THE LIVED EXPERIENCE OF THE TRANSITION OF THE CLINICAL NURSE EXPERT TO THE NOVICE NURSE EDUCATOR

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Outcomes

• Identify current research available regarding the transition of the clinical nurse expert to the novice nurse educator.
• Explain the three themes identified by the research of transition of the clinical nurse expert to the novice nurse educator.
• Relate to areas that need improvement in the transitioning process of the clinical nurse expert to the novice nurse educator.
Introduction

• Nurse educator shortage in United States
• Recruiting clinical nurse experts
• National League for Nursing (NLN) suggests nurse educators have a core knowledge and skills.
Problem Statement

• The purpose of this research was to describe and interpret the experience of nurses without any educational theory as they transition from the role of a clinical nurse expert to a novice nurse educator in the academic and clinical settings.
Terms

• Clinical nurse expert is defined as a RN who is able to make decisions and perform actions based on interpretation from previous situations (Benner, 2001).
Terms

• Novice nurse educator is defined as a RN with no experience in nursing education or teaching and initially lacks the understanding of the role of nursing education (Benner, 2001).
Significance of the Findings

• This research revealed the transitioning experience of the Clinical Nurse Expert to the Novice Nurse Educator.

• As a result nursing schools may need to reevaluate the benefit of hiring the Clinical Nurse Expert or offer a more extensive orientation program to the Novice Nurse Educator.
Literature Review

• References from 2005 – 2011 from Ebsco and Proquest data bases.

• Culleiton & Shellenbarger (2007) wrote how to prepare for the role of transition.

• Mc Donald (2010) wrote a concise resource of articles for the CNE contemplating a transition.
Literature Review

• Hessler & Ritchie (2005) discuss the transition process of the Generation X faculty.

• Anderson (2009) specifically looking at the transition in a BSN program.

• Anibas et al. (2009) studied the transition of using adjunct faculty / or TAS (teaching academic staff).
Literature Review

• Schriner (2007) completed an ethnographic study examining the cultural differences from clinical practice to academia.
Literature Review

- Penn et al. (2008) discusses a survey completed by the American Association of Colleges of Nursing.
- Deans and Directors of nursing schools identified number one skill set to possess by the nurse educator are teaching skills.
Literature Review

• Patricia Benner (2001)- nurse theorist, conducted a research study of beginning nurses and expert nurses utilizing the Dreyfus Model of Skill Acquisition ‘novice,’ ‘advanced beginner,’ ‘competent,’ ‘proficient,’ and ‘expert’ (pg. 13).
Methodology

• Qualitative design with a phenomenology method.
• Semi-structured audio-taped interviews.
• Allow the participants to feel free to express themselves.
Sample

- Convenience sample with informal contacts.
- N = 8 participants
Criteria

- Inclusion: BSN / MSN > 5 years experience. Teaching experience less than 2 years. No educational theory.

- Exclusion: All RN’s teaching greater than 2 years have transitioned.
Demographic Survey

Age ____________
Gender ______________
Race________________
Years practicing as a RN ____________________
Highest degree earned_______________________
Nursing Specialty _________________________
Type of nursing school which you are teaching
(Diploma, ADN, BSN)_______________________
Previous teaching experience, if any
_________________________________________
Any educational courses, please describe
_________________________________________
## Demographic Results

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<th>Category</th>
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<tr>
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<td>Gender</td>
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<td>Years as Expert</td>
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<td></td>
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<tr>
<td></td>
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Tool

- Demographic survey
- Seven interview questions
Interview Questions for Participants

1) Please describe why you wanted to make the transition from a clinical nurse educator to a novice nurse educator.

2) Please describe the process of the transition experience from clinical nurse expert to novice nurse educator.

3) Please discuss any barriers that you felt hindered your transition.
Interview Questions for Participants

4) Do you feel competent and prepared for the education role?

5) Please discuss aspects of your orientation to the clinical unit, classroom, technology, exam writing, and student evaluation.
Interview Questions for Participants

6) Discuss how you were mentored in the role of the nurse educator.

