American Association of Colleges of Nursing

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Poster Presentations

Thursday, February 26, 2015
6:15 – 7:30 p.m.
Patients' and Healthcare Providers' Perception of Stressors in Critical Care Units
Alham Aabuatiq, PhD
California State University San Bernardino
San Bernardino, California
Subject Area: Quality scholarship projects

Mentoring Student Development through Integration in a Scholarly Project: A Case Example of Student and Faculty Productivity
Ivy M. Alexander, PhD
University of Connecticut
Storrs, Connecticut
Subject Area: Quality scholarship projects

An MSN Writing Coach to Improve Student Success
Donelle M. Barnes, PhD
University of Texas at Arlington
Arlington, Texas
Subject Area: Direct care roles (e.g., CNLs and nurse educators)

Designing a Master's Scholarly Project for Translation in Nursing Education
Jan Emory, PhD
University of Arkansas
Fayetteville, Arkansas
Subject Area: Quality scholarship projects

Incorporating iPad Clinical Site Visits in a Family Nurse Practitioner Program in a Regional University Located in a Rural Community
Cheryl K. Giefer, PhD
Pittsburg State University
Pittsburg State University, Kansas
Subject Area: Quality scholarship projects
The Great, the Good, and the Bad of a Graduate Teaching Assistantship

Talyia Faye Joyner, BSN
Co-Presenter: Anita C. All, PhD
Auburn University
Montgomery, Alabama
Subject Area: Direct care roles (e.g., CNLs and nurse educators)

Nursing: Art, Science and Business! The Masters of Science in Nursing and Master of Business Administration Degree

Bobbie A. Loveless, DNP
William Carey University
Biloxi, Mississippi
Subject Area: Quality scholarship projects

The Great Race: Using Simulation for Teaching Global Health

Rebecca Meyer, PhD
California Baptist University
Riverside, California
Subject Area: Indirect care roles (e.g., public health nurses, informaticists, clinical research coordinators, and nurse administrators or managers)

Creative curriculum redesign: Pilot implementation and outcomes of quality & safety curriculum integration in two first year generalist nursing courses.

Brant J. Oliver, PhD
Co-Presenters: Mimi O'Donnell, DNP
Mertie Potter, DNP
School of Nursing, MGH Institute of Health Professions
Boston, Massachusetts
Subject Area: Quality scholarship projects

Classroom and Clinical Evaluation of Graduate Nursing Students using VIDYO®

Peggy Pelish, PhD
University of Nebraska Medical Center
Omaha, Nebraska
Subject Area: Other

Registered Nurses’ Perceptions of Health Literacy and the Effect on Patient Self-Efficacy and Perceived Health Outcomes: Discussion and Implication of Incorporating Health Literacy Content into Nursing Education Programs

Margaret A. Richey, EdD
Benedictine University
Lisle, Illinois
Subject Area: Direct care roles (e.g., CNLs and nurse educators)
Objective Simulated Clinical Assessment Experiences in a Woman's Health Program

Janice J. Twiss, PhD
University of Nebraska Medical Center
Omaha, Nebraska

Subject Area: Direct care roles (e.g., CNLs and nurse educators)
Patients' and Healthcare Providers' Perception of Stressors in Critical Care Units
Alham Aabuatiq, PhD
California State University - San Bernardino
San Bernardino, California

