Shedding Light on the Complexities of RN-BSN Education: Synthesis & Solutions

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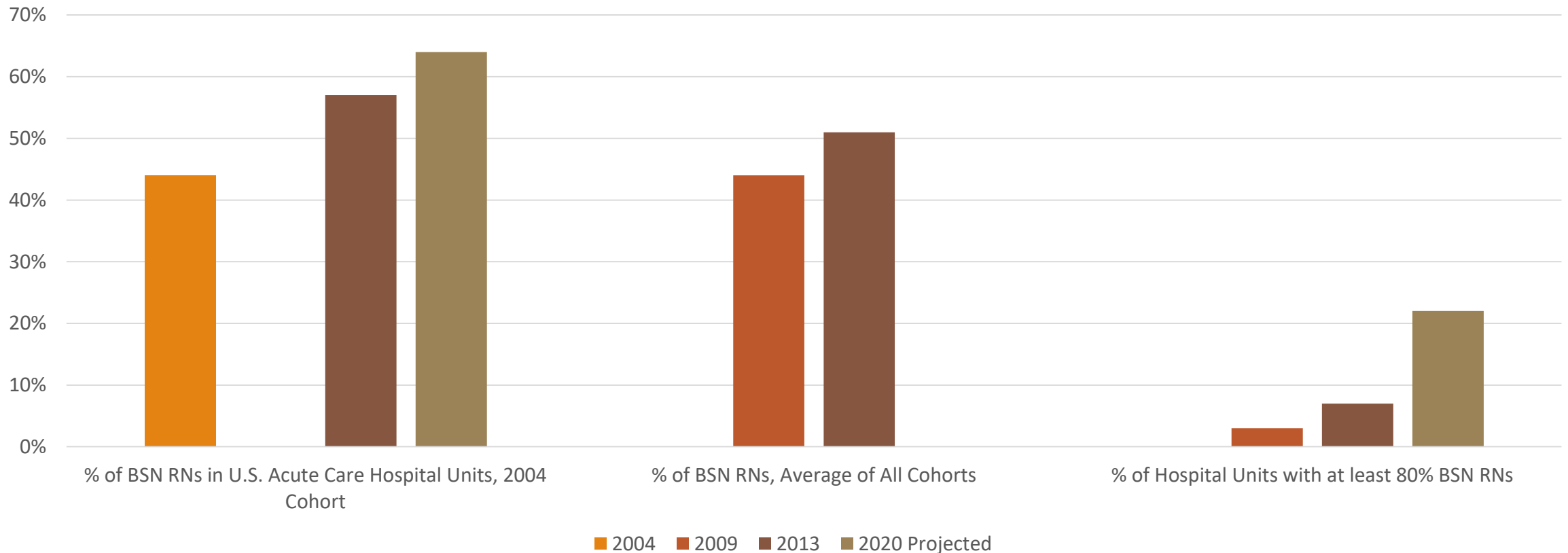**Chamberlain University**

We have been challenged to educate 80% of RNs at the BSN level by 2020. How are we doing?

