Title of Abstract: "Just Tell Me How to Graduate On-Time"

Purpose/ goal/ aim that aligns with the conference theme and threads.
The purpose of this qualitative research study was to identify strategies for success in the academic environment from the students’ perspective using the phenomenological research methodology. In addition, the students who participated in the study recommended strategies to facilitate successful transition into the school of nursing environment for future nursing students.

Description/ background/ significance section.
A qualitative research study was conducted at a large school of nursing in a health sciences center in the Southern United States. The school of nursing graduates approximately 250 traditional nursing students per year. A priority for this school of nursing was to better understand factors contributing to on-time graduation.

Methodology section
The researchers conducted focus groups with at-risk students who graduated on-time (within 6 semesters), but were identified as having non-modifiable variables including age 22 or greater, non-white, or male that could hinder their academic progression and were less likely to graduate on-time in this program.

Results/ outcomes/ evaluation section.
Themes that the students identified as supportive of their on-time progression included: specific behaviors, skills, social support, resources, and comprehension of information needed for academic success.

Recommendations for nursing practice, administration, education, and/or research
The students described how they successfully progressed on time and suggested strategies to help future students. The faculty and administration changed the orientation process to include time management, test taking, and professional socialization that reflect the themes identified in the focus groups. Additionally, the nursing school in the study also has an academic success coordinator to assist students in achieving their academic goals. Other schools of nursing can define and identify their at-risk student and put in proper interventions to achieve academic success.

Title of Abstract: The Effectiveness of Simulation and Instructional Videos on Knowledge Retention of BSN Students (In Progress)

Aims: 1.) To determine if knowledge retention increases in nursing students when they are exposed to a didactic lecture and case study and/or simulation experience or didactic lecture and an
instructional video from one course to a subsequent course. 2.) To determine the relationship between students’ confidence in anatomical knowledge and clinical procedures before and after instructional interventions.

**Background:** Today’s students are unlike the students of the past. They are technologically advanced and require instructional methods that allow them to be active participants in their learning. Science courses and nursing courses have relied heavily on didactic lectures as an instructional method to provide a large amount of content to a large number of students. However, the days of using such methods are gone. Passive instructional methods are no longer effective. In order to provide quality instruction, a pedagogical approach that integrates didactic lecturing with an active learning experience will be necessary. Simulation and case studies are some active learning tools that can be used.

**Significance:** Anatomical knowledge is needed in the application of nursing practice. Retention of knowledge is often implied rather than measured. There is evidence that suggest a decrease in anatomical knowledge retention as nursing students matriculate through a nursing program. Nursing graduates are required to acquire the skills and knowledge to be able to practice nursing safely. Therefore, the acquisition of foundational knowledge of anatomy is imperative.

**Methodology:** In order to compare the effect of active versus passive learning on knowledge retention, students will be randomized twice within a mixed factorial repeated measures design.

**Outcome:** Study is still in process.

**Recommendations:** This study hopes to support active learning as an effective learning method for both students enrolled in a science and nursing courses.

#3 Debora Nutt, DNP, MN, BSN, RN & Lisa Engel, MSN, RN CNE

**Title of Abstract:** A Multi-Case Leadership Simulation to Aid in Transition to Practice

**Background:** In a complex hospital environment, bedside nurses must gain important leadership skills to manage groups of patients. Some studies suggest that novice nurses feel unprepared to handle difficult situations in the work arena. What activities can assist novice nurses transition from student to nurse?

**Purpose:** The purpose of this project was to determine if simulated learning activities enhance leadership skills and the transition to independent critical thinking that graduate nurses face when entering the nursing workforce.

**Methods:** Senior nursing students participated in two simulated activities. A group of five to six students participated in care for four patients. The students selected a charge nurse and decided on a care delivery model. The simulated activities had two standardized patients and two high fidelity mannequin patients. The simulations consisted of four parts: pre-briefing, simulation, de-briefing and documentation. Each simulation lasted four hours for a total of eight hours for the semester.
Data was collected over five semesters. Students evaluated themselves and the simulation after each simulated activity regarding the effectiveness of the experience on different leadership skills. In addition, they ranked themselves regarding their own readiness to practice.

