5. What type of information does the instructor need to give to the student in the instructor-assigned/instructor-gathered method of preplanning?

Results: Patient identification information, medical diagnoses, and surgery were indicated by both faculty and students as major data (Table 1).

Discussion: Omission of important details is a potential problem in preplanning. Perhaps a written outline could be developed to help avoid omissions.

One factor not emphasized as a major item by responses was social data. In this era of cost containment resulting in shorter hospital stays, social data may become more important than ever before. For instance, discharge teaching must be started earlier; social data, such as living arrangements and significant others, are becoming increasingly important.

Conclusion

Researchers believe that the utilization of preplanning as a precursor to the writing of a nursing care plan incorporating the nursing process facilitates optimal use of clinical laboratory experience. The ultimate purpose of preplanning is to provide a better learning experience for the student, as well as to improve patient care.

The amount of information available to the student as he/she prepares in advance for the clinical experience is influenced by the method of assignment utilized. Therefore, the researchers suggest that nursing educators make informed decisions about the best method of assigning student clinical experiences for each program/course by examining the advantages and disadvantages of each available method before making clinical assignments.

References


Implementing Faculty Practice in an Atmosphere of Retrenchment

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Implementing faculty practice for the University of Southern Maine (USM) School of Nursing meant developing a model appropriate for faculty members teaching in a master's degree program and a generic and RN undergraduate program, which is delivered at seven program sites throughout a 400-mile radius. Selection of a faculty practice model should always be preceded by assessment of the school’s financial and clinical resources, faculty preparation and workload, program priorities, and administrative and community support. In addition, the faculty of the USM also had to consider how its multiprogram, multicampus structure would affect implementation of various faculty practice models. This article describes the process of developing a faculty practice model suited to the structure and resources of the USM School of Nursing.

School Structure

Until 1981, the USM School of Nursing consisted of a single, generic, undergraduate nursing program located in Portland, Maine. The need for increased access to nursing education throughout the state resulted in the expansion of the school to a statewide system with its current structure of:

(a) a graduate nursing program, a generic and RN undergraduate nursing program at USM in Portland, Maine, which is classified as a comprehensive urban university;

(b) an extension of the undergraduate nursing program to Orono which is the land grant institution and the lead campus of the University of the State of Maine system;

(c) an extension of the undergraduate program to Fort Kent which is a former teachers college, located on the Canadian border; and

(d) the establishment of the first two years of the undergraduate program at the other four campuses of the system, i.e., prerequisites required for admission to the upper division nursing major.

With the expansion of the school to other campuses, the dean and the associate dean for undergraduate affairs assumed statewide responsibilities. While the administration of the school supports the concept of faculty practice, a number of factors related to their statewide roles prevented it from being one of their top priorities. These factors included entry into practice legislation with the state university system being viewed as responsible for statewide access to baccalaureate nursing education, impact of a study on the state of the university system by a committee appointed by the governor, and an upcoming, first-time National League of Nursing accreditation review as a multiprogram, multicampus school.

Faculty Impetus

Acknowledging that the impetus for faculty practice would have to come from faculty, a colloquium on faculty practice was scheduled when faculty members from all sites and programs would be on the Portland campus. Two faculty members who had researched the literature on the subject as part of their doctoral studies were the presenters.

The first part of the colloquium traced the history of faculty in practice and discussed the benefits of faculty practice as reported in the literature. The faculty's interest and enthusiasm evidenced by their lively discussion turned to hushed silence and gloom as the potential barriers to faculty practice were presented. The faculty quickly realized that these potential barriers were a reality at the USM School of Nursing.
The barriers discussed were: (a) the excessively high workload reported by such authors as Holm (1981), Kuhn (1982), and Nichols (1985); (b) the need for doctorally prepared faculty as described by Searce (1976), Stevens (1981), and Kent (1980); (c) the excessive workload that would be created by engaging in practice while in doctoral study and/or attempting to fulfill the criteria for promotion and tenure (Diers, 1980; Ford & Kitzman 1983; Joel 1983); (d) and finally the inability of academic institutions to fund practice in a time of decreasing federal funding and shrinking enrollments (Jezek, 1980; Spero, 1980).

Implementing the Process

The chair of the Faculty Development and Research Committee encouraged the faculty not to allow these barriers to prevent them from making practice a reality. The Faculty Development and Research Committee accepted a charge from the entire faculty to begin assessing the resources of the school needed to establish a model that would address each barrier and contribute to faculty growth, rather than overwhelming faculty with excessive demands. The first step in this process was the establishment of a Faculty Practice Group with membership open to all interested faculty members.

With the vast majority of faculty members holding a master's degree as their highest earned credential and a considerable number of these faculty members currently in doctoral study, it became readily apparent that full faculty participation in practice would be a long-range goal. It was agreed that information on faculty practice would be disseminated to all faculty members, but that faculty members should be encouraged to realistically assess their own and the school's developmental priorities and enter or leave the group based on these needs.

The group agreed that underserved populations would be the preferred clients for the school's faculty practice model. Members of the Faculty Practice Group from the three campuses would work at their own sites to determine a target population for practice and meet as a school-wide group to discuss progress on the issues of workload, funding, and criteria for promotion and tenure. Joint meetings were held between the Faculty Development and Research Committee and the Peer Review Committee. Jointly, they developed new peer level guidelines for scholarly activity which included the defined scholarly practice. The chairs of the two committees met with the dean of the school of nursing and the university provost to begin negotiating for inclusion of scholarly practice in the administration's criteria for promotion, retention, and tenure. A long-range plan was developed to continue educating all levels of the university's administration regarding this issue.

As a workload agreement for the school of nursing was being drafted for inclusion in the next union contract, the chair of the Faculty Development and Research Committee met with the chair of the ad hoc workload committee. The outcome of these meetings was the inclusion of practice in the proposed workload agreement as an activity eligible for release time up to one third of a faculty member's workload. Until funding could be secured to support practice, release time would be at the dean's discretion and dependent on adequate faculty resources to meet program delivery needs. During this process, the relationship of funding to the other barriers became crystal clear. Release time and acknowledgement of scholarly practice would not present major problems for practice that supports itself or generates revenue.

Each of the three campuses identified a target population for faculty practice. Fort Kent began plans to initiate a student health service, which was not currently provided. It would seek funding from the university itself and on a fee-for-service basis. The Orono campus would help expand the existing student health service by offering health care to the dependents of married students. It would seek funding through the same mechanisms as Fort Kent. Both campuses would investigate the possibility of securing a grant to financially assist their practice.

The Portland campus identified the Southeast Asian refugees living in the Portland area as their target population. A contract for close to $1 million to fund a comprehensive health care service for this refugee population was submitted to the Health Resources and Services Administration (HRSA, USPHS). This proposal was considered for final negotiation, but it did not receive funding. A major difficulty in developing the proposal was the securing of medical support from local physicians, who appeared threatened by the concept of nursing faculty practice. The major lesson learned by the Faculty Practice Group during this process was that support for nursing practice requires education of the community in general, and physicians in particular, regarding the health care services professional nurses can provide.

Conclusion

The USM School of Nursing is yet to fully realize its goal of a self-supporting faculty practice model that contributes to faculty growth without excessive workload. It has laid the foundation for this type of model with an approach to implementation that includes taking a Gestalt view of faculty and school needs and priorities and methodically addressing potential barriers to scholarly practice by faculty members.

References


