OHIO LEAGUE FOR NURSING
NURSING EDUCATION SUMMIT, OHIO 2015

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Dianne Gibbs MSN, RN-BC, Program Director, Aultman College of Nursing and Health Sciences

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Le-Ann Harris, MHSA, BSN, RN, Director Nursing, OhioHealth, Grant Medical Center, Old Dominion University
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Mariann Harding, PhD, RN, CNE, Associate Professor, Kent State University at Tuscarawas

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Tara Spalla, PhD, RN, Interim Academic Dean, Mt Carmel College of Nursing
Darrell Spurlock Jr., PhD, RN, NEA-BC, Associate Professor, Mt Carmel College of Nursing
Penny Marzialik, PhD, CNM, IBCLC, Director DNP Program, Mt Carmel College of Nursing
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Scott Dolan, PhDc, RN, Assistant Professor, Mt Carmel College of Nursing
Sue Yeo, MEd, Mt Carmel College of Nursing

Strategies to Increase Diversity in Nursing Education: Responding to Recommendations From the Institute of Medicine
Carmen Harrison, MSN, RNC, Associate Professor, Good Samaritan College of Nursing and Health Science

Well Child Experience Enhances the Pediatric Nursing Course
Elizabeth Zimmermann, DNP, RN, CNS, Instructor, Pediatric and Community Health Nursing, Case Western Reserve University
Laurine Gajkowski, ND, RN, CPN, Instructor, Frances Payne Bolton SON, CWRU
Lynn J. Lotus, PhD. RN, FAAN, Case Western Reserve University

Will You Still Love Me When I’m 64?
Mary Grady, MSN, RN, CNE, Assistant Professor, Lorain County Community College
Luceille Miller MSN, RN, Adjunct Faculty, Lorain County Community College
Nanci Berman MSN, RN, Professional Practice Clinician, Lorain County Community College
Sarah Eads MSN, RN, Lorain County Community College
ADOLESCENT OBESITY: A NURSE-LED YMCA-BASED INTERVENTION PROGRAM

Peter Jones, MSN, MBA, CNS, RN

Behavioral Objective: Describe a nurse-led community-based intervention that enhances collaboration between nursing practice and education to reduce adolescent obesity by Changing Activities of Daily Living

Background: Adolescent obesity is a healthcare problem at epidemic rates. 16% of children and adolescents in the United States are obese; more than 30% of children and adolescents in Ohio are overweight or obese. Obesity accounts for annual costs of $109 billion, according to the Institutes of Medicine (IOM). Obese adolescents will become obese adults, leading to a prediction that 90% of American adults will be overweight or obese by the year 2030, unless effective interventions are implemented.

Objectives: 1) Improve healthy lifestyle behaviors chosen by adolescents and reduce body mass index (BMI) by decreasing sugar intake, increasing physical activity, and educating adolescents about the effect of sugar in their diet. 2) Design an intervention program that a community agency can implement without increasing the existing budget. 3) Demonstrate to families and community that reducing obesity can be achieved by focusing on making better lifestyle choices, without increasing personal expenditures.

Methods: A nurse-led Young Men’s Christian Association (YMCA) - based intervention program has been developed by a DNP student. Participants are adolescents 12 – 19 years old, and enrolled in a YMCA after-school program. Participants will co-design approaches to drink water as opposed to sugar sweetened beverages (SSB), and increase time walking as opposed to sedentary activities. Study participants will maintain daily logs documenting fluid intake, including type and amount; and steps taken as recorded on a pedometer. Participants will meet twice each week at the YMCA for a 1-hour session involving walking and creating nutrition posters. The YMCA will provide a separate room for twice a week sessions involving study participants. The YMCA Youth Activity Coordinator will observe and monitor the sessions. Members of the Cleveland Council of Black Nurses (CCBN) will participate in leading the YMCA sessions. The program length is 90 days.

Results: BMI will be measured at the beginning and end of the study. Baseline information will be collected on beverage intake and walking 2 weeks prior to intervention. BMI changes, fluid intake changes, and changes in daily physical activity will be reported at the conclusion of the study. Study results will be disseminated in gatherings with study participants, families and in community based town-hall gatherings.
“AM I SAFE?”

Kathleen Gordon, MSN, RN, CNS, CNE, CHSE & Dianne Gibbs MSN, RN-BC

Objective:

After viewing this poster presentation the participant will be able to apply Quality Safety Education in Nursing (QSEN) principles in any practice setting.

Transformational leadership strategies, beginning with nurse educators, are essential in preparing future nurses with the knowledge, skills, and attitudes needed to improve the quality and safety of the healthcare environment in which they work. Providing interactive approaches to address quality and safety while addressing different learning styles of students can be challenging. Therefore, an interactive teaching strategy to integrate Quality Safety Education in Nursing (QSEN) competencies was designed as an outcome based student learning activity. The QSEN six-core competencies provided the framework for this simulation. A simulated teaching strategy was instituted in a Foundations course to prepare students for quality and safety issues they might experience in the clinical environment. Students were provided with a situation, background, assessment and recommendation (SBAR) communication and physician orders for a patient admitted to the hospital with a diabetic foot ulcer. Students were challenged with completing a head to toe assessment while managing a minimum of 26 safety errors. Students were asked to identify areas that put the patient at risk for harm, modify the risks if possible, and communicate risks to the appropriate team members. At the completion of the simulation, the students were given a self-assessment checklist to discover if all assessment areas and safety checks were completed. Debriefing was held immediately after the simulation. The post simulation evaluations indicated 93% of students (N = 268) rated the “Am I Safe” overall experience a five (5) on a 1 – 5 Likert scale with five being the highest rating. In addition as the activity progressed a post-test was implemented to measure knowledge attained as a result of the experience. 100% of the students received a passing score on the knowledge assessment. Nurses are well positioned to demonstrate their leadership skills in introducing activities of this type not only in educational settings but in practice settings as well.
Behavioral Objective: At the end of the presentation, audience members will be able to discuss strategies for creating a caring and quality online educational environment.