**Results:** Students felt both simulations enhanced their skills in teamwork, critical thinking, assessment, conflict resolution, communication, and delegation. When asked about transitioning into practice, the majority agreed that the experience helped their confidence level and their preparation to enter practice.

**Recommendations:** A multi-case leadership simulation appears to be beneficial in assisting senior nursing students in transition to practice. This interdisciplinary activity could be upgraded to an interprofessional activity. A comparison of costs of standardized patients versus high-fidelity mannequins is important since the majority of students preferred the standardized patient.

#4 Alison H. Davis, PhD, RN, CHSE, Heather Abadie, MSN, RNC-OB; Helena Midkiff, MSHCM, RRT, RPFT, AE-C; Tina Patel Gunaldo, PhD, DPT, MHS

**Title of Abstract:** Interprofessional High-Fidelity Simulation to Improve Nursing Student’s Ability to Communicate Professional Roles

**Background.** Interprofessional education (IPE) and high-fidelity simulation (HF-Sim) are educational pedagogies which positively impact student learning. HF-Sim provides a safe learning environment for students to practice interprofessional teamwork and communication. This study included the development of two obstetric emergency IPE HF-Sim scenarios. The aim was to determine if IPE with HF-Sim advances clinical knowledge and team communication, improving student understanding of professional responsibilities.

**Methodology.** The study was a pre-posttest, non-equivalent control group design. Three nursing groups were included in the study: IPE HF-Sim, HF-Sim, and no intervention. Each IPE HF-Sim group included two respiratory therapy students. The HF-Sim was a required component of the undergraduate nursing course. Participation in the IPE research aspect of the study was voluntary, and consent was obtained. Study approval was obtained through the Health Science Center's Institutional Review Board. Students’ perceptions of interprofessional roles and clinical knowledge were assessed through an electronic survey.

**Results.** Seven nursing students (100%) engaged in the IPE HF-Sim participated in the pre- and post-survey. Six of the seven students engaged in the HF-Sim (86%) participated in the pre- and post-survey, and seven students in the non-intervention group (100%) participated in the pre- and post-survey. The IPE HF-Sim student group had a statistical significant difference in post-survey mean scores regarding roles of the RT and communication of roles as compared to the HF-Sim and no intervention group. Individual students and students in all three groups described the roles of a RT similarly in the pre- and post-survey.
Conclusion. This study contributes to the literature by discovering a difference in undergraduate nursing student knowledge of a RT as compared to student self-perception of his/her ability to communicate the role of a RT. Future research is needed to determine if self-perceived ability ratings of IPEC sub-competencies are potential barriers or facilitators to collaboration.

#5 Leanne H. Fowler, DNP, AGACNP-BC, CCRN, CNE

**Title of Abstract:** Quality Improvement: Increasing NP Enrollment with New Faculty & New Leadership

**Background:** Nurse Practitioner educational programs nationally have been encouraged to transition from Master’s degree programs to Doctor of Nursing Practice (DNP) degree programs. In June of 2014, our Nurse Practitioner (NP) program made the transition. Reviewing NP program enrollment data in the state and in the nation, enrollment into DNP programs was progressively increasing.

**Problem:** Amidst programmatic, administrative, and NP faculty changes, enrollment into the NP program experienced a dramatic drop in enrollment over a two year period. NP faculty theorized the enrollment decline was related to the program transitioning to the DNP degree. Since our degree program’s conversion to DNP (June 2014, n=24), enrollment each year steadily declined by 20% (n=19) in academic year (AY) 2015-2016 and by 83% (n=4) in AY 2016-2017.

**Purpose:** The project aimed to increase NP student enrollment by 50% in one year.

**Methods:** The project utilized a root-cause analysis to assess the problem by collecting feedback from 5 years of exit surveys, current faculty, current students, and current Preceptors’ feedback. The PDSA model was used to implement and test the improvement strategies and a comparative analysis was used to evaluate pre-project data to post-project data.

