time	123 39%	LPN	104 34%
Part Time	28 9%	Graduate (MS)	5 1%
Adjunct	161 52%		
Education			
BSN	80 26%		
MS	198 64%		
PhD	10 4%		
DNP	8 2%		
Other	11 4%		

Background and Significance

The growing demands on nursing education are expedient, with almost 70,000 applicants being denied admission to nursing programs yearly (2014). The nursing faculty shortage was cited as the primary reason for decreased nursing student enrollment (AACN, 2014). The AACN discussed vacancies (2014) and revealed over 1200 vacancies in 714 schools across the country. To address the faculty need, many intuitions have hired increased full and part-time faculty to meet the growing needs in nursing education. (Barger, 2004; Hutchinson, Tate, Torbeck, & Smith, 2011). Most novice part-time clinical educators are experienced clinicians but are not prepared for the academic culture or skills needed to effectively teach (Anderson, 2009; Eta, et al, 2011; Hewitt & Lewallen, 2010). Therefore, a competency-based orientation program would be crucial for providing knowledge and skills training to faculty who transition from novice educators to expert faculty (Gazza & Shellenbarger, 2005).

Purpose & Aim

The purpose of the Clinical Faculty Development Program is to support nursing faculty who work full-time, part-time or as adjunct faculty to gain competency as they transition to an educator role. The aim is to provide faculty with key information about the academic role and develop teaching strategies to utilize while at clinical.

This competency-based orientation utilizes a triad of competencies including QSEN, Nursing of the Future, and NLN nurse educator competencies.

Summary

The program has been disseminated to faculty in three different phases. Phase 1 as an on-line continuing education program (CEU) (N=63) using pre and posttest evaluation. Phase 2 supported by the Mass Action Coalition offering a four-hour continuing education workshop to faculty in 7 nursing programs in Massachusetts (N=120). CEU Program evaluation was used to evaluate the effectiveness of the workshop. With continued support by Mass Action Coalition, phase 3 offered a live four-hour workshop held in five regional locations in the northeast (N=357). Pre and Posttest evaluations were used; CEU program evaluation, and follow-up interviews were used to evaluate the effectiveness of the program.

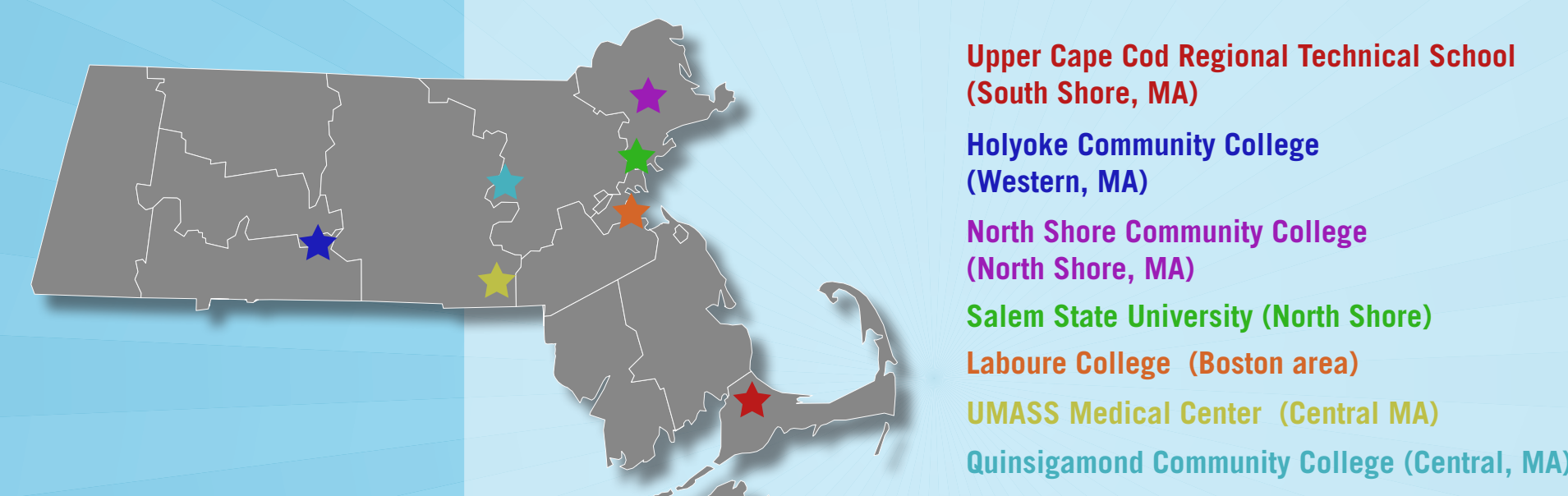
Methods

The competency-based orientation program has been disseminated to faculty in three different phases.