With the surge in online education and the growing numbers of faculty teaching nursing courses online, the ways of knowing and enacting online caring and quality needs to be identified, explored, and defined. Learning to create quality online courses can be considered part of caring within the curriculum. Both faculty and students can be assured of excellence in the teaching/learning process by utilizing a model combining the culture of caring and quality in online nursing education.

One of the indicators of quality in online education is peer review of individual courses with the Quality Matters™ (QM) Rubric that is evidence-based. It is different and distinct from other benchmarking in higher education and online education because it is situated from the lens of the student. This willingness to look at the online educational environment from the vantage point of students can be considered a caring action directed at providing excellent online education. The other quality indicator used for the model is the Online Learning Consortium, formerly Sloan-C, a premier online learning society dedicated to providing quality in all aspects of online learning. A new model created through combining caring and quality in online nursing education will be presented. This intersection of caring and quality leads to improved outcomes for both students and faculty.

Examples of strategies used to foster a caring and quality online environment includes: new student online orientation, online faculty orientation, online faculty mentoring program, and personal student advisement utilizing technology to reduce the geographic distance between students and advisors. In the Online RN-BSN Completion Program, online faculty members develop and follow academic policies created specifically for the working nurse, as well as utilize multiple strategies to engage distance students and promote success.

The outcomes from using this Model of Caring and Quality in Online Nursing Education include the following: learning, growth and development; reciprocal connection; student and faculty satisfaction; increased student retention rate; increased student completion rate; and decreased time to graduation.
CHOOSING THE DNP OR PHD DEGREE: NURSE EDUCATOR PERSPECTIVES
Darrell Spurlock Jr., PhD, RN, NEA-BC & Ann Waterman, PhD, RN

**Behavioral objective:** At the conclusion of this presentation, the learner will be able to describe considerations in how the Doctor of Nursing Practice (DNP) and Doctor of Philosophy (PhD) prepare nurses for the educator role.

**Background:** With the creation of the Doctor of Nursing Practice (DNP) degree by the American Association of Colleges of Nursing in 2004, a new generation of nurse educators must decide which doctoral degree program to pursue. Many nurses are still unclear about the role of the DNP-prepared nurse when compared with the role of the PhD-prepared nurse. The purpose of this poster presentation is to evaluate the extent to which coursework and other educational experiences commonly provided in DNP and PhD in nursing programs prepare students for the educator role. This poster will also review the competencies and characteristics of quality nurse educators described by NLN (2005). Comparing and contrasting the coursework of the degrees will enable conclusions about which, if either, degree program best prepares students for excellence in the nurse educator role.

**Methods:** 1) Review of the literature, 2) Analysis of common DNP and PhD in nursing curricula (courses, practical experiences, specific education in teaching/learning), and 3) Synthesis of these perspective with key considerations for nurse educators aspiring to obtain a doctoral degree.

**Implications:** If developing the competencies necessary to become a skilled and effective educator are key considerations, nurse educators should understand nursing doctoral program coursework, required practical experiences, and the extent to which developing expertise as an educator is a formal outcome of these programs.
Objective: After viewing the poster presentation the participant will be educated in the use of combining online computer tutorial modules with active simulation to improve critical thinking skills in undergraduate nursing students and consider implementing this model in their own practice.

The Project: Studies show, only “35% of new graduate nurses exhibit entry level expectations of the necessary critical thinking skills” (Guhde, 2010, p.387). The overreaching issue faced in all areas of nursing, is what can be done to assist undergraduate nursing students in developing the critical thinking skills necessary to become safe and competent nurses. A possibility for improving critical thinking skills in students is by utilizing an online computer tutorial, based on a specific disease process. By utilizing a computer module that combines all of the proven teaching methods of developing critical thinking, it is hoped that a variety of learning styles will be engaged. According to Guhde (2010), “students may learn best from aural, visual, kinesthetic, or reading and writing assignments” (p. 387). The module will walk the student through an illness, such as sepsis, detailing its progression, assessment and treatment. After the educational tutorial is complete, the student will be given a case study in which they will have to assess the patient and virtually “treat” them, thus allowing the student to put the knowledge garnered from the tutorial to work. They will then be walked through the case study by a variety of multiple choice questions.

After the case study, the students will participate in a simulation utilizing a standardized patient allowing them to assess a septic patient, experience the progression of the illness(fever, hypotension, tachycardia, decreased LOC), and provide the treatment (fluid resuscitation with CVP monitoring, pressors, antibiotics, etc.). After the simulation is complete and proper debriefing is done, the students will utilize an online forum in which their videoed simulation will be posted. They will be asked to reflect in an online forum regarding their thinking process and thoughts allowing the debriefing process to continue after the simulation has had time to impact them fully.
CORRELATING MOTIVATION AND PERSISTENCE IN BSN STUDENTS:
RECOMMENDATIONS FOR STUDENT SUCCESS

Christine Heid, PhD, RN, CNE

BEHAVIORAL OBJECTIVE: Describe the types of motivation and persistence behaviors reported by BSN students.

