Developing a State-Wide Teaching Academy for Undergraduate Adjunct Faculty

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Objectives:

- Identify the process/rationale for a clinical teaching academy using online modules and a single four hour simulation.
- Review training processes and instructional support for adjunct clinical faculty in the UG program.
- Examine feedback challenges clinical instructors face in clinical situations.
- Review evaluation criteria for the program.
Nationally identified Trends

• Adjunct clinical faculty, high levels of clinical expertise though often limited formal training in nursing education. (3,4)

• Skills needed include:
  a) Creating appropriate patient-student assignments
  b) Implementing best practice teaching strategies
  c) Documenting and evaluating performance
  d) Providing feedback
  e) Mentoring
Why is it so important to consider formal training for adjunct faculty?

- Preparing to meet the workforce demands
- Addressing the Nursing Faculty shortage
- Innovation and best practices to train and equip adjunct faculty
Adjunct Faculty:

• Assess, evaluate and facilitate in clinical settings.
• Integral to growth of nursing graduates entering the workforce.
• Help develop clinical reasoning and critical thinking. (1)
• Competency in clinical teaching has shown significant association with final semester success and NCLEX pass rates (2)
• Help address the nursing faculty shortage
Identified Limitations

- Time
- Resources both personnel and financial
- Training availability, expertise and sites
- Commitment
Promise of Nursing Grant

- Goal of the Project: Develop and implement a Clinical Teaching Academy that provides faculty development and instructional support to adjunct clinical faculty in the Undergraduate program.
- (This presentation will focus On the feedback portion of our grant)
Planned Clinical Teaching Academy

- The program will provide:
  a) Faculty development and instructional support to adjunct faculty in the undergraduate program
  b) Offered at the start of every semester to all adjunct undergraduate clinical faculty
  c) Mandatory attendance within 6 months of employment
  d) Using theory and evidence based approaches, the academy will serve as a hybrid training program focusing on the NLN Nurse Educator Core Competencies related to clinical teaching
Three Components of Education:

- Six on-line, asynchronous learning modules
- One four-hour face-to-face, simulation enhanced experiential leaning session with trained facilitators
- Online community of practice for on-going support
Teaching Capacity Enhanced

- Increase number of instructors trained in best practices of clinical instruction
- Increase teaching capacity in diverse clinical settings
- Improve quality/quantity of nursing graduates entering the workforce
- Improve resource access to rural campuses with minimal teaching resources
- Benefit to practice partners; skill sets transfer to mentorship and preceptorship
Outcome Measurement

• Three objectives for the grant:
  1. Develop 6 online asynchronous modules
  2. Design a four hour simulation with hands on practice
  3. Establish an online forum to build a community of practice among adjunct faculty.
Sustainability and Dissemination

- Grant funding to support initial development
- The PI will continue to lead training, further development and outcome assessments
- Consider tuition assessment in the future to continue to support the program needs
2 student Examples

- Kara and Rochelle
- Using a **BEER-C** Conversation model taught in the modules and practiced during the simulation; adjunct faculty counsel a “real” student.
  - **B**- Behavior
  - **E**- Effect
  - **E**- Expectation
  - **R**- Result
  - **C**- Collaborated/Coach
Kara
The Issue......
Counseling Session With Kara

• Kara, I noticed you have been 2 hours late in documenting your morning assessment the last two clinical days (B).
• When this happens, other team members do not have access to the most up-to-date status on your patient, which jeopardizes patient safety (E).
• The expectation is that you will document your 0800 vitals and assessment by 1000 every shift, unless an emergent issue arises, in which case you need to notify me (E).
• By providing timely documentation, we are helping to provide critical information upon which others base decisions and enhance patient safety (R).
• What are your thoughts about how to improve this moving forward? (C)
Rochelle
The Issue....
Counseling Session with Rochelle

- Rochelle, it was apparent that you were not prepared to give your patient medications today (B).
- When you are unprepared to give medications, we have to take time to look up medications, review them and it makes our medication administration late, beyond the accepted time frame (E).
- The expectation is that you are prepared to give your patient medications at least 30 minutes prior to the scheduled administration time unless an urgent situation arises, in which case you need to notify me. (E)
- By providing medications in a timely manner, it provides the patient the greatest benefit from the medication and we enhance their chance for recovery (R).
- What are your thoughts on how to better prepare for medication administration in a timely manner on future clinical days? (C)
In Summary:

• Grant focus to support UG education needs with adjunct faculty in the clinical area
• Teaching Academy designed on-line (6 modules) and 4 hour simulation
• BEER-C model used to help adjunct faculty learn and practice counseling
Questions/Comments
References