Phase 1 included an on-line continuing education program (CEU) (N=63) using pre and post-test evaluation.

Phase 2 (supported by the Mass Action Coalition) involved a four-hour live continuing education workshop for faculty in 3 nursing programs in Massachusetts (N=120) with CEU Program evaluation.

Phase 3 (supported by the Mass Action Coalition) involved a live four-hour workshop held in 5 regional locations in the northeast (N=357). For Phase 3, follow-up interviews were used to evaluate program effectiveness.



A 4-Hour Competency Based Workshop

The goal was to provide information and strategies to foster a successful role transition for clinical educators.

Seven topics were presented and include:

- Clinical Competency
- Clinical Feedback
- Clinical Evaluation
- Medication Safety
- Critical Thinking
- Curriculum Design
- Reflection of Novice Faculty

Follow-up Interviews



Themes

"Competency based clinical faculty orientation"

"Novice and Seasoned Faculty need support, orientation, and continuing education opportunities for their clinical development"

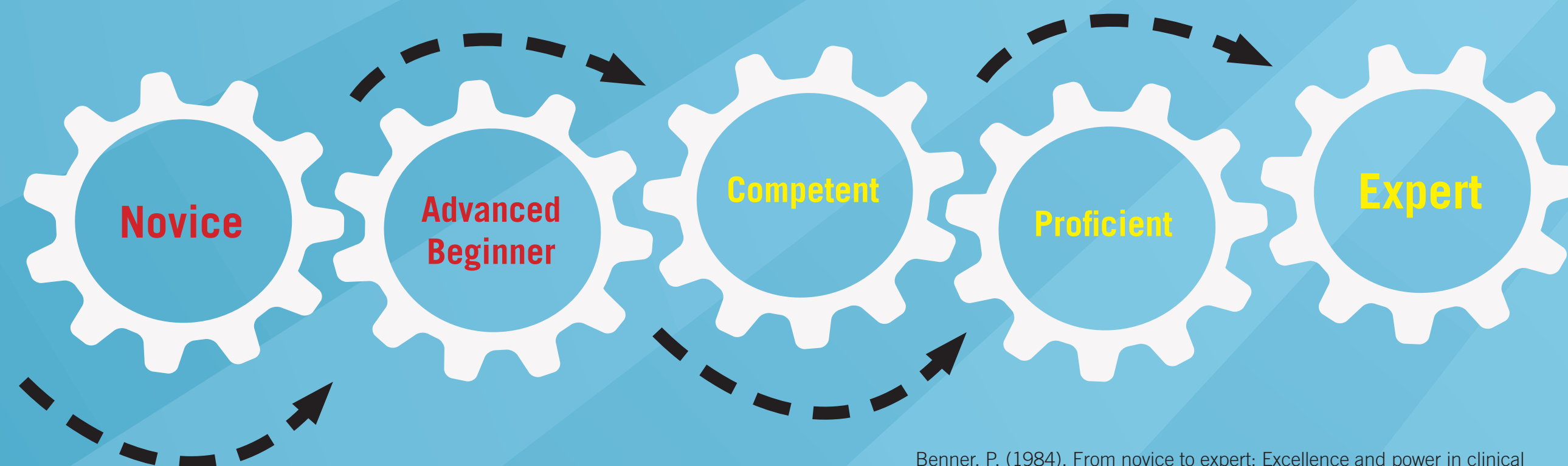
"A peer collaboration across all nursing programs in the nursing education community"

"Novice nursing faculty mentorship for novice faculty"

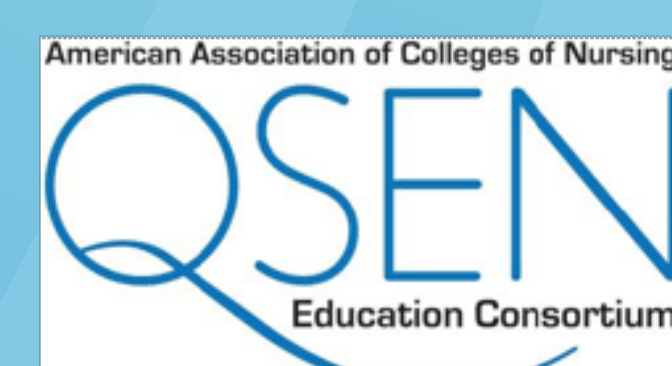
"Seasoned nursing faculty compensation for mentoring novice faculty"