ABSTRACT: As the demand for nurses increases and the supply declines, nurse educators must improve student success in the nursing program to graduate more professional nurses to fill this gap. Motivation toward nursing studies is crucial to persistence and success in the nursing major. This quantitative, non-experimental, descriptive, correlational study examined the relationship between academic motivation and persistence behaviors in Bachelor of Science in Nursing (BSN) students. Conceptually, the study was guided by Deci and Ryan’s self-determination theory, King’s theory of goal attainment, and Jeffreys’ nursing undergraduate retention and success model Data were collected using the 28-item Academic Motivation Scale (AMS), the 69-item College Persistence Questionnaire (CPQ), and a 7-item demographic survey. One-hundred ninety-five participants from a mid-sized private university in northeast Ohio were selected using a purposive criterion sample that included all levels and tracks of the nursing program. Cronbach’s alpha was calculated for both questionnaires, indicating acceptable high reliability for the AMS (α = 0.798) and the CPQ (α = 0.746). The relationship between academic motivation and persistence behaviors was tested using Pearson product-moment correlation coefficient r, revealing a statistically significant finding between the academic motivation self-determination index (SDI) and the persistence behavior of academic integration (AI), r = .491, n = 189, p < .001. Significant relationships were also found between SDI and the persistence behaviors of social integration, advising, institutional commitment, degree commitment, academic efficacy, and collegiate stress. Findings of this study reveal a significant relationship between all three types of academic motivation (intrinsic, extrinsic, amotivation) and several persistence behaviors in BSN students. Statistically significant positive relationships were found between Intrinsic Motivation (IM) and AI (IM – to know, r = .417, p <0.01; IM – to accomplish, r = .445, p <0.01; IM – to experience, r = .316, p <0.01) and Extrinsic Motivation (EM) and AI (EM – identified, r = .437, p <0.01; EM – introjected regulation, r = .332, p <0.01; EM – external regulation, r = .235, p <0.01). A statistically significant negative relationship was discovered between Amotivation and AI (r = -.341, p <0.01). Nurse educators, leaders, and policymakers are encouraged to develop ways to facilitate behaviors that may lead to student nurse success. Assessment strategies for promoting student success and program improvement are highlighted. Student success strategies from the literature review and consideration of research findings are presented.
Describe the benefits and challenges of community service learning with diverse populations from faculty and student perspectives.

Abstract

This poster presentation describes strategies to implement community service learning with diverse populations. This is a structured learning experience that provides students an opportunity to apply classroom culture concepts with hands-on experiences in addition to meeting the needs of communities. Students accompanied by faculty provided basic health care screenings through a variety of experiences. This poster presentation depicts the various experiences and the benefits derived from both the faculty and student perspective. In addition, challenges from faculty and student perspectives are described with appropriate strategies to reinforce student success. Community service learning is stimulating and can lead to imaginative applications for students while learning to practice culturally competent care in the community. This poster presentation will describe how different community organizations partner with the college of nursing to utilize students in face-to-face encounters with diverse populations in the community.
END-OF-LIFE HIGH-FIDELITY SIMULATION

Peggy Shaw, MSN/ED, RN, OCN, RN-BSN

Behavioral Objective: At the conclusion of this presentation, the learner will be able to explain how high-fidelity simulation can be effectively used to teach end-of-life (EOL) nursing care.

Regardless of age, most Americans want to die at home. However, only about 20%-25% will die in their own home or a home of a loved one, compared to 50% who die in a hospital and more than 20% who die in a nursing home.

Nurses are at the forefront of patient care, spending more time at the bedside than any other health care team member; therefore, nurses are in prime position to move the health care team by recognizing when aggressive treatment is no longer effective and EOL is approaching. Nurses must be able to manage pain and other distressing EOL symptoms, coordinate care by communicating with all the health care team members, assist with decision-making and treatment plans, and educate and prepare the family for death. Nurses who provide EOL care must be confident in their clinical skills, aware of ethical and spiritual needs, and have compassion and the ability to meet the individualized needs of the patient and family.

Considering most people die in health care facilities, it is important that nursing students are exposed to EOL clinical situations while they are in nursing school to help them to provide high quality EOL care that every patient and family deserves. There is a deficiency in EOL education in the majority of nursing curricula, partly because so few students are exposed to impending death and dying situations in clinical settings. High-fidelity simulation is an effective and low-stakes teaching strategy that can be used to bridge this educational gap. Critical EOL simulation content includes: understanding complexities of EOL assessment and care, ability to recognize when aggressive treatment is not effective, and identifying own fears about talking to the patient and family about death and dying.

Debriefing data revealed that students appreciated the opportunity to think critically and prioritize through highly emotional EOL clinical situations, thereby gaining experience and confidence in navigating the myriad challenges EOL presents to nurses.
Factors that hinder underrepresented minority ADN students from initially pursuing baccalaureate nursing education

Tanika Cherry-Montgomery, PhD, RN-BC

Learning Objective: At the conclusion of this poster presentation, the learner will be able to identify barriers to underrepresented minority student enrollment in BSN programs and implications for nursing education.

Abstract

Background Statement: Students from underrepresented backgrounds comprise 26.6% of entry-level nursing baccalaureate programs (AACN, 2014) and 16.8% of the nursing workforce (HRSA, 2010), yet 32% of the US population is from a racially or ethnically diverse background (U.S. Census Bureau, 2011). The numbers of diverse nurses who are in practice pales in comparison to the numbers of diverse patients who receive care in the United States. With the Institute of Medicine’s (IOM) initiative to increase the proportion of nurses with a BSN degree by 2020, it is important to understand what factors are hindering diverse students from initially pursuing baccalaureate nursing education.

