Learning Objectives

• Describe three innovations in nursing education and the associated benefits related to student outcomes.

• Differentiate between competency based education and other models.

• Analyze teaching methods for evidence basis and outcome metrics.

• Describe skill sets needed for leadership in nursing education in the future.

Personalized Learning and the pre-frontal cortex
Synchronous vs. Asynchronous or Blended Learning

Synchronous learning is the traditional class-based, instructor led course. It often includes lecture and slides though it may include student-engaged experiences.

Asynchronous learning is a student-centered teaching method that used online learning resources to facilitate information sharing outside of the constraints of time and place.
Synchronous vs. Asynchronous or Blended Learning

Blended learning is also often referred to as the “flipped classroom” where student-driven learning is coupled with F2F engagement focused on problem solving.

Flipped Learning

A pedagogical approach

4 Pillars of Flipped Learning

- Flexible
- Learning Culture
- Intentional Content
- Professional Educator

(ﬂippedlearning.org)

Competency-Based Education (Learning)

- Students advance by demonstrating what they know and can do rather by accumulating credit hours
- Measures learning not time
- Mastery is confirmed by standardized assessments
- Students study independently with support of faculty and course mentors
Competency-Based Education (Learning)

- Students can use knowledge gained from prior, academic, or life experience to accelerate through courses with material they already know.
- The curriculum is made up of real-world competencies.
- Learning takes place when the student engages, independent of time or place.

Competency-based Education

Competencies are an integrated whole of knowledge, skills and attitudes that can be used to make adequate, effective decisions and/or take adequate, effective action in a specific setting or situation.

Competency Example

Evidence Based Practice; Foundations of Inquiry

The graduate describes basic scientific research concepts and techniques to critique current nursing research with an emphasis on the three components of EBP including patient preferences and values.

The graduate differentiates between quality improvement processes, evidence based practice and research.
Measure Learning not Time

• Time does not measure learning so why do we count hours?
• Self-paced progression
• Student-centric
  – Each student comes to the learning experience knowing different things and holding different competencies

RN to BSN Student 1 and Student 2

Student A
• Newly graduated ADN nurse; passed NCLEX; high marks on clinical capstone course; newly hired into first job but wants to continue on with BSN as soon as possible

Student B
• RN practicing over 20 years in acute care hospital; worked in various roles including direct care; care coordination; infection control; wants to continue on with BSN for career advancement

Course 1 and Course 2

• Course 1 - Health Assessment
  – Student 1 has recently established these competencies
  – Student 2 has been away from direct care for some time; has health assessment competencies to build on but may need refreshing

• Course 2 - Organizational Systems and Quality Leadership
  – Student 1 is new to practice and is just developing knowledge about leadership and quality
  – Student 2 has a wealth of practice knowledge and competencies from role experiences
Measurement

- Measured by structured assessments
- Assessments can be objective exams or performance tasks
- Assessments must be free of bias, psychometrically sound, reliable and valid as measurement tools
- Grading is separate from the process of facilitating learning and separate faculty are involved

Why competency based?

Competency – based education sets an academic bar but doesn’t insist that everyone progress at the same time or even at the same rate.
Contemporary Educational Mandate
“Promoting Greater Transparency and Accountability in Higher Education”

“What does the higher education system need to look like to serve far more students effectively?”

Transparency, Flexibility, Accountability

Transparency
• Moving from inputs: admissions selectivity, faculty qualifications, financial resources
  TOWARD
• Outputs (Meaningful student learning outcomes): Graduation rates, transfer rates, advanced degrees earned by graduates, graduates earnings
New measures
Gallup Poll of student outcomes

• Hope
• Engagement
• Wellbeing

Mentoring: The secret sauce
If an employed graduate had a professor who cared about them as a person, one who made them excited about learning, and had a mentor who encouraged them to pursue their dreams, the graduate’s odds of being engaged at work more than doubled.

Only 14% of graduates have had all three.