Theoretical Framework

Benner's From Novice to Expert in Clinical Nursing Practice

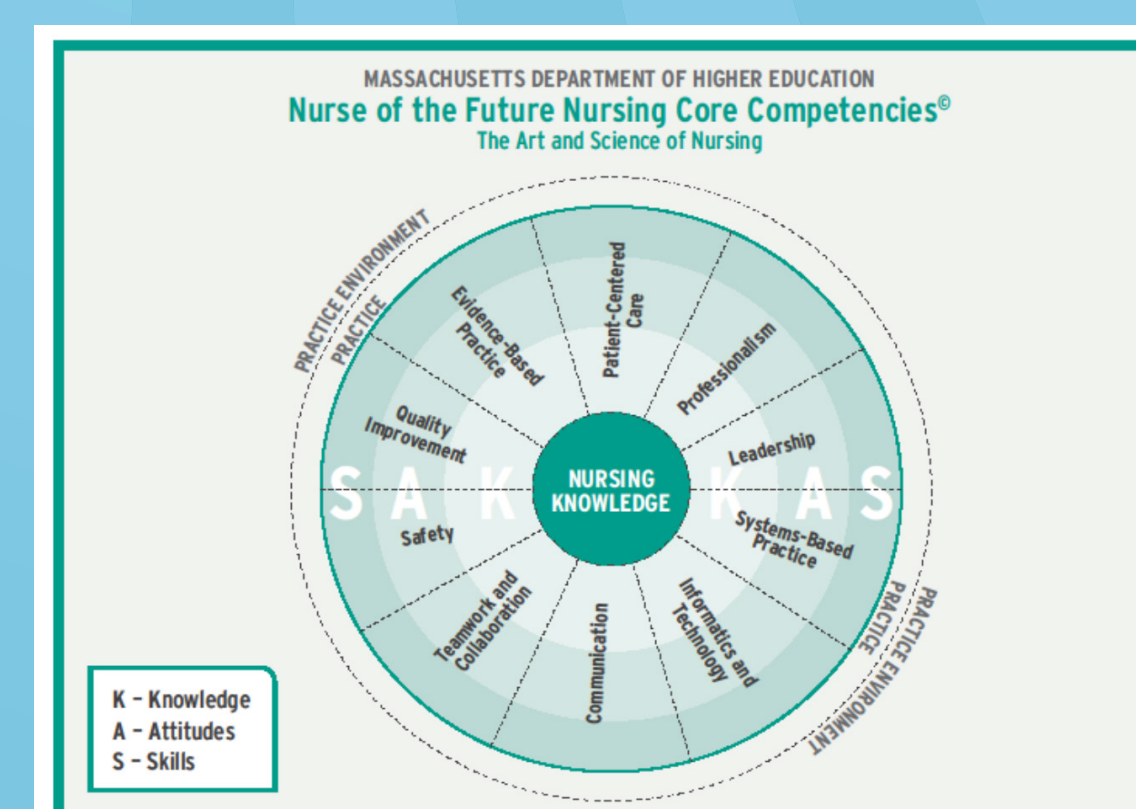


Benner, P. (1984). From novice to expert: Excellence and power in clinical practice. Menlo Park, CA.



The Quality and Safety Education for Nurse Education Consortium (QSEN) is a national initiative of the American Association of Colleges of Nursing (AACN) to enhance quality and safety content throughout nursing courses in entry-level nursing programs. This project is generously funded by The Robert Wood Johnson Foundation.

- Competencies
- Patient/Family Centered Care
- Teamwork and Collaboration
- Safety
- Evidence-Based Practice
- Quality Improvement
- Informatics



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National League for Nursing Nurse Educator Competencies

- Competency 1 – Facilitate Learning
- Competency 2 – Facilitate Learner Development and Socialization
- Competency 3 – Use Assessment and Evaluation Strategies
- Competency 4 – Participate in Curriculum Design and Evaluation of Program Outcomes
- Competency 5 – Function as a Change Agent and Leader
- Competency 6 – Pursue Continuous Quality Improvement in the Nurse Educator Role
- Competency 7 – Engage in Scholarship
- Competency 8 – Function within the Educational Environment

Discussion & Conclusion

Feedback was positive!

Strategies	Giving feedback to students Dealing with difficult students in clinical Understanding where clinical faculty fit into the curriculum How to send a student on Observation How to utilize SBAR Communication How to give a clinical warning to a student How to Praise a student in clinical How to Motivate a student in clinical
Videos are helpful	Qsen.org. Resources > Videos > RN Faculty Development)
Collaboration amongst Nursing Faculty in other programs	Helpful to talk with other nursing schools who have similar issues. Share ideas on how to support new clinical faculty Share ideas on how to navigate the hospital systems and computer access issues while at clinical.
Mentoring	Need for more mentoring and coaching for clinical faculty. How seasoned faculty can support novice faculty throughout the semester How new clinical faculty can contribute to curriculum and offer ideas to improve the clinical experience.



Acknowledgements

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