Statement of Purpose: The purpose of this qualitative research study was to identify barriers to initially pursuing a baccalaureate nursing education for underrepresented ADN students.

Methods: The researcher conducted 13 semi-structured phone interviews with African American associate degree nursing (ADN) students from Ohio, Michigan, and Virginia. Each interview ranged from 35 minutes to 1.5 hours over a period of 4 weeks. Interview data were transcribed and analyzed using common content analysis methods.

Results: The study participants identified eleven barriers to initially pursuing baccalaureate nursing education. The identified barriers were: commitment to either the educational process or their family, competition for entrance into BSN programs, the demanding nature of BSN programs, fear of failure or fear of the unknown, the lack of flexibility, the length of the program, money, more specifically the lack of income, people, program admission requirements, schedule and time, and lack of knowledge.

Implications: If the nursing profession is to become more diverse, nursing faculty and policy leaders should consider the barriers and challenges that underrepresented students face in obtaining entry into baccalaureate nursing programs. Solutions to address these challenges can be designed and tested. The nursing profession – and the health of the nation – will benefit from having nursing workforce, which more closely resembles the populations it serves.
Impact of TeamSTEPPS Training on Interprofessional Collaboration for Nursing and Respiratory Care Students at a Human Patient Simulator

Jacqueline Walli MS RN CNS CCRN

**Behavioral Objective:** Identify three effects TeamSTEPPS could have on an interprofessional collaboration for nursing and respiratory care students at a human patient simulator

**Background:** Students in healthcare professions have traditionally been educated in isolated confines of professional silos in discipline-specific curriculum. The result limits opportunity for students to practice interprofessional communication, collaboration, and team participation to prepare for roles as contributing members of a healthcare team.

**Method:** Volunteers from second year nursing and respiratory care programs were randomly assigned to a Quasi-experimental, between-subjects design. TeamSTEPPS Training was provided to the experimental group. All students practiced interprofessional collaboration at a high-fidelity simulator.

**Outcomes:** Post TeamSTEPPS Training, the experimental group had 25% improvement in interprofessional communication, collaboration, and cooperation at the high-fidelity simulator. All mean scores on the Collaboration and Satisfaction About Care Decisions Likert-type tool were higher for the experimental group with the greatest difference between the groups being shared responsibility for decision making. All students responded team collaboration could be learned and taught and the most important characteristic for a team member was being an effective communicator.

**Conclusions:** To prepare graduates as effective interprofessional team member collaborators, educators need to provide students theory and clinical experiences for interprofessional socialization early in their curricula. Experiences should progress to multidisciplinary experiences providing foundations for interprofessional collaboration throughout their professional practice. TeamSTEPPS Training offered nursing and respiratory care students early opportunity for increased knowledge and skills for interprofessional collaboration.
IMPLEMENTING MASTER INSTRUCTION PRINCIPLES INTO THE FIRST COURSE IN AN ONLINE RNBSN PROGRAM OPTION

Cecelia Jane Maier, MS, RN, CNE & Melissa Burdi, MS, RN

Objective: The learner will identify strategies for successful implementation of Master Instruction principles.

After reading Ken Bain’s book *What the Best College Teachers Do*, faculty and administrators at one large online RNBSN program option set about implementing Bain’s seven principles (called Master Instruction by our institution) with all instructors in numerous sections of the first course taken by students (NR351 Transitions in Professional Nursing). Unlike the RNBSN online setting, the subjects for Bain’s book were set on ground campuses; he primarily focused on individual instructors teaching single sections of courses where changes could be made quickly without concern for consistency in other sections. A search of the professional nursing literature revealed no instances where Bain’s principles were applied to an online nursing education setting.

Implementation task force members (Assistant Dean, two Faculty Managers, and the Subject Matter Expert/Course Coordinator for NR351) considered how best to convey the seven principles of Master Instruction and tailor the implementation to NR351. The task force developed a PowerPoint presentation to introduce the seven principles of Master Instruction to the NR351 faculty. This presentation included specific examples from the course and strategies for implementation for all NR351 faculty. A live webinar using Adobe Connect software was provided for all faculty in the course. It was recorded for those unable to attend. Opportunities for questions and feedback during the live webinar were readily available. Faculty attending both the live webinar and the recorded version submitted much positive feedback about the use of Master Instruction in NR351 as well as the impact of the webinar.

Persistence (percentage of students successfully completing NR351 and enrolling in another course the next session) increased after the implementation of Master Instruction and other initiatives. Qualitative research is in progress to evaluate effectiveness of Master Instruction implementation into NR351 from the perspectives of both the faculty and the students.

Future plans include the use of Master Instruction principles in course redevelopment, considering new ways to implement the seven principles, introducing faculty in all courses to master instruction, and continued support of current faculty in their use of master instruction.
Objective: Describe how telehealth technology is being used to provide a comprehensive understanding and experiential learning opportunity for graduate nursing students.

Knowledge and skills in information and health care technology are critical to the delivery of quality patient care in a variety of settings (IOM, 2003). Graduates of master’s-level nursing programs must have competence to determine the appropriate use of technologies and integrate current and emerging technologies into one’s practice and the practice of others to enhance care outcomes (ANCC, 2012). Telehealth is a form of technology using telecommunications for medical diagnosis and patient care which fills the gap of advanced, specialized care in areas that face a shortfall of providers. This technology allows for the provision of medical services at sites that are under staffed and or physically separated from the provider.