**Implementation:** The root-cause analysis identified two major themes contributing to decreased enrollment: (1) Disorganization and (2) inadequate communication. Improvement strategies included (1) reassigning/redistributing faculty-student assignments across all NP faculty irrespective of the concentration to allow, (2) Developing a course schedule template for all NP courses, (3) establishing a NP faculty and student forum each semester, (4) establishing regular meetings among all NP faculty, and (5) collaborating with the student recruiter to increase communications and the programs presence with current and potential applicants.

**Results:** Post-implementation data yielded a 3-fold increase in enrollment (n=14) for AY 2017-18. Faculty, student, and Preceptor feedback reports improved communication and organization. 2018 exit surveys also indicated improved overall quality of instruction and satisfaction with the program.

**Conclusion:** An objective analysis of the enrollment decline was not related to the transition to the DNP degree. Studying the contributing factors and prioritizing improvement strategies increased enrollment of NP students, improved communication mechanisms, and improved the operational
procedures of course and clinical faculty. Future research is needed to identify the administrative factors students perceive contributes to a programs poor organization and ineffective communication.

#6 Gwendolyn Moore Livous, PhD, RN

**Title of Abstract: The effect of student response systems on junior baccalaureate nursing students’ satisfaction, learning style and knowledge acquisition: a quasi-experimental design**

Students today have a preference for digital literacy, experiential learning, interactivity and immediacy. Nurse educators are challenged to incorporate innovative student-centered teaching strategies that are tailored to meet the learning needs of this digitally literate student population, also referred to as the millennial generation. Instructional strategies that promote passive learning, such as the traditional lecture, continue to dominate the classroom in many educational settings, rather than teaching strategies that foster active student engagement, a precursor to deep learning. Restructuring the learning environment to maximize student learning outcomes necessitates inclusion of a variety of teaching methods and resources, especially those that incorporate technology. A growing body of research is emerging on the incorporation of student response systems (SRS) technology into the classroom setting as an active learning, student-centered approach. Despite the accolades regarding SRS and the potential pedagogical possibilities within the classroom with their use, limited research exists in nursing education to support clicker technology effectiveness on nursing students’ acquisition of knowledge or learning outcomes.

The purpose of this study was to test effectiveness of SRSs as a pedagogical tool and to test the effectiveness of SRS of learning outcomes on knowledge acquisition in junior level, second semester baccalaureate nursing students. In addition, this study sought to determine the effect of student satisfaction with SRS technology relative to varied learning styles.

The Kolb Experimental Learning Theory was used to guide this research. A pretest posttest quasi-experimental research design was used to conduct this study. The sample was comprised of fifty-seven undergraduate nursing students enrolled in an obstetrical nursing course in a HBCU setting.

Students were randomly assigned; the experimental group (a didactic lecture using SRS technology) and the control (didactic lecture only). Both groups received a pretest customized HESI examination, the Kolb Learning Style Inventory (KLSI) and a case study prior to their initial lecture. The study was conducted over a three-week period and covered content on high risk obstetrical nursing care. Both groups also received a parallel posttest customized HESI examination at the end of the study. The experimental group completed a satisfaction survey at the end of the study. Findings revealed that there was no statistically significant difference in pretest and posttest knowledge acquisition scores, no statistically significant difference in post-test HESI examination mean scores between the groups with regards to their learning styles. Kendall’s tau and Pearson product-moment correlation coefficient were used to analyze for a correlation existed between learning styles, gender, age, GPA, satisfaction and HESI pretest and posttest scores.
The modified version of the Meedzan Clicker Satisfaction Survey revealed an overall mean score of 21.46 (SD = 3.50) among the experimental group indicating overall satisfaction with the use of SRS. The experimental group (86%) group reported the use of SRS to be favorable.