7) Describe your experience of coping with any concerns related to the transition experience.
Theme 1- Desire to Teach

• All participants wanted to teach and felt they had something to share with the profession.
• Emulate the gift given to the participant by previous educators in his own undergraduate work.
Theme 2- Additional Stress

- Not having educational theory caused additional stress expressed through the responses when describing the process, barriers and coping methods.
- Stressful, frightening, awful, scary, different, and overwhelming.
Additional Stress

• Difficulty having to utilize new skills like lecture writing, exam writing and teaching strategies.

• “the volume of stuff I needed to learn every week was extraordinary”

• Felt frustrated not knowing all the pathophysiology.
Additional Stress

• Not knowing how to understand an item analysis.

• Student evaluation was difficult. “I didn’t know what their past experiences were or if they had done catheters before. I was not given that information.”
Additional Stress

- Adjunct faculty did not understand the evaluation tool or ended up creating their own tool.
- Not given timely guidance and feedback.
Additional Stress

• Even full time novices felt, “I thought it was very difficult because there is really not hard objective criterion. I mean a lot of it is subjective, so I did find that very difficult.”
Additional Stress

- Frustrated with writing exam questions.
- Difficulty with student interaction and potential disrespect because of age difference.
- Having to “learn all this and jump right in.”
Additional Stress

• Frustrated that there was a lack of relevant information to accomplish the job.
• “no one gave me all the information”
• Grateful for any faculty development programs.
Theme 3 - Mentoring

• The novice nurse educator will feel more competent and transition more easily when provided with a solid orientation, faculty development, and consistent mentoring.
Mentoring

• A correlation between feelings of being competent and being mentored, therefore affecting the experts’ ability to cope with the stress of the role change.
Mentoring

• No adjunct faculty participated in faculty development programs.

• Some larger universities had university wide faculty development not specific to nursing.
Mentoring

• Three out of eight participants did not have a mentor and the school did not have a mentoring program.

• Correlation between the difficulty with the transition and the lack of a mentor.
Mentoring

• Feedback from those with a mentoring program.

• “It’s been wonderful, the person that is my mentor is fabulous, very approachable.”
Coping with Transition

- All stressed at first.
- Physical symptoms and weight gain.
- Positive methods to cope with the transition - setting boundaries regarding e-mail.
- Prayer and meditation.
- Met with administration to change the process for future novices.
Statements

• Correlation with mentoring:
• “I have transitioned well.”
• “I feel competent; delivery is something I am working on.”
• “At this point I feel prepared, can I say I am competent? I think I am still traveling that road.”
Significance of the Findings

• The need for additional support for the novice nurse educator with out a nursing education background.

• The expert needs to be alert to the role transition and expectation.

• Benner (2001) relates to the difficulty of the expert thinking again like a novice and expects all information given.
Suggestions

• To help with the transition ease the novice into the work load. This will help eliminate feeling “thrown in.”
• Orientation to the facility.
• Lighter teaching load.
• More guidance for adjunct faculty especially with regards to student level of competence and student evaluation.
Suggestions

• Develop a mentoring program if not already established.
• Evaluate the program is it a mentoring or merely an orientation?
• Pair an expert with a nursing education prepared nurse educator will allow for sharing of skill sets and ideas.
Barriers to Research

• Sample size and location.
• Difficult to find participants to fit the narrow inclusion criteria.
Future Research

- Narrowing the participants to only full-time or adjunct.
- Sample student population to determine perceptions of experts without nursing education.
- Study the mentee/mentor relationship and the effect on the transition process.
Conclusion

• Clinical nurse experts need to investigate the challenges presented in the role change prior to accepting the position.
• Nursing schools should develop and/or evaluate their mentoring programs.
• One on one or group education in test writing. Encourage a post Master’s in nursing education.
Conclusion

• Clinical nurse experts contribute incredible value to the nursing education process and nursing schools would be very limited without their expertise.

• Current nursing faculty please do your part on supporting the novice and encourage change for the betterment of the novice nurse educator.
Thank you
References


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