At the University of Cincinnati, Telehealth has been incorporated into the Adult-Gerontology Acute Care Nurse Practitioner program. This presentation will provide information about how the course work was rearranged to include Telehealth into the course content. An experiential laboratory experience was added and practicum experience was offered in a variety of healthcare settings using an array of Telehealth equipment. The session will describe the multifaceted way that the students participated in research, education and practice with the Telehealth devices. Telehealth has been proven to improve outcomes and is being adopted in several care models. AG-ACNP's should be well positioned to provide Intensivist/specialty care both on site and remotely with proper training. By incorporating Telehealth training in the AG-ACNP program, through introduction and exploration in a simulation lab, and observation and utilization in a long term acute care facility and in the TeleICU at the Veterans Administration Medical Center, the graduate AG-ACNP gains an understanding about the technology needed to provide Intensivist/specialty care both on site and remote areas. Telehealth as a tool for the advancement of Interprofessional team work will be illustrated.

This session will provide a blueprint for transforming the classroom from lecture to interactive sessions that prepares nursing students for future remote care delivery using telehealth devices. The transformational blueprint shared will be applicable to use in all levels of nursing programs.
INNOVATION IN CLINICAL NURSING EDUCATION:
A SYSTEMATIC REVIEW OF THE LITERATURE

Jacqueline M. Loversidge, PhD, RNC-AWNC & Linda Daley, PhD, RN, ANEF

Objective: Describe clinical nursing education innovations utilized in pre-licensure U.S. RN student populations.

Significant changes in science and technology have precipitated major changes in health care, and subsequently in nursing practice and education. The aim of pre-licensure nursing education is to produce competent graduates who are ready to begin practice as novice generalists. To that end, educators seek to create learning environments in the classroom, laboratory, and clinical settings. Faculty are called upon to integrate activities that facilitate student learning; this is particularly challenging in the clinical setting where students are required to integrate theory and practice while navigating the sociocultural environs of the clinical site. The call to transform nursing education to meet the challenges of the changing environment has been sounded. Educators use a variety of strategies, but evidence to support and inform curricular innovations is often theoretical or descriptive. Our aim was to investigate the existing body of work on key strategies influencing the clinical nursing education process. A literature review was conducted to identify and review the strongest evaluations of clinical nursing education practices by using a three-dimensional approach: 1) classify the type of research method used; 2) classify educational methods reported, or utilized in the study; and 3) classify educational outcomes. The search was limited to peer reviewed papers and reports of formal nursing education initiatives in accredited pre-licensure nursing education programs leading to licensure as a professional nurse (RN) in the U.S. Database searches of CINAHL, Medline, ERIC, Research into Higher Education Abstracts and Google Scholar were conducted using keywords including but not limited to “clinical nursing education,” “methods,” and “outcomes.” Abstracts from articles published in the last 7 years were reviewed. If inclusion criteria were met, full articles were obtained for review. Each abstract/article was reviewed by both members of the team. Findings of papers and studies reviewed were synthesized, and most utilized innovative strategies/best practices identified and classified.
Behavioral Objective: At the conclusion of the presentation, the learner will be able to describe an approach to threading the national “Joining Forces” content into the curriculum of an online RN-BSN nursing program.

It is estimated that there are approximately 80,000 Ohio veterans from Operation Enduring Freedom (OEF) in Afghanistan and Operation Iraqi Freedom (OIF) in Iraq. Due to improvised explosive devices, along with other weapons of war, veterans of OEF and OIF experienced more traumatic brain injury (TBI) than at any other time in American history. The diagnosis of post-traumatic stress disorder (PTSD) is high among veterans exposed to trauma themselves or who have witnessed trauma to another effecting between 11-20 percent of those who served in OEF/OIF. Further, as a result of the injury of war, it is estimated that 22 veterans take their own lives each day. This data supports the need for a new skillset within the health care community, especially registered nurses who work around the clock and calendar providing health care.

The average age of a registered nurse in the United States (US) is 44-years-old. Most did not have veteran-centric or veteran-specific content in their nursing curricula. However, today many nurses are caring for veterans who have returned with the diagnoses of TBI and PTSD without the knowledge base and tools to competently provide that care. This presents a unique challenge for RN-BSN Completion Programs to fill this education gap. The “Joining Forces” national initiative provides both a call to action as well as numerous educational resources for nursing programs to provide this valuable education.

One method for threading content related to the care of veterans into an Online RN-BSN Completion Program curriculum will be addressed. Methods for obtaining faculty commitment in this venture will be shared.

A creative strategy for applying veteran-centric and veteran-specific content in student assignments in an online community health course increased student engagement and resulted in powerful student-veteran experiences and reflection. Specific teaching/learning methods and strategies for assessment will be presented.
Objective: Identify teaching strategies that will facilitate successful dosage calculation passage rates at 90% or greater.

Medication administration continues to be an important nursing competency in healthcare reflecting safe and quality patient care. A nurse’s clinical judgment can be based on their confidence and competence in dosage calculation proficiency. Unfortunately, there continues to be difficulty in dosage calculations and the ability for nursing students to demonstrate competency in dosage calculations. LPN to RN nursing students are admitted into the nursing program with a minimum of one year experience, are certified in intravenous therapy, and have met the pre-entrance requirement of algebra. For the purpose of this poster, we have specifically noticed a decline in LPN to RN nursing students’ ability to pass the dosage calculation tests at a 90% accuracy in the beginning transition course. There are some students who continue to have difficulty showing long term success at 90% accuracy. The following questions are addressed: 1) what are some of the difficulties that contribute to unsuccessful passage of the dosage calculation tests, and 2) which teaching strategies offer the best practice for students to successfully pass a dosage calculation competency?
MEDTAPP MENTOR: IMPROVING HEALTHCARE FOR MEDICAID CLIENTS

Pamela K. Rutar, EdD, MSN, RN, CNE (PI)

Objective:

Discuss use of an interprofessional model in improving healthcare for Medicaid clients.