Alham Abuatiq, PhD, MSN, RN, Joseph Burkard, DNSc, RN, CRNA, Mary Jo Clark, PHD, RN
Purpose: The purposes of this study were to investigate intensive care patients’ perceptions of stressors, to investigate the health care provider’s perception of what constitutes a stressor from the patient’s perspective, and to describe how health care providers manage their patients’ stressors. This study is a replication of Cornock’s (1998) study of stress in the intensive care setting. Background and significance: A person’s mental state and stress level affect his or her overall wellbeing and recovery from illness and statistics suggest that stress actually causes 80% to 90% of illnesses (Sidman, 2011). Approximately 4.4 million patients require intensive care unit (ICU) treatment annually in the United States (National Quality Measures Clearinghouse. 2012). It is important to describe ICU patients’ stressful experiences in order to provide feedback to health care providers and improve the quality of care (Justic, 2000). Based on a literature review, no recent studies related to this topic have been conducted in the United States. There is a need to update and refine knowledge and clinical practice related to stress perception and management of stressors in the critical care environment. Methodology: Mixed methods design, comparative descriptive design for the quantitative section and phenomenological approach for the qualitative section. The sample included 70 ICU patients and 70 ICU health care providers. After consenting to participate in this study, a demographic form and a paper based tool, the Environmental Stressors graphic data form Questionnaire” (ESQ) (Cornock, 1998), were given to subjects. Questionnaires were filled out by subjects anonymously and returned to the researcher in the same setting. Findings: Descriptive statistics were analyzed using SPSS data analysis software, the top three most stressful items ranked by the patients included: “Being in pain”, followed by “Not Being able to sleep” and “Financial worries”; on the other hand, health care providers perceived “Being in pain”, followed by “Not being able to communicate”, and “Not being in control of yourself” as the top three stressors perceived by their patients. Communication, pain management, encouraging the presence of family, and environmental control were the major strategies in health care providers’ management of patients’ stressors. Study implications: the findings of this study are crucial in the assessment phase. ICU staff can manipulate the ICU environment to be less stressful. The findings of this study guide the development of ICU stressor control policy. Future research related to this topic should focus on investigating the financial effects on ICU patients and their recovery from critical illness, there is a need to refine the health care reimbursement system accordingly.
Mentoring Student Development through Integration in a Scholarly Project: A Case Example of Student and Faculty Productivity
Ivy M. Alexander, PhD
University of Connecticut
Storrs, Connecticut

Background: Faculty members have multiple roles to fulfill, such as teaching, mentoring, service, scholarship, and practice. Excelling in each area is challenging, especially with the increasing complexity in Master’s education. Scholarship and individual student mentoring often falls to the wayside in favor of more pressing activities. This case example explains methods used to integrate and mentor students in the "Experiences and Perceptions of Menopause and Midlife Health among Black Women" project to foster student advancement, provide individual mentoring, and increase faculty scholarly productivity. Methods: Students participated in all aspects of the project. Challenges were overcome such as scheduling, time conflicts for students, and students’ “learning curve” in applying the project methods. Overcoming challenges led to important successes. Integrating students in all aspects of the experience provided multiple opportunities for several students to participate and supported timely completion of the project. Students completed informal surveys of potential participants to identify preferences for project participation (e.g., times for meetings, participation appreciation gift, recruitment flyer), recruited participants (43 healthy black women self-identified as experiencing menopause symptoms), and assisted with conducting seven focus groups (4 in Washington, DC with 5, 2, 6, and 5 participants; 3 in New Haven, CT with 7, 8, and 10 participants). Students also assisted with data collection, data entry, data analysis, and manuscript development. Students’ reasons for electing to participate were matched with project activities. Some were interested in learning more about the research process and thus assisted with recruitment, data collection, and data analysis. Some were interested in menopause issues and assisted with literature searches for use in manuscript background and discussion sections. Others wanted to develop small research projects of their own. Individualizing participation activities made it possible to both mentor students in areas of their own interest and support the success of the overall project since students were highly motivated to complete activities that matched with their personal goals and interests. Scholarship outcomes have included student data analysis and presentation in professional conferences, posters in professional conferences, thesis projects, and independent study course credits. Summary: Integrating students into a scholarly project can be accomplished on many levels. Student involvement provides not only innovative opportunities for students to learn through hands-on experience, it also provides faculty with opportunities to provide individualized mentorship to students and assistance in completing projects and meeting scholarship requirements. In this case example project, student participation was integral for the successful completion of the 2-site design, the educational experience was enriching for the individual students who participated, and manuscripts were prepared for publication that included student and faculty authors.
Background: Graduate students’ weak writing skills contribute to low course grades and attrition from the program. Authors have described many barriers to student success including feeling isolated and overwhelmed with tasks, doubting their own abilities, lacking an effective mentor or advisor, and possessing weak technological skills. Students’ expectations of faculty members’ feedback do not coincide with expectations of faculty members. Only one article in the past five years described poor writing as a contributor to student attrition (Cone & Van Dover, 2012). Those authors created a one-unit writing course for incoming masters (MSN) students, and faculty noticed an improvement in the quality of student writing. No quantitative outcomes were reported. The MSN College of Nursing faculty of one university also identified writing skills as a major difficulty for students in the core theory and research courses where written papers were a major component of the course grade. Baseline data from the previous academic year (2013-2014) demonstrated that 15.3% (212/1,385) of MSN students had received a C, D, or F grade, or withdrew from one of the core courses, placing them at risk for program success. 