Findings from this study have significant implications for nursing education. Students perceived the use of SRSs to be satisfactory. Active teaching strategies that utilize the SRS as a pedagogical tool can be effectively used to increase student participation and critical thinking. The anonymity of the student is preserved with the use of SRS and content can be more readily clarified before class ends. Findings revealed that the two most frequently reported learning styles identified by the students in both groups were preferring active experimentation and those preferring concrete experiences and reflective observation. These two learning styles are representative of today’s millennial generation of students and support the active learning student centered approach. Student today embrace technology, it behooves the instructor to work toward offering a more autonomous arena and therefore increase the student’s responsibility to their learning. It allows the instructor as well to further assess the individual critical thinking skills and readiness and for real life cases by teaching clinical judgment and decision making in a safe setting.

#8 Kenya D. Kirkendoll, PhD, MPH, RN; Carol Hall Grantham, PhD, RN; Teresa Bates, DNP, RN, Keith Sumas, Joan Cranford, EdD, RN

**Title of Abstract:** Increasing disaster preparedness & interprofessional competencies via a mock disaster drill

**Problem statement**
Man-made and natural disasters are increasing in frequency and pose a risk to the public’s health. It is imperative that health care professionals are trained in disaster preparedness in order to successfully respond to disaster events. When prelicensure health care students are exposed to active interprofessional education strategies, improvements can be gained in their communication and collaboration skills.

**Purpose**
The purpose was to implement a mock disaster drill using the Leicester Model of Interprofessional Education to increase disaster preparedness knowledge and collaborative skills among prelicensure students enrolled in health care programs at a large, urban university.

**Methodology**
Three weeks prior to the mock disaster drill about 165 students participated in a three-hour mass casualty workshop that provided training in the fundamentals of mass casualty events. The drill involved a campus based active shooter scenario that included university police, health professional students and faculty. The first interprofessional student team served as first responders; they organized an incident command post, coordinated responders, triaged victims, and transported them to the simulated emergency room. Upon arrival at the emergency room, a second interprofessional student team served as first receivers and coordinated triage and further treatment of victims.
Results and Recommendations

Student and faculty evaluations, centering on the five TeamSTEPPS skill domains, were administered following the disaster drill. There was positive feedback regarding delegation of roles and responsibilities and resource utilization. Opportunities for improvement included situation monitoring and communication. Mock disaster drills are prime learning opportunities to build sound communication and collaborative skills while working under pressure. Such interprofessional educational activities help prepare prelicensure students for future collaborative practice.

#9 Donald Johnston PhD, RN – MHS, RRT

Title of Abstract: You need to study MORE!” The Unintentional Psychological Consequences of These Five Words

As nursing students strive to meet the demands of a rigorous programs, they often make personal sacrifices in the interest of study time. One of the most common ways students carve out more time in the day is by forgoing sleep. While every college student has pulled the occasional all-nighter for an exam, nursing school presents the added challenge of preparing for clinicals two to three days per week.

After IRB approval (Protocol # 4.17.002), we replicated the Gaultney (2010) study of nonclinical (NC) college students in clinical nursing (N) students. Using the Sleep50 Survey (Spoormaker, 2005), we assessed incidence of “at-risk” for sleep disorders, as defined by the DSM-5, in clinical nursing students. Every disorder tested by the SLEEP 50 demonstrated a statistically significant increase (p < .05) for nursing students in comparison to nonclinical college students. Results as follows: OSA- NC 4 v N 10.55; Insomnia- NC 12 v N 40.37; Narcolepsy- NC 16 v N37.99; RLS- NC 8 v N 24.8; CRD- NC 7 v N 28.5 and Sleepwalking- NC 0.4 v N 2.37 Perhaps most shocking was the percentage of students at risk for nightmares-- 2% nonclinical college students versus 40.63% nursing. Clearly, something disturbing is happening to our students. What are we doing to our students when we tell them they need to study more?

Nursing faculty must be cognizant of the physical and psychological burden we place on our students in the interest of academic rigor. System-wide interventions may be needed within each university to streamline student workloads, as well as education for both students and faculty regarding the role of sleep in student health, retention and academic success.