Caring for clients enrolled on Medicaid and other forms of medical assistance can be a challenge, causing a shortage of healthcare providers to service this population. Even when financial barriers are alleviated, challenges related to cultural issues, an inefficient care delivery system, and a lack of resources persist (Kullgren & McLaughlin, 2010; Oduro, Connor, Litwin, & Maliski, 2012).

The MEDTAPP Mentor program uses an interprofessional model to address student knowledge gaps and a mentoring model to provide experience in caring for those enrolled on Medicaid. Students in nursing and social work are paired with same-discipline mentors in the field to gain hands-on experience in providing care to the Medicaid population. In addition to the field work, students attend a series of seminars addressing topics related to caring for Ohio’s Medicaid population.

The MEDTAPP Mentor program is partially funded by the Medicaid Technical Assistance and Policy Program (MEDTAPP) through Ohio Department of Medicaid’s Healthcare Access Initiative and is focused upon better preparation of healthcare professionals to meet the unique needs of the Medicaid population. Students (mentees) participating in the program must agree to seek employment with providers that service the Medicaid population after completion of their healthcare professional education and training.

A pilot project was implemented in the spring of 2013, with 43 students (mentees) from social work and nursing paired with social workers and nurses currently working with the Medicaid population in various settings in Northeastern Ohio. Students attended seminar sessions including:

- Description of Current Medicaid Programs and Qualifications for Enrollment on Each
- The Affordable Care Act and the Projected Impact on Care for the Underserved
- Quality Improvement Processes
- Issues Of Culture in Caring for the Medicaid Population
- Advocacy and the Medicaid Client

Students applied principles learned in the seminar sessions to a field experience with a mentor. Nursing and social work students participated in over 1400 encounters with Medicaid clients in the duration of the program. Evaluations of the components of the program by the participants were positive. Funding was again continued for years two and three, with plans to include other health care disciplines in the project.
Behavioral Objective: At the conclusion, the learner will be able to describe how to implement a multidisciplinary approach to writing across the curriculum in an online RN-BSN program.

In recent years, including writing across the curriculum has become an important component of any successful college program. Obstacles to success in implementation of cross-curricular writing assignments include not only student’s fear of and inexperience with writing, but also nursing faculty reluctance to include and evaluate student writing and American Psychological Association (APA) format.

Using APA format for writing at any level in higher education is challenging for the registered nurse returning to school after several years. Many RN-BSN online students have never written or heard about APA in their pre-licensure programs. Therefore, students feel immense stress and fear, and oftentimes view APA formatting as a giant obstacle, considering the APA manual contains a huge amount of information that is challenging and hard to master when it is not in a stand-alone course. This leads to confusion for students and increased work as each individual faculty member attempts to help them learn and apply this knowledge, in addition to teaching the nursing curriculum in their own courses.

Successful implementation of writing across the curriculum requires faculty to work together across disciplines to assess writing assignments, analyze gaps, and develop common portions of grading rubrics related to APA. Success also requires generating a uniform foundation of writing knowledge for all students through introductory “low-stakes” writing assignments to foster improved writing skills, confidence, and competence in returning students. This foundation may require providing items such as templates, access to editing technology, clear explanations of required formatting, consistency in rubric use, as well as clear policy and standards applied in all courses.

Maintaining consistency across the curriculum builds on this foundation and fosters student success in writing across the curriculum, building writing and APA formatting skills incrementally, one course at a time. In turn, this consistency supports faculty member effort and addresses many of the issues that breed faculty reluctance to include writing assignments.
NURSING ORIENTATION OUTCOMES UTILIZING EXPERIENTIAL LEARNING

Le-Ann M. Harris MHSA BSN RN

ABSTRACT

PROBLEM: Each year healthcare organizations spend an estimate of $50,000 on recruitment, orientation and retention of nursing professionals. The costs associated with hiring and on-boarding new nurses are further affected by new employees who require additional time to meet basic criteria of safe practice and by those who leave the organization during the first post-hire year. Effective orientation will prepare new staff to be more competent and confident in their position, thus leading to sustainability in their role as nurses.

PURPOSE: This study will evaluate the impact of practice based learning outcomes used during orientation among newly hired nurses. The project will assess the difference in orientation outcomes based on the type of orientation provided to newly hired nurses.

EBP QUESTIONS: Is there a difference between the length of orientation for newly hired nurses who have participated in a learning outcomes based orientation (Jump Start) and those who did not participate in orientation utilizing learning outcomes (Jump Start)? Is there a difference between newly hired nurses that have participated in an orientation that is based on learning outcomes (Jump Start) and their rate of retention after one year of employment as compared to nurses who did not participate in a learning outcomes orientation program (Jump Start)?

METHODS: Retrospective Causal Comparative Study. The intervention and comparison occurred between two acute care hospitals that are a part of a system. Participants in the intervention group were oriented using the Jump Start orientation program. Components of Jump Start includes experiential learning/simulation, learning styles and learning outcomes.

OUTCOMES: The outcomes variables measured will be the length of time in orientation and retention rates after the first post-hire year.

SIGNIFICANCE: This study will assess the outcomes of two different orientation programs. It should identify the quality of orientation through simulation and effective practice based learning which may lead to improved lengths of orientation and retention rates.
PREPARING FUTURE NURSING LEADERS ONLINE:
THE EVIDENCE SAYS TO “KEEP IT REAL:
Susan Johnson, PhD, RN

Identify effective online learning strategies to develop leadership skills in experienced clinical nurses.