Innovation: College of Nursing administration funded one instructor to be available to all students in core courses, nine hours a week, to work with them individually on their writing skills, with the goal of combining technical writing content with faculty support and feedback. The assistance is being offered online for distance students and face-to-face for on campus students. Outcomes: In the first semester as MSN Writing Coach, this instructor has assisted 63 students with editorial advice and tutoring. Quantitative outcome data will not be available until the end of the academic year, but qualitative comments are positive. “Thank you for your encouragement and feedback. I will take it to heart and work at improving my writing.” “I cannot thank you enough for the valuable feedback you have given me. I had previously gotten feedback that I was ‘wordy’ but could not figure out how to be more concise until I read your comments.” “Thanks a lot and God bless you. I made a 93% thanks to you.”

Conclusion: Future plans include comparing data on at-risk students at the end of the first academic year of the writing program compared to baseline data, and creating live, online tutoring sessions for other writing skills such as how to organize a paper, how to synthesize ideas in a paper, and how to approach specific writing assignments in the core courses. Developing tutoring sessions will allow the writing coach to provide general information efficiently, freeing time for individualized feedback to students.
Designing a Master's Scholarly Project for Translation in Nursing Education  
Jan Emory, PhD  
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The Commission on Collegiate Nursing Education (CCNE) expects graduate nursing faculty to prepare master’s students with the skills to translate research into evidence-based actions to improve practice and ultimately healthcare outcomes. Students seeking a master’s level of preparation with a focus on education are held to the same standards for translation of research to impact health related environments. The traditional method for demonstration of the master’s program outcomes for student achievement is the scholarly project. The literature shows an increase in academically related scholarly projects in the last five years, likely spurred by the work of Benner, Sutphen, Leonard and Day in 2009. Even though the body of knowledge is growing, limited evidence was found addressing the direct impact of students’ scholarly work in improving health related outcomes and, even less evidence specific to the domain of nursing education. In this case study approach, a practical, real-world application of a scholarly project specific to nursing education was developed with integration of findings for potential improvement in curriculum design and course delivery. The purposes of this case study were to develop a scholarly inquiry project in a Master’s of Science in Nursing program for nurse educators to meet the requirement for translation of evidence expected by CCNE and to provide evidence for quality improvement in course and curriculum design. A team approach was utilized for developing the scholarly project to meet the expected learning outcomes for the master’s prepared nurse educator student and, concurrently, provide data for quality improvement of nursing curricula. The faculty team members selected portions of the scholarly project to facilitate student progress for completion in two concurrent sixteen week semesters concluding with manuscript submission to a peer reviewed journal. The project utilized a web-based survey software tool, Qualtrics, to capture quantitative and qualitative results of end-of-course evaluation reports. Courses were categorized based on program of study for generalization of findings and presented to the curriculum oversight committee for use by faculty to inform course and curriculum decisions. Programs with courses included in the surveying process were; a generic baccalaureate program, a degree completion program, a master of science in nursing program and a doctor of nursing practice program. Data collection included mean scores from student evaluations of the course, grade distributions, textbook utilization and costs, assigned readings, learning activities, methods of assessment and evaluation, and recommendations for improvement in course delivery. Descriptive statistics for the quantitative variables were calculated and displayed using a variety of methods. The qualitative component was analyzed for emerging themes. Course reports were reviewed for alignment with program outcomes. The key finding of this project demonstrates achievement of the gold standard of translating evidence in the area of nursing education with the potential to influence curriculum decision-making for improving student performance that can impact the healthcare environment. As the shift toward translation of evidence into practice environments continues, this case-study can serve as an example of a scholarly project meeting the gold standard expected by accrediting bodies for masters prepared nurse educators.
Incorporating iPad Clinical Site Visits in a Family Nurse Practitioner Program in a Regional University Located in a Rural Community  
Cheryl K. T. Giefer, PhD  
Pittsburg State University  
Pittsburg State University, Kansas