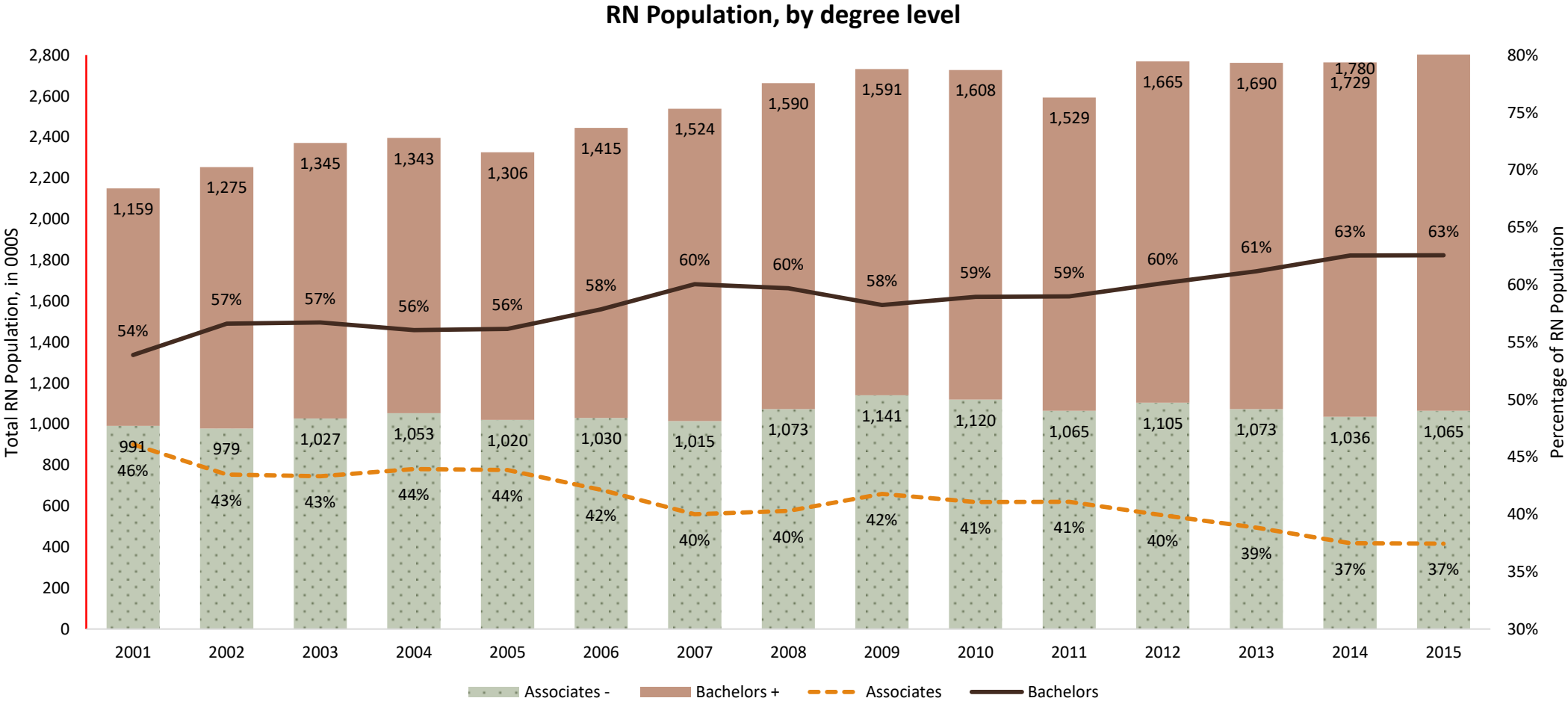What are we collectively doing well?
What is working well for *you*?

What are we collectively struggling with?
What are *you* finding difficult?

Although the proportion of RNs with a BSN has been increasing at a faster rate since 2010, it is not rising fast enough to meet the 80/20 goal.

Proportion of BSN RNs in 377 U.S. Acute Care Hospitals 2004-2013, to 2020: Avg. Annual Increase 1.3% before 2010; 1.9% since 2010