Leadership succession and developing leadership skills in experienced clinical nurses is essential for the future of our profession. Nursing faculty have the challenge of developing effective learning strategies for online courses for these experienced clinical nurses looking to enhance their leadership and management skills. A nursing leadership course was developed in a blended format for the RN-BSN program and administration track of the MSN degree program. Great care was taken to assure that the course was engaging, motivating, and growth producing for the student. The course was built on an engaging, user-friendly template, and was visually appealing with colors, icons, etc. and contained a variety of assignments including a short theory paper, discussion board questions, self-assessments/journaling, and a poster presentation that depicted their personal leadership style that evolved over the course. Students provided written feedback to the instructor week 6 and upon completion of the course. Based on these data, the following “real” conclusions can be drawn regarding teaching leadership online:

- **Keeping Feedback Real:** It was found that the “type” of weekly feedback faculty gave to students on their journals/self-assessments was related to the quality of future journal entries. The more individualized and personal sharing of the faculty feedback, the more the student wrote and reflected in the next week’s journal.

- **Keeping Discussion Board Questions Real:** Students preferred “scenario-type” discussion questions, where they were given a challenging situation and needed to address how they would make a decision/use their leadership skills to solve the problem as opposed to stating agreement or disagreement on a topic and providing a rationale.

- **Keeping Assignments Real:** The creation and depiction of a personal leadership style was rated highly as a meaningful, growth producing experience. This assignment had real, personal meaning to the students and was applicable to their current work situations.

- **Keeping Content Real:** TED videos were very effective, depicting leaders talking about real issues in their organizations.

- In summary, the students appreciated a leadership course that was developed in such a way that it applied to their work in a very real way.
**Objective:**
Examine how to incorporate a student-led seminar as distinct learning experience in an RN-BSN course.

**Background.** The Affordable Care Act is the most important healthcare legislation since the initiation of Medicare. Nurses need to be knowledge about tenets of the ACA in order to assist patients in navigating the complexities of the health care system. The purpose of this innovative education assignment for RN-BSN students was to apply knowledge gained from health care policy and health program planning towards developing and delivering a comprehensive 1-hour seminar providing details about the ACA for persons under age 26. Topics included: Can you ever be dropped from your parents’ plan, how do you choose a health plan, and what happens when you get a job?

**Method.** Faculty led a series of classroom discussions intended to prepare students for their presentations. Pairs of students chose a specific content area, researched their topic, wrote learning objectives, and prepared handouts and visual aids. Using a Wiki, pairs posted their content, allowing faculty and students to review the material for accuracy and redundancy. Each student participated in preplanning activities, such as advertising, day-of activities, such as registering guests and distributing door prizes, and post-seminar evaluation.

**Results.** The program drew a large crowd of faculty and students. One-hundred percent of the audience and peer evaluations were very good to excellent. Each participant noted coming away from the seminar having learned new facts about the ACA. Student self-evaluation indicated enhanced presentation skills. During debriefing, students were enthusiastic and expressed overwhelming satisfaction, describing the seminar as engaging and interactive. The overall course evaluations indicated achievement of course goals.

**Discussion.** Faculty are challenged to use innovative educational strategies to capture students’ attention and engage them in distinct learning experiences. A student-delivered seminar intended to assist students in learning critical tenets of the ACA and enhance presentation and program delivery skills was successful. Students described the seminar as an effective learning strategy. Faculty noted students developed competencies in delivering health care information and demonstrated advanced knowledge of health care policy.
SELECTING A NEW LMS: RAPID EVALUATION STRATEGY FOR BEST FIT

Tara Spalla, PhD, RN, Darrell Spurlock Jr., PhD, RN, NEA-BC, Penny Marzialik, PhD, CNM, IBCLC, Therese Snively, PhD, RN, Scott Dolan, PhDc, RN, & Sue Yeo, Med

Behavioral Objective: After this presentation, learners will be able to describe a rapid and comprehensive strategy for evaluation, testing, and selection of a learning management system (LMS).

It is estimated that institutions of higher education replace their learning management system (LMS) every ten years due to improvements in technology, along with faculty and student dissatisfaction with current systems. In large university settings, entire information technology (IT) departments tackle such initiatives. In smaller institutions, this investigation and evaluation of a new LMS for best fit resides with administrators and faculty.

There is a direct relationship between the degree of fit of an LMS with an institution of higher education and the degree of adoption of that LMS by the faculty and students of that institution. Thus, it is critical to have the appropriate stakeholders at the table during investigation, evaluation and decision-making to increase chances of successful adoption.

Collecting baseline data to assess satisfaction/dissatisfaction with the current system, as well as features desired in an LMS, is the first step and provides a foundation for the remainder of the vetting process. Discussions with vendors, comparing technical specifications, and “sandbox” testing of actual LMS software are the next steps. Interviewing leaders of other similar institutions who have migrated from the institution’s current LMS to the proposed new LMS is an important step because it provides real-world data from current users.

Including faculty in the process of LMS evaluation is vital to understanding how they currently use an LMS, how they navigate in the LMS, what features they like and dislike in the LMS, and how they think the LMS will be adopted by faculty and student groups, with consideration of the organizational structure. Keeping faculty engaged in a lengthy evaluation process, in addition to their regular duties, is challenging and unfair since it does not factor into promotion and tenure equations at most institutions. Therefore, planning for a short, concentrated, and rapid process is beneficial. This efficient LMS evaluation process also supports group dynamics that build shared vision, cohesion, and successful project completion. Timeline, outcomes and lessons learned from the two-month process will be presented.
STRATEGIES TO INCREASE DIVERSITY IN NURSING EDUCATION:  
RESPONDING TO RECOMMENDATIONS FROM THE INSTITUTE OF MEDICINE  
Carmen Harrison, MSN, RNC

Behavioral Objective: After reading this abstract, the viewer will be able to describe a strategy used to promote the retention of minority racial and ethnic nursing students.