Background Information: The Pittsburg State University Irene Ransom Bradley School of Nursing prepares Family Nurse Practitioner students for advanced practice in primary care settings. The clinical sites utilized for the primary care courses include 30 Family Practice clinics in Kansas, Missouri, Oklahoma and Arkansas. Through the use of "Face Time", iPads were utilized to communicate with the students and their preceptors in the rural setting and serve to provide faculty another method of a clinical site visit. Programs and Practices: The School of Nursing is committed to the University's mission of providing undergraduate and graduate programs and services to the people of southeast Kansas, but also to others who seek the benefits offered. The PSU/FNP program is delivered as a hybrid program. The program utilizes a clinical preceptorship model which allows the FNP student the opportunity to perform clinical experiences in practicums located in the student’s home community. Description of Methods: The goals and objectives for the iPad Project included: 1) to establish and maintain communication with the Preceptor through the use of the iPad; 2) to increase the number of clinical evaluations of the Agency and Preceptor in a semester (by the Program Coordinator); 3) to increase the amount of verbal feedback the Preceptor is able to provide to the Program Coordinator; 4) to introduce “Apps for Healthcare Professionals”; 5) to enable the student to utilize the iPad for the “swivel effect” (where the practitioner flips the screen around to explain something to their patients); 6) to enable the student to document their clinical encounters in Typhon, a student tracking system. Summary Recommendations: The first cohort of 12 FNP students utilized the iPads in their clinical practicums for 11 months (during the 2013-2014 academic years) with positive feedback. The iPad Project has proven to be a valuable tool in assisting the partnership between primary care preceptors (located in a 150 mile radius of the School) and faculty. In Cohort 2, consisting of 26 students, iPads were distributed for use through July, 2015. The clinical sites utilized include rural Family Practice clinics in following states and cities: Arkansas: Gravette; Kansas: Chanute, Parsons, Iola, Lawrence, Pittsburg, Ft Scott, Olathe, Coffeyville and Baxter Springs; Missouri: Nevada, Lamar, Joplin, Neosho and Carl Junction; and Oklahoma: Bartlesville and Grove. Through the use of "Face Time", the iPads will continue to be utilized to communicate with the students and their preceptors in these Health Professional Shortage Areas. As an ongoing effort to conserve on gas mileage expenditures, the face-to-face clinical site visits are made just one time a semester (as opposed to the traditional two site visits per semester). This method of communication was utilized this past school year and proved to be very beneficial in strengthening the bonds between the preceptors and the PSU/SON Family Nurse Practitioner Coordinator. Additionally, the additional contact with the preceptor allows for a more thorough assessment of the student's clinical abilities as they progress through the program.
The Great, the Good, and the Bad of a Graduate Teaching Assistantship
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The preparation for students seeking a career in academia and other educational settings is crucial to the learning outcomes and success of future generations. Graduate teaching assistantships offer an exemplary opportunity for novice educators to obtain experience while teaching within the supervision of experienced nursing professionals. The exceptionally high standards and expectations of performance often lead to fear and anxiety as well as feelings of intimidation and uncertainty. However, many can agree, the gains of a graduate assistantship far exceed these stresses and the highly complex and flexible schedule that is often required. In this presentation, the author will identify and explain the benefits and drawbacks of a graduate assistantship but furthermore, present the need for continuation and promotion of assistantships offered by universities for the purpose of not only preparing students as future educators but ensuring students and nurses are provided with high quality teaching, furthermore resulting in successful learning and outcomes. The presentation will in conclusion present some antidotal stories of students who have or are graduate teaching assistants.
Nursing: Art, Science and Business! The Masters of Science in Nursing and Master of Business Administration Degree
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With input from nursing literature, industry standards and community of interest, the faculty of a small private university developed a dual Master of Science in Nursing (MSN) and Master of Business Administration (MBA) program. This program is a collaboration of the School of Business and the School of Nursing. The program was approved for implementation in Fall 2014, by the accrediting agency for Mississippi schools of nursing, the Mississippi Institutions of Higher Learning. The proposal for national accreditation approval is forthcoming and in accordance with the American Association of Colleges of Nursing (AACN), Commission on Collegiate Nursing Education (CCNE) requirements. The MSN-MBA program includes 53 semester hours of course work. Graduates are prepared to apply both professional nursing theory and business theory. The goal of this program is to prepare nurses for executive administrative roles that facilitate quality patient care in the increasingly complex health care industry. There are 14 graduate outcomes for the MSN-MBA program. The graduate outcomes are built on the AACN’s The Essentials of Master’s Education in Nursing as well as the competencies recommended by the American Organization of Nurse Executives. Students are admitted to the MSN-MBA program each fall and spring term. The biannual admissions process allows students to take courses in an organized sequence to facilitate progressive knowledge, competency and student success. In addition to the general admission requirements to the graduate school, each applicant must meet the following program-specific graduate admission requirements: hold a baccalaureate degree in nursing from a nationally accredited school of nursing; submit a statement of professional goals and current resume; hold a current unencumbered RN license with no pending action in any state; have an overall undergraduate GPA of 3.0 or a GPA of 2.5 on the last 30 undergraduate hours; and earn an admission evaluation score of 1000, calculated according to the following: GMAT score + [200 X undergraduate GPA] + [10 X number of years relevant work experience*] *A maximum of 10 years relevant work experience may be used. Students may complete the program-of- study in 18 months. However, the program is designed to allow students to progress through the program at an individual pace within 6 years of initial enrollment. The MSN-MBA is delivered via a hybrid format, with all MBA courses being taught online and nursing courses being taught in a hybrid format. The hybrid format used is consistent with the delivery method currently approved for the institution’s MSN program, and includes 30% face-to-face class meetings. The MSN-MBA program is generating great interest. The institution has not officially advertised the program; yet 15 students are enrolled in the Fall 2014 class. Additionally, 10 students have indicated their intent to apply for the Spring 2015 admission. Institutional support has been approved to facilitate all necessary resources, including national recruitment. Future related plans include the development of the PhD in Nursing and MBA dual degree program.
Utilizing innovative simulation ideas in the MSN program is one educational strategy to increase awareness of globalization and emerging global health issues. The use of high fidelity and low fidelity simulation suites as well as other dedicated simulation space can help students compare and contrast different approaches to health promotion, intervention programs, and healthcare outcomes on the local, national, and global level.