#10 Lachel Story, PhD, RN

Title of Abstract: Flipping the Classroom

The Institute of Medicine (2011), Robert Wood Johnson Foundation (2010), and nursing leaders (Benner et al., 2010) have called for faculty to reform nursing education by changing how young nurses are taught to meet the changing landscape of healthcare and needs of new generations. Education is transitioning from the days of stagnate lectures by the ‘sage on the stage’ to classrooms where the faculty is the ‘guide on the side,’ co-learning with students in a synergistic
manner that gives the information context. Faculty are challenged to create this active learning environment with a multigenerational student body who have different learning styles and needs. Adding to the challenge is that most students also have competing demands outside the classroom including work and family obligations. Classroom time is becoming more precious as curricula become more compacted with complex information. While faculty may have numerous years of clinical and teaching experience, their experience with active learning approaches may be limited, and new faculty often completely lack classroom teaching experience all together. Though today’s classroom may bring challenges, today’s students bring a high level of creativity and energy that can enrich the learning process. Active learning approaches, including the flipped classroom, can be a beneficial approach to meet the needs of the nursing profession as well as the students. With this approach, learning occurs through action and is student-centered. The purpose of this presentation is to provide faculty with practical strategies to engage students in a rich co-learning experience. This presentation will include: 1) a brief overview of today’s learners, 2) a description of active learning strategies including the flipped classroom, and 3) specific examples that can be readily incorporated by faculty.

#11 Mary Gaffney, EdD, MSN, RN

**Title of Abstract:** *Teaching concepts related to research sampling strategies to BSN students using colored candies and Google spreadsheets: An interactive learning approach*

**Problem:** BSN students struggle to learn abstract concepts associated with research.

**Background:** Students may be ill prepared to provide evidence-based care without understanding how research influences the quality of care. To ensure students are ready for practice, they must have a working knowledge of abstract research-related concepts. Many nurse educators employ instructional strategies such as flipped classrooms and collaborative learning activities to facilitate learning. The purpose of this study was to determine if introduction of a collaborative, active learning experience could improve students’ working knowledge of research concepts.

**Methods:** Twenty-five students in an evidence-based practice course participated in an activity to develop their understanding of concepts related to sampling, including methods, size, bias, attrition, and ethical concerns. Working in groups of two, students performed common sampling strategies using colored candies to determine if the candy company reliably placed equal numbers of each color in all bags. Data from all candy samples were entered into a Google spreadsheet, then displayed on classroom monitors. Students were debriefed after completion of the activity. Transfer of knowledge was assessed using identical multiple-choice pretests and posttests. All test items were at Bloom’s revised taxonomy level of applying or analyzing. Non-parametric data were analyzed using a paired sample Wilcoxon test (level of statistical significance of p<0.05).

**Results:** Data analysis demonstrated improvement in working knowledge (p=0.0005), indicating successful transfer of knowledge. Students’ written analyses of assigned quantitative research articles reflected understanding of key concepts.
**Discussion:** Recommendations for nurse educators include the use of instructional approaches fostering student collaboration and the incorporation of hands-on classroom activities to ensure transfer of knowledge when teaching research concepts.

#12 Dr. Deborah Hopla, DNP, APRN-BC, FAANP; Dr. M. Annie Muller, DNP, APRN-BC

**Title of Abstract:** Transformational Education of APRN Students: Achieving Excellence in Outcomes for LGBTQ Populations

**Purpose:** The purpose of this research was to identify any knowledge deficits in nursing educators and Advanced Practice Registered Nursing (APRN) students before adding student learning outcomes to the curriculum about the Lesbian, Bisexual, Gay, Transgender, and Queer (LGBTQ) population. The increasing numbers of LGBTQ populations in clinical encounters requires specialized knowledge about unique physical and psychosocial needs of this population.

**Significance:** An estimated 19 million LGBTQ people, or 1:12 experiencing unique physical, psychosocial, and economic disparities. Alarming statistics report 64% being sexually assault, 61% reporting physical assault, 47% suicide rate, 19% homeless, 56% harassed on their jobs, 26% lost employment, and 78% of students harassed when identified as LGBTQ.