Abstract

The Institute of Medicine (IOM) report, *The Future of Nursing: Leading Health, Advancing Change*, emphasized the need for nursing programs across the country to recruit, retain, and graduate students from diverse racial and ethnic backgrounds. There is a projected shortage of nearly one million nurses by the year 2020. Filling this shortage with new nursing graduates from minority racial and ethnic nursing graduates will be a challenge since this group often faces higher college attrition rates than their non-minority peers.

This presentation will describe the Multicultural Student Support Group, a strategy devised to address an increase in attrition rates of minority racial and ethnic nursing students at a private college in Cincinnati, Ohio. Multicultural Student Support Groups are held monthly for one hour at the project site. Nursing faculty who represent minority racial and ethnic groups facilitate the meetings. Following a brief reflection, peer-to-peer discussion takes place. It is during this time that junior and senior level nursing students answer questions and offer suggestions to the freshman and sophomore students. Following this activity, nursing faculty provide information regarding a topic, such as test taking strategies, time management, and studying tips. Before the meeting is concluded, the students are provided with an open forum to share any concerns with peers and faculty.

Students have reported positive remarks regarding the Multicultural Student Support Group. Although rigorous research is needed to evaluate the effectiveness of the strategy used at the project site, literature supports the use of peer groups and faculty-student mentoring as effective measures to aid in the success of nursing students from minority racial and ethnic backgrounds. It is hoped that in sharing the experience of the Multicultural Student Support Group at the project site, faculty from other schools of nursing may adopt similar strategies. Together, we can all work to address the recommendation from the IOM concerning the need for increasing diversity within nursing education.
WELL CHILD EXPERIENCE ENHANCES THE PEDIATRIC NURSING COURSE

Elizabeth Zimmermann, DNP, RN, CNS, Laurine Gajkowski, ND, RN, CPN, 
& Lynn J. Lotus, PhD, RN, FAAN

(Behavioral objective for viewer of the abstract)

Understand the creative process as it applies to the development of a Well Child clinical experience during the Pediatric Nursing Course.

In 2010 the Institute of Medicine published the Future of Nursing: Leading Change, Advancing Health calling for increasing nurse’s preparation for work within communities. Concomitantly, two local hospitals diminished clinical opportunity allowing six students per site creating a need for additional clinical sites, and School of Nursing Program Directors identified one graduate seeking a career in Public Health. This convergence initiated new approaches to clinical education such as creating a Well Child Clinical experience for BSN student nurses.

Discussions between the Program Director, pediatric nursing Course Coordinator, and a faculty member, experienced in preschool education and pediatric nursing created the Well Child experience. Review of BSN Essentials, and course and class objectives preceded the identification of Head Start as an excellent opportunity for a well-child experience. The Council for Economic Opportunity of Greater Cleveland (CEOGC) and its Head Start locations serving 3000+ students was identified as the collaborator for the clinical experience. The CEOGC Health Services Specialist and nursing faculty coordinated efforts to identify sites, dates, and student nurses’ clinical duties. Nursing behaviors included vision, auditory, developmental, and nutritional screenings. In addition to physical assessments, students participated in briefing and debriefing focused on the history and value of Head Start, child development, and important community resources. Follow-up required a nursing care plan to include data collection, developmental milestones, and anticipatory guidance relating to the child assigned to the student nurse.

Positive evaluations include; the Director of CEOGC reports requests for the program from the site Administrators, and the Health Services Specialist comments on how difficult it would be to complete the state required physical assessment data without the student nurses. Importantly, positive comments from the student nurses include; “I didn’t know there were these excellent programs available,” and “I learned so much about children’s development.” The well child clinical experience adds the value of broadening the activities and community exposures for the pediatric student nurses.
“WILL YOU STILL LOVE ME WHEN I’M 64?”

Mary Grady, MSN, RN, CNE, Luceille Miller MSN, RN, Nanci Berman MSN, RN & Sarah Eads MSN, RN

Poster Presentation Objective:
At the conclusion of the poster presentation, the participant will be able to identify ways to engage students using low fidelity simulation by exposing students to safety, common health issues, and patient-centered care of the older adult in the hospital home environment.

Abstract

How does it feel to grow old? How can we relate to our older patients when many of us have never experienced the changes that the body goes through during the aging process? A local community college “aged” their student body with the help of low fidelity simulation. The faculty wanted to emphasize to the students the limitations that normal aging has on the human body and how this can impact patient care. The simulation allowed the students to reflect on their experience as an aged patient and a caregiver.

The scenarios were designed to encourage decision-making and critical thinking by the student as they cared for their simulated patient. The simulation assisted the student in the identification of common health needs for the older adult based on physical, cognitive and psychosocial changes that occur with aging. It was also used to introduce high risk safety issues the older adult may encounter. Students were encouraged during the debriefing period to identify patient-centered nursing interventions that could be implemented in the hospital and home environments for the aging adult.

Faculty viewing this poster will be provided with the directions to assist in the reproduction of the aging simulation. The aging simulation was created to engage the students in the classroom setting. It is the hopes of the presenters, that those viewing the poster presentation will implement a creative approach to engage students and promote a more interactive classroom environment. The presenters anticipate that the interactive classroom will help students strengthen their knowledge and gain insights to the patient perspective.