Flexibility
• alternative school and college calendars,
• new strategies for pacing students through schools and colleges, and
• credit for learning acquired outside of traditional courses
Strategies for Success

• Innovate and adopt new ideas that will allow for programs to scale up
  – Use technology to teach and improve personalization
  – Challenge status quo regulations that inhibit innovation
  – New clinical education models
    • Simulation

Leading in the new frontier

Use technology to teach and improve personalization

• The learning experience should be driven by student outcomes and preferences
  – Less group classroom time and more individual student time
  – Use cohorts to break up classes into “like learners” and use peer teaching and flipped models
  – Technology can highlight or differentiate learner needs as ‘cognitive’ or ‘noncognitive’

New Technology in Education

• Ebooks
• Courseware
• Analytics
• MOOCs
• Simulations
• Gaming
• LMS
• OER
• Open Source Technology
• University of People
• Mobile Technology
• Social Media
• Adaptive learning
• Khan Academy
• Others?
How to approach new model design for Clinical Education

The Coached Clinical Intensive: Start with the end in mind

• Examples
  – Hand-offs
  – Interprofessional competency
  – Prioritization skills

Key clinical behaviors framework

• Person-Centric Care and Coordination
• Therapeutic Presence & Communication
• Safety and Quality
• Evidence-Based Practice
• Teamwork and Collaborative Practice
• Informatics and Technology
• Ownership of a reflective practice
• Clinical Reasoning
• Systems thinker and Leadership

Coach reactions

[With] one on one, you can really take more time and talk things through and follow through with it...you can set a goal and really keep that goal and focus on that goal for the shift.

The twelve hours is definitely a strength. We hit the ground running on our floor..... and by 12 or 1 o'clock with the WGU student, I can sit down and update my charts. Around 2 or 3, everything has died down......we can actually sit down and talk. When students [in other programs] are gone by noon or 1, they miss that opportunity to go back and talk about everything... ask questions... look things up. I think that was a really good opportunity to make it all ‘click’.
Coach reactions

The one-on-one time with a single student is invaluable from a coaching and learning perspective. Five consecutive 12-hour shifts allows a progressive teaching/coaching/learning approach from basics to more advanced stages in various aspects of nursing. As I reflect back on my personal clinical experiences with several students under one clinical instructor, most nurses on the unit really did not want to interact with...... The clinical instructor could not be with every student during the clinical and thus had to take rotations with passing meds or performing procedures. Also, there is something to be said for having multiple patients versus just one for the clinical experience. Under the WGU coach teaching experience, I was able to involve the student in all aspects of patient care for up to four patients at a time.

Student reactions

Striving to become a competent and effective nurse has been very humbling, as every day I have been reminded of how much more I need to learn in order to help all my patients achieve their optimal health. Despite the stumbles, it was inspiring to work on a floor, where the nurses were willing to share their expertise and not make the less-experienced nurse or student feel inadequate. We each have our unique strengths as nurses as well as gaps in our knowledge. I hope that as I grow as a nurse I can share with others my strengths in a non-judgmental way, so that we can work together to elevate nursing practice and by so doing improve our patient’s lives.

Dominant Logic

- A set of assumptions rarely changed
- Structural inertia
- Deeply imbedded in the collective ethos
- Is the “legacy mindset”
- Dominant logic as a filter to knowing new things and new ways
Conventions of Education or the Dominant Logic of Education

- 65 lb of curriculum in a 20 lb bag
- GPA
- Fixed Academic Calendars
- Fixed course timeframes
- Synchronous Lectures
- Assignments
- Formative assessments
- Summative assessments
- Text books
- Prerequisites
- Others…???

Unwind Dominant Logic… by

.... Forgetting

Imagine….your innovation

- Student centric
- Uses faculty expertise differently
- Uses resources, including clinical resources differently
- Outcomes are transparent and systems are flexible
  - Student well-being, hope and engagement matter as much as standard methods of measuring outcomes!
- Partner with employers to expand resources and change your lens
Leading in new ways

- Question everything and be willing to defy dominant logic
- Embrace new definitions of faculty roles and expertise
- Redesign creatively and with abandon!
- Accept some messiness... tolerate ambiguity... embrace the nausea that comes with innovation!

What will your innovation be?

“Here’s to the crazy ones, the misfits, the rebels... The troublemakers. The round pegs in the square holes... the ones who see things differently

They’re not fond of rules... you can quote them, disagree with them, glorify or vilify them, the only thing you can’t do is ignore them

Because they change things. They push the human race forward. And while some may see them as the crazy ones, we see genius.

Because the ones that are crazy enough to think that they can change the world are the only ones who do.”

Steve Jobs