Background: There is an increasing interconnectedness and global interdependence of humanity which means MSN students need to have a global perspective. Variables such as cultural values, beliefs, customs, attitudes, lifestyles, and practices are important for students to examine in order to improve patient outcomes. Improving educational strategies by including techniques which target knowledge, skills, critical thinking, and affective learning related to the global burden of disease will help MSN students be aware of these and other factors affecting global health.

Objectives/Methods: By the end of the simulations, students understood how global health problems can move across borders contributing to health disparities. Students had studied the Millennium Development Goals prior to the exercise to begin their understanding of global health concerns. Students were allowed to pack a few supplies and then given instructional packets which included money, passport, and their first clue. They ‘traveled’ in teams through country specific simulation stations which included an airport/customs area, Indian taxi stand, Chinese tea ceremony, Middle Eastern bleeding/disaster patient, and an African rural health clinic.

Literature: Research has shown that active learning can stimulate a deeper level of critical thinking and integration of material. Simulation has been shown to be a realistic method of active instruction and the information gleaned is transferrable to real life situations in a safe environment. Creative ways for MSN students to learn about human migration, urbanization, global warming, pollution, financial crisis, the impacts of violence and conflicts, disaster preparedness, chronic disease, and aging of the world population are beneficial for our future nurse leaders.

Findings: Students realized the importance of communication, collaboration, and teamwork in their delivery of care in unfamiliar surroundings. Students were able to analyze effects of culture and policy on vulnerability, universal access to care, health disparities, and disease. Debriefing the different simulations was viewed as a positive experience by the students. Simulation is a valuable tool which can help students synthesize theoretical, practical, ethical, and scientific knowledge to improve healthcare outcomes locally, nationally, and globally.

Recommendations: The simulations need to be well planned ahead of time with clear learning objectives for the activities, scheduling of the simulation space, and coordination/training with actors and/or standardized patients. According to the literature, learning also occurs during debriefing, so allowing adequate time to debrief after the event is very important. If traumatic events are being simulated, it is also helpful to have a professional counselor on hand in case they are needed during and/or after the simulation.
Creative curriculum redesign: Pilot implementation and outcomes of quality & safety curriculum integration in two first year generalist nursing courses.