Legend: 2004 | 2009 | 2013 | 2020 Projected

Categories: % of BSN RNs in U.S. Acute Care Hospital Units, 2004 Cohort | % of BSN RNs, Average of All Cohorts | % of Hospital Units with at least 80% BSN RNs
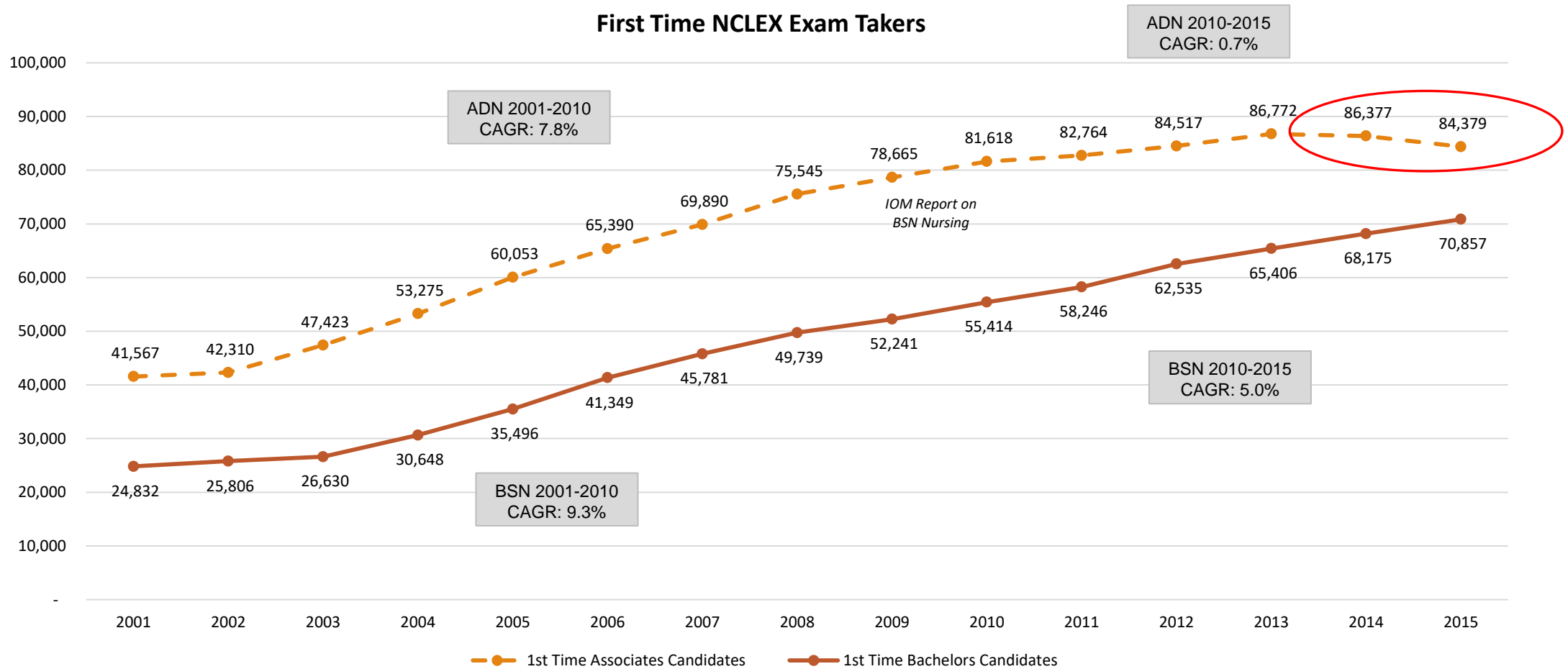
The degree level of the nursing population continues to shift towards BSN, but the total ADN population has remained relatively steady at ~1.1M nurses.
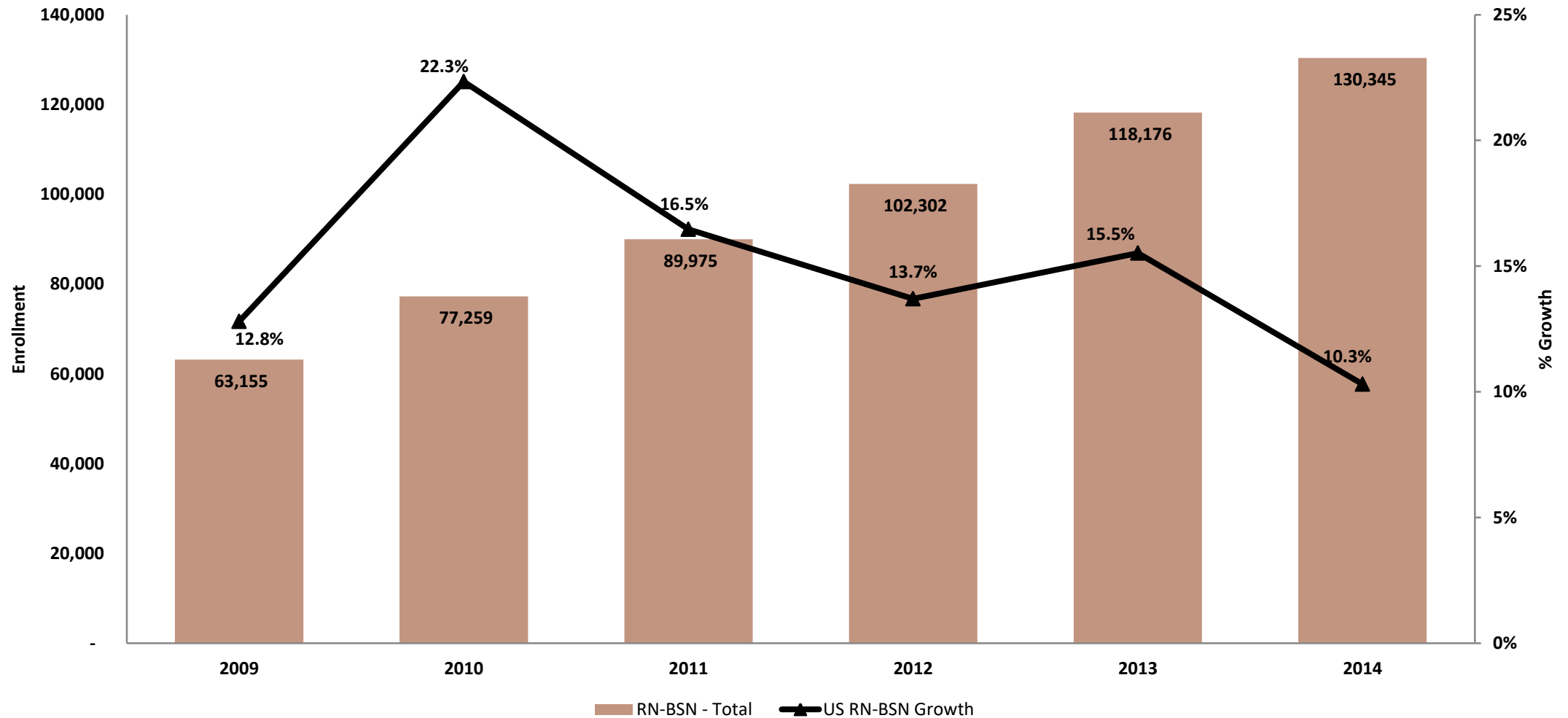
RN Population, by degree level