**Methodology:** A quantitative, convenience survey was given using a 5-point Likert scale and 10 questions about the LGBTQ population. Participants were nurse educators and nurse practitioner students in a public, rural, liberal arts university in the southeast United States. This study was conducted over a two-year period. There were fifteen faculty members and sixty students included in the study. A pre and post test measured the student learning outcomes in the second year.

**Outcomes:** Results indicated a lack of knowledge in nurse educators and nurse practitioner students. Survey results indicated 62% of the faculty and 25% of the students lacked knowledge about the LGBTQ population. An online lecture for faculty and simulation scenarios for students was developed. Lectures and simulation experiences utilized standardized patients from the drama department assisting students in meeting objectives.

**Recommendations:** Research replication in other areas of the U.S. in larger universities among faculty and graduate students would add to the current information.

**Key words:** LGBTQ, Transgender, faculty/students attitudes, LGBTQ/Transgender attitudes

#13 Jessica Marcus, DNP, RN, WHNP-BC; Lisa Cranwell-Bruce, DNP, RN, FNP-C; Modupeola Adebayo, DNP, RN; Jessica Marcus DNP, RN, WHNP-BC

**Title of Abstract:** Student Perceptions of Using Quick Response Codes to Enhance Learning During Health Assessment
Objective: To evaluate student perceptions of the use of QR codes on student learning and engagement.

Purpose: The purpose of this study was to evaluate student perceptions of using quick response (QR) codes during a health assessment activity to enhance learning.

Background: QR codes, are a two-dimensional bar code that can be used to access web-based information such as a pictures, videos, audio, or text. QR code technology has been used in many areas including nursing education. Furthermore, the use QR codes have assisted students to develop skills required for the safe management of patients in the clinical environment.

Methods: Participants were recruited from nursing students in the health assessment course. Students were provided a patient case and assessed their patients by scanning QR codes to either “see” or “hear” the assessment findings, delivered report, and discussed the patient status and rationales of assessment findings. Those students who consented to participate in the study remained for the focus group. Data was aggregated and analyzed for themes.

Results: Student’s feedback included hands on learning, use of technology, and translation into practice. They stated the QR codes enabled them to apply what they were learning in real time rather than waiting to experience it in the clinical setting. Students liked using the technology, stating it was good for visual or auditory learners, it was simple to use, and the helped them differentiate normal from abnormal. Students stated it felt as they were practicing with a “real patient” and enabled them to learn how to pull together their findings and assessment to formulate a care plan.

Conclusion: The use of QR codes brings clinical experience to the student in an easy-to-learn atmosphere. QR code technology is beneficial as it eliminates the initial stress of students learning with real patients, and may help to build confidence prior to conducting assessments on actual patients. Educators may promote more student-centered learning by introducing QR codes in place of lecture.

Key words: QR codes, technology, nursing education, health assessment

#16 Trudy Williams, PhD, RN

Title of Abstract: The effect of high-fidelity simulation and traditional didactic lecture on first semester junior, baccalaureate nursing students’ knowledge acquisition, and self-confidence using the Solomon-four research design