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Background & Significance: The Institute of Medicine (IOM) Nurse of the Future report envisions nurses as “clinician-leader-improvers” who can diagnose and improve systems of care and engage in applied healthcare improvement. This pilot project describes rapid integration of improvement science curriculum linked across two generalist level nursing courses, using a method intended to have minimal impact on organizational disruption and low impact on cost or credit burden to students. Methods: Faculty from two first year generalist nursing courses collaborated with a faculty content expert in healthcare improvement science. Overall course learning objectives, structure, and content were aligned with the new improvement science content. The content expert developed and modified an online modular learning system, the Introduction to Quality and Safety Learning Series (IQS), for implementation across both courses. The IQS series included video lectures, accompanying slide sets, supplemental materials, online quiz questions, and evaluation measures, and was designed to serve as an introductory primer upon which subsequent courses could build upon utilizing the IHI Open School Basic Certificate content. The IQS learning series was implemented sequentially in fall 2013 in the Biobehavioral Nursing course and Spring 2014 in the Nursing Process and Skills course. Testing occurred in the fall semester course and a culminating applied learning exercise occurred during the spring semester course. A clinical microsystems assessment of medical-surgical nursing student clinical rotations was performed by students and preceptors at each clinical site utilizing the Microsystem Assessment Tool (MAT). Knowledge and satisfaction outcomes were measured. Results: The IQS learning series was successfully integrated across both courses. 107 students completed the IQS modules and were assessed using quiz questions from the IQS series. Post-IQS test performance demonstrated 96.5% proficiency on basic quality & safety and clinical microsystems concepts and 84% proficiency in basic QI intervention and measurement. Perceived knowledge development across eleven competency domains improved from 12.4% competency pre-IQS to 55.4% competency post IQS (Fisher Exact Test p<0.001). Sixty-eight percent of students felt that workload was appropriate, 60% endorsed IQS series design, and 55% felt it was a valuable learning experience. Fifty students and eight preceptors completed the MAT assignment, creating a data dashboard displaying system level performance on twelve excellence characteristics across eight clinical sites. Ninety percent felt that workload was appropriate, all felt the assignment was appropriate, and 98% endorsed its effectiveness. Conclusions: The IQS and MAT learning activities were successfully implemented across two first year generalist nursing courses utilizing a collaborative approach that enabled rapid implementation without substantive burden on faculty or increased credit burden to students. Actual and perceived IQS knowledge acquisition was high, but satisfaction varied across learning domains and activities. The MAT assignment was effective and had high student satisfaction. In sum, a feasible and effective introductory learning experience was established in first year courses establishing a foundation for subsequent courses which will continue an instructional pathway across the curriculum. This approach may be applicable in various nursing education contexts where rapid and efficient implementation of applied quality and safety curriculum is needed.
The delivery of classroom content to distant/remote students in graduate nursing programs has been a challenge. Common videoconferencing technology has been used for the classroom content but has not been able to be used in a clinical setting because of privacy issues. VIDYO© offers a secure environment so that it is appropriate for use remotely in student homes to allow for classroom participation and faculty consultation within a private virtual office. The technology has a HIPAA security statement that allows for transmission of clinical encounters. As a virtual office specific site, it cannot be entered by other persons and cannot be recorded. This technology has been used for three years at the University of Nebraska Medical Center. The students and faculty have been positive in the evaluation of the transmission of classroom content. The use of this as a clinical evaluation method has had barriers which have included preceptors who are unwilling because of a lack of knowledge about the security of transmission and the inability to link through the agency internet fire walls. No families have refused to allow the transmission of their encounter to the faculty virtual office. The use of secure videoconferencing technology addresses the need for distance education that allows for students in rural and remote locations to have access to their classroom content and clinical evaluation in a flexible and cost-effective manner.