Total RN Population, in 000S

Percentage of RN Population

Year	Bachelors +	Associates -	Bachelors	Associates
2001	1,159	991	54%	46%
2002	1,275	979	57%	43%
2003	1,345	1,027	57%	43%
2004	1,343	1,053	56%	44%
2005	1,306	1,020	56%	44%
2006	1,415	1,030	58%	42%
2007	1,524	1,015	60%	40%
2008	1,590	1,073	60%	40%
2009	1,591	1,141	58%	42%
2010	1,608	1,120	59%	41%
2011	1,529	1,065	59%	41%
2012	1,665	1,105	60%	40%
2013	1,690	1,073	61%	39%
2014	1,780 / 1,729	1,036	63%	37%
2015	1,729	1,065	63%	37%

Legend: Associates - , Bachelors + , Associates , Bachelors

While the number of ADN graduates had grown steadily since 2001, a decline began in 2014.

First Time NCLEX Exam Takers

ADN 2010-2015
CAGR: 0.7%

ADN 2001-2010
CAGR: 7.8%

IOM Report on BSN Nursing

BSN 2010-2015
CAGR: 5.0%

BSN 2001-2010
CAGR: 9.3%

1st Time Associates Candidates (values): 41,567; 42,310; 47,423; 53,275; 60,053; 65,390; 69,890; 75,545; 78,665; 81,618; 82,764; 84,517; 86,772; 86,377; 84,379

1st Time Bachelors Candidates (values): 24,832; 25,806; 26,630; 30,648; 35,496; 41,349; 45,781; 49,739; 52,241; 55,414; 58,246; 62,535; 65,406; 68,175; 70,857

Years: 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015

Legend: - - - 1st Time Associates Candidates   ——— 1st Time Bachelors Candidates

Declining growth of ADN graduates is a threat to RN-BSN programs

Declining ADN graduates contributes to a slowdown in overall RN-BSN growth.

Legend: RN-BSN - Total | US RN-BSN Growth

Data points:
- 2009: 63,155 — 12.8%
- 2010: 77,259 — 22.3%
- 2011: 89,975 — 16.5%
- 2012: 102,302 — 13.7%
- 2013: 118,176 — 15.5%
- 2014: 130,345 — 10.3%

Common practices that help with enrollment challenges include:

Focused marketing.

Dedicated admissions specialists.

Analytics to determine market characteristics.

Tuition discounts for targeted markets.

Partnerships with service-side organizations.

Are you experiencing enrollment challenges?

What practices are you using that work?

Some schools don't have sufficient admissions, advising, or student service resources and need the support of enablers.

Using enablers is a legitimate business model that allows schools to serve a larger population of students.

Find a reputable enabler that will ensure that they can provide the right level of service for the number of students they enroll.

Challenges include:

Faculty dislike of the model.

Large class sizes.

Some enablers are better than others.

Scaling appropriately: can the enabler and the school support the students they enroll?

What is your experience with enablers?
Your challenges?

Faculty are concerned about large class sizes. Research on optimal online class sizes yields mixed results.

National Education Association (2000) survey: 31% of classes had 1-20 students, 33% had 21-40 students, & 17% had 41-700, with 19% unsure.

2005 study: For online classes sized from 16-40 students, increasing class size up to 25% did not affect grades or persistence. (Source: Morrison, D. Does class size matter in online courses? Three perspectives: The economist, instructor & student. Online Learning Insights.)

2006 study: No relationship between class size and level of interaction. (Source: Orellana, A. 2006. Class size and interaction in online courses. *The Quarterly Review of Distance Education, 7*(3), pp. 229-248.)

2009 study: No difference found by class size in students' perceptions of convenience and the use of technology; graduate students preferred smaller classes. Class size affects the educational practices used and certain outcomes. Undergraduates were more satisfied with class sizes of 21-30 students. (Source: Burruss, Billings, Brownrigg, Skiba, & Connors. 2009. Class size as related to the use of technology, educational practices, and outcomes in web-based nursing courses. *Journal of Professional Nursing, 25,* (1), pp. 33-41.)