Nurse educators are challenged with preparing nurses to practice in complex health care settings. Unfortunately, nursing graduates often feel unprepared to meet the performance expectations placed on them by the health care industry, displaying a lack of self-confidence and knowledge.
The purpose of this study was to test the effectiveness of high-fidelity simulation (HFS) as a teaching pedagogy on first semester, junior baccalaureate nursing students (N = 98) enrolled in a historically black college and university. This study, guided by Kolb’s Experimental Learning Theory (Kolb, 1984) utilized the Solomon four research designs to test the effect of the independent variables; traditional didactic lecture and HFS, a focused respiratory physical assessment scenario intervention, on the dependent variables; knowledge acquisition and perceived self-confidence. Knowledge acquisition was measured using the Health Education System Incorporated (HESI) specialty exam and the Self-Confidence in Learning (SCIL) scale (National League for Nursing, 2005) was used to measure self-confidence. ANOVA, ANCOVA, main effects tests, t-tests, Pearson correlation coefficients and Kendall’s tau were used to test four research hypotheses. Descriptive statistics were used to summarize scores from the SCIL scale and the HESI specialty exam. However, only one hypothesis was supported. Findings revealed a statistically significant, positive correlation (r = .277, p = .030) existed between knowledge acquisition and self-confidence, indicating that as the student’s self-confidence level increased, the students’ knowledge acquisition also increased. Findings from this study have relevant implications for nursing education. The use of HFS is increasing as a popular teaching and learning pedagogy and an innovative way to increase knowledge acquisition and self-confidence in students. Study findings highlight the role of HFS in improving self-confidence and knowledge in undergraduate nursing students, challenging nurse educators to consider exposing students to this teaching pedagogy earlier, rather than later, in their matriculation through the nursing program.

#17 Wendy Likes, PhD, DNSc, APRN-BC, FAANP

Title of Abstract: Integration of Standards Across Accrediting Bodies into a Master Evaluation Plan

Significance: Accreditation ensures quality and integrity in nursing programs. Processes and structures must be operationalized for continuous self-assessment to yield successful accreditation outcomes. Development and implementation of a Master Evaluation Plan (MEP) inclusive of all standards including specialty accreditation standards can provide a comprehensive approach to planning, developing, and implementing a robust evaluation plan for multiple program assessment and improvement in preparation for successful accreditation outcomes.

Purpose: The purpose of this presentation is to describe the development and implementation of a MEP for the University of Tennessee Health Science Center (UTHSC) College of Nursing (CON).

Methodology: Lead faculty, the Academic Dean, and the Dean collaborated in the comprehensive review of both CCNE and COA accreditation standards and key elements. Overlapping content areas with similar expectations were identified. A MEP inclusive of the CCNE standards had previously been developed. COA standards and elements were cross-walked with the CCNE standards and elements and incorporated into the MEP. “Primary and secondary evaluators” were identified to conduct an assessment and evaluation on a quarterly basis throughout the year to determine that selected standards and elements were successfully met.
**Outcomes:** One MEP that encompasses both CCNE and COA standards and elements was developed for continuous assessment and evaluation of all UTHSC CON academic programs. A more efficient process has been established and provides greater opportunity to align accreditation cycles and site visits.

**Recommendations:** Success in achieving all standards for accreditation requires processes and structures that afford continuous, organized evaluation of academic programs. The integration of COA standards into an existing MEP streamlines evaluation and yields a more efficient and effective process for meeting multiple accreditation standards.

#18 Todd Tartavoulle, DNS, APRN, CNS-BC; Jessica Landry, DNP, FNP-BC

**Title of Abstract: Advocacy Training: Delivering Culturally Sensitive Care to LGBT+ Patients**

Introduction: The IOM report states LGBTQ individuals experience health disparities when compared to heterosexual peers and the type and extent of these disparities varies across age and specific orientation. The purpose of this study is to determine nursing student beliefs about LGBT+ persons, baseline knowledge about specific healthcare needs of diverse LGBT+ people, attitudes toward LGBT+ people, and how they would implement practice with LGBT+ patients.

Methods: 48 nursing students from 3 baccalaureate schools of nursing received Advocacy Training. Students were administered the Genderism and Transphobia Scale, Homonegativity Scale, and LGBTQ plan of care which included terminology pre / post training.

Results: Paired Samples T-Test was calculated and there was a significant increase in student attitude from pretest to post test score (p<.05). A McNemar test showed that there was an increase in vocabulary knowledge and a change in plan of care for LGBTQ client (p<.05). There was no changes in time between schools.

Conclusion: By beginning to build a culture of inclusion through the recognition of the unique and diverse culture of LGBT+ patients, a culture of connection can be developed to strengthen patient/provider relationships and improve mental and physical health of millions of Americans. Future research opportunities include tracking patient outcomes in clinical settings to determine if disparities are reduced.