



Never stand still

Silver Linings of Covid: Implementing an Innovative Clinical Immersion Model in an Accelerated Bachelor of Science in Nursing Program

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Utica College ABSN

- 3 campuses
- Hybrid program
- 380 students
- 3 semesters/year
- 3 starts/year



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The Impact of Covid

- Traditional 16 week model until Spring 2020
 - clinical/lab/didactic concurrently
- Unable to place students in clinical settings
- Campus closed/no access to labs
- Uncertainty about the future
- 10/6 clinical immersion model implemented in Summer 2020



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From the Literature.....

- Clinical education reform needed (AACN, 2008; IOM, 2011; NLN, 2005)
- The current model for nursing education, both didactic and clinical, often fails to ensure attainment of competencies (AACN, 2019)
- New grads are not prepared for practice as registered nurses and are not equipped with the knowledge and expertise needed to effectively manage patients with complex conditions (Fowler et al., 2018)
- The traditional clinical model provides students with only a snapshot of patient care (Fowler et al., 2018)
 - No exposure to continuity and progression of patient care

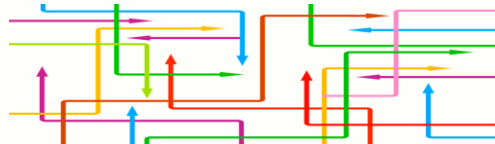
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From the Literature....

- Immersion clinical experiences recommended for all levels of nursing students (AACN, 2019)
- Students report a greater sense of belonging, more self-confidence, an increase in knowledge and skills, ability to see patient progression, and feeling of being more prepared for clinical practice (Fowler et al., 2018)
- Academic performance similar between frontloaded didactic content/clinical immersion model and traditional model. Higher rates of critical thinking were reported with immersion model (Fowler et al., 2018)
- NCLEX pass rates increased, students reported increased program effectiveness, and students felt more prepared for entry level practice after implementation of a clinical immersion model (Diefenbeck et al., 2011)

The Process



- Rolled out starting with Semester 1
 - No disruption to the other semesters
- Met as medical surgical nursing group to map the medical surgical topics and content.
 - Any duplication removed
 - More self-directed learning
- Set up an exam schedule to spread out exams collaboratively to prevent overloading students.
 - Policy for online testing implemented
- Lippincott CoursePoint added to accommodate more online learning: quizzes, case studies, vSims

Course Example: Medical-Surgical Nursing 1

16 Week

Module 1 - Fluid & Electrolytes
Module 2 - Oncologic & Allergic Disorders
Module 3 - Upper Respiratory
Module 4 - Lower Respiratory
Module 5 - Obstructive Pulmonary Disorders
Module 6 - Diabetes
Module 7 - Hypertension
Module 8 - Coronary Vascular Disorders
Module 9 - Heart Failure
Module 10 - Cardiovascular Disorders
Module 11 - Upper GI/Obesity
Module 12 - Intestinal & Rectal Disorders
Module 13 - Renal & Urologic Disorders
Module 14 - Acute & Chronic Kidney Disorders

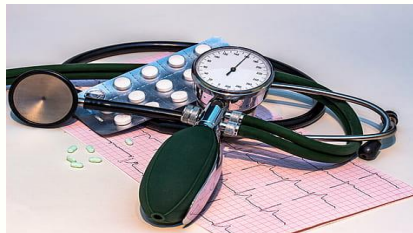
10 Week

Module 1 - Fluid & Electrolytes
Module 2 - Upper & Lower Respiratory Disorders
Module 3 - Obstructive Pulmonary Disorders
Module 4 - Diabetes
Module 5 - Hypertension, CAD, & ACS
Module 6 - Heart Failure
Module 7 - Cardiovascular Disorders
Module 8 - Upper & Lower GI/Obesity
Module 9 - Renal & Urologic Disorders
Module 10 - Acute and Chronic Kidney Disease

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Lab Changes



- Lab closed due to Covid Spring/early Summer 2020
- Virtual in Spring 2020
 - Task trainers added, new lab bags
- Hybrid Summer 2020
- Hybrid model remains 2021
 - 4 hours per week in weeks 1-10
 - Lab content and didactic content alignment
 - 5 hr simulation day at the end of the semester

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Clinical Scheduling

- Clinical begins week 11
- 42-210 hours per semester
- 8 or 12 hour clinical days
- Multiple clinical days/nights per week
- Varied clinical settings



Sample Clinical Schedule

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Final Exam	Final Exam		Psych Immersion 6		Med -Surg 12	Med-Surg 12
			Sim Day 5		Med-Surg 12	Med-Surg 12
Med-Surg 12					Med-surg 12	Med-Surg 12
	Gero 12	Gero 12		Gero 12		
	Gero 6		Psych 12	Psych 12	Psych 12	

Stakeholder Feedback



ABSN faculty

90% of faculty prefer the 10/6 model

Benefits: Feel that students are well prepared and aren't as overwhelmed, can focus on one thing at a time and don't have to worry about travel to clinical

Challenges: a lot of content for 10 weeks, issues with clinical placement, absences can impact multiple days, & students get behind easily



Clinical faculty

Students able to apply didactic and lab content in a clinical setting

Difference between models: some felt students were not as engaged & took longer to remember skills; others felt they were more focused (not worrying about exams) and the students seem a step ahead since they already know the content



Clinical partners

"This makes scheduling more flexible."

"Students come better prepared."

"Utica students are very strong and jump right in."

Managers want our students before graduation to keep them after.

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Student Feedback

- 92% of students feel that 10/6 model met their learning needs
- 85% prefer the 10/6 model over the traditional model
- Qualitative feedback:
 - I loved that it came after my didactic and lab portion of the semester, it really helped me focus on my performance and I hope it will always stay this way. In my opinion this is the most unique and strongest part of this program.
 - This course prepared me for many conditions that I was really unsure about. Learning the severity of an imbalance of electrolytes, cardiovascular, and renal issues was a great way for me learn before heading onto the med/surg unit.
 - It was amazing to see everything we learned didactically come into play in real life. These situations DO EXIST! And it was fantastic to make those connections.
 - I love the fact that our clinical are done after the didactic portion of our classes. It allows us to focus on our exams, and then applying all of our learned material to our clinical experience. It is perfect the way that it is!

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Lessons Learned

The “must
haves”

Strong clinical partnerships

Coordination of assignments and exams between
faculty members

Unintende
d benefits

Extra time to make revisions to
courses/assignments

Students & faculty are better organized

Grappling
with a
large
change

Persistence

Questioned our own decision making

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