2011 study: 12-22 students per class is optimal, depending on the discipline, syllabus, instructor's prior experience, student level, and institutional support for workload and technology assistance. (Source: Arzt, J. 2011. *Online courses and optimal class size: A complex formula*.)

What class size maximums are you dealing with?

How is it working?

Providing meaningful practice experiences is a challenge for many, & state BON regulations vary. AACN's 2012 White Paper on Expectations for Practice Experiences gives a framework.

Definition of practice experiences: "experiential learning in any setting where health care is delivered or health is influenced that allow for and require the student to integrate new practice related knowledge and skills." Also called clinical experiences, clinical learning opportunities, clinical strategies, and clinical activities.

◦ May be augmented by simulation and laboratory experiences.

Definition of patient: "recipient of nursing care or services," . . . whether "individuals, families, groups, communities, or populations."

Definition of nursing practice: "any form of nursing intervention that influences health care outcomes for patients."

The AACN task force recommendations "should be considered in their entirety." Practice experiences:

Cannot be completed solely by a student in **isolation**.

Shall include specific objectives, expected outcomes and competencies, and an **evaluation by faculty**.

Include organization/systems understanding, leadership development, evidence-based practice, information management and integration of technologies into practice, interprofessional collaboration and communication, clinical prevention and population health, comprehensive assessment, and quality improvement strategies.

Should be **differentiated** from expectations for ADN student: higher level.

May be **direct care or indirect care**.

Examples from the AACN Baccalaureate Essentials Tool Kit

Teach vulnerable populations about avoiding environmental risks.

Construct a genetic pedigree by collecting family history information to identify a risk profile. Develop and implement a plan of care.

Conduct a mock root cause analysis on a near miss and share results with staff or shared governance council, or participate in an actual Root Cause Analysis and/or Failure Mode Effects Analysis.

Develop and implement a plan for an older patient to transition from one level of care to another within the same facility and from one facility to another.

Collaborate with institutions, such as a day care center or a homeless shelter, to develop and implement policies to minimize transmission of communicable diseases.

Examples of Student Practice Projects/Outcomes

Intentional Rounds

School Health Parent Education

Infection Prevention

Evidence-Based Protocol

Community-Based Activity

Policy Creation, Change, or Implementation

Education Initiatives for Providers or Patients

Disaster/Emergency Preparedness Plans

Implement Electronic Health Record

The AACN task force did not recommend identifying a specific number of practice hours included in a program; nor did they recommend that every course must include practice experiences.

However, state boards of nursing may stipulate a specific number of practice hours.

◦ **Washington** requires at least <mark>100</mark> practice hours in RN-BSN programs.
◦ **Tennessee** does not stipulate the number of hours but wants to see clear evidence of practice hours.

What are your challenges with practice experiences?
Your best practices?

Faculty have varying levels of expertise in RN-BSN and online education, which presents a challenge.

The most common training provided to faculty is in how to use learning management systems.

Far fewer instructors receive pedagogical training in how to teach online, even though effective teaching is different in the online environment versus the traditional classroom.

One study found that 75% of instructors received technical training before teaching online, but only 20% received training in online pedagogy. Only 56% of the study participants had taken an online course as a student. Half of the study participants said the training they received was inadequate.

Source: Faculty training for online teaching. September 2004. THE Journal.

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Guidelines and best practices for online teaching, course development, active learning facilitation, and student collaboration are readily available. Are we using these best practices?

A 2006 study found that successful online training programs are led by faculty trained to teach online. Training programs are most successful when faculty:

- ✓ have **computing skills** before enrolling in the training.
- ✓ are **trained** using the course delivery system with which they will be teaching.
- ✓ have **ongoing** institutional support.
- ✓ are **motivated** to work in this environment.

What training is offered in your schools? Is it sufficient?
What else should be done?

Creating quality courses and maintaining quality across sections with different instructors can be challenging. Best practices may include:

Master courses created by experts.

Quality metrics for faculty feedback and accountability.

Regular peer and administrative review of courses and classes.

Application of standards from organizations such as Quality Matters.

Faculty orientation and ongoing training in the subject matter and in online pedagogy.

What best practices do you use for developing courses and maintaining quality of instruction?

Source: Youger, R.E., & Ahern, T.C. (Spring 2015). Is a quality course a worthy course? Designing for value and worth in online courses. Online Journal of Distance Learning Administration, XVIII, 1.

What are we doing right?

What can *you* do to improve RN-BSN education where you are?

Think of one idea you can take back to your school and begin implementing.

Questions?
Comments?