The overall purpose of this qualitative interpretative phenomenological study was to gain an understanding of nurses’ perceptions of health literacy and examine their lived experiences with patient educational materials. A basic interpretive research methodology was used to understand the meaning a phenomenon has for participants including the following: (a) how nurses’ interpret their experience, (b) how nurses’ construct their words, and (c) how nurses’ make sense of their experiences. Separate audio taped interviews were conducted based on six semi-structured guiding questions. The nurses’ education varied from ASN to BSN. Work experience varied from 2 years to 24 years. Themes identified included relationships, self-efficacy, health literacy, communication, health education, and health care resources. An aggregate meaning of health literacy was derived through nurses’ meaning segments and literature definition: Health literacy is a general breakdown of knowledge about health including an understanding and communication about healthcare needs and how to access healthcare information. The significance of this study is that it specifically discusses nurses’ lived experiences and perceptions with this phenomenon. A variety of suggestions and guidelines have been presented in this study to contribute to nurses’ understanding of health literacy and its effect on self-efficacy and perceived patient outcomes and as well as beginning the challenge of increasing health literacy in the United States. Nurses must participate and make contributions to health literacy research. Little substantive research exists in nursing literature about the components of health literacy. The findings of this study contribute to the literature on health literacy contribute to nurses’ knowledge on how health literacy impacts perceived patient health outcomes, patient education, and self-efficacy. As our health care system becomes more diverse, it will become increasingly more essential for nurses to implement skills that will help patients with problems associated with health literacy and its effect on self-efficacy and perceived health outcomes. Literature indicated an overall absence of health literacy in nursing curricula. Thus, it is essential to incorporate health literacy content into nursing programs at the undergraduate and graduate level of education. Findings of this study provided a foundation for further research and exploration of this phenomenon, adding to the cumulative body of knowledge in nursing research. Future research study should focus on continued identification of communication and patient teaching techniques that can increase health literacy and promote self-efficacy.
Simulation is an opportunity to provide as near normal clinical experiences for Advanced Practice Nurse Practitioner students to demonstrate their skills and knowledge and to acquire new knowledge. The purpose of this poster is to present a structured Objective Simulated Clinical Assessment (OSCA) program utilized in a woman’s health nurse practitioner program. Three OSCA experiences are designed with increasing complexity throughout three semesters of the student’s clinical program. A fourth experience which is optional is offered in the final capstone semester where the students are actively engaged in the OSCA with the second semester level one students. The growth and progression of the OSCA’s will be presented with examples of the types of experiences that are included in each of the three semesters to demonstrate evolving skills and knowledge. A variety of simulated experiences are utilized and examples will be presented from live simulated patient scenarios, computerized patient simulation learning, demonstration of new skills, interaction between first and second year students, role playing and gaming to name a few. The importance for OSCA’s are many and can be a successful blending of an evaluation process, in determining the students critical thinking skills, in assessing, diagnosing, and managing a variety of patients, as well as educational in providing opportunities with a simulated patient experience that the NP student may not have had an opportunity to encounter. Finding good preceptor sites is becoming more challenging with increasing enrollments, therefore the use of OSCA’s in preparing the nurse practitioner needs to be further explored.