

Partners in learning: a collaborative model to increase the number of baccalaureate-prepared nurses

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Abstract:

One bachelor of science in nursing (BSN)-granting institution sought to break down the barriers that many registered nurses encounter by forming partnerships with community colleges in the state to improve access and create as seamless a transition as possible from associate degree in nursing (ADN) to BSN. The following describes the current model used by 1 school, which would not be possible without the support and dedication of the community college partners.

Keywords: nursing education | RN-BSN | associate degree in nursing

Article:

Introduction

One of the great things about nursing education is that students have options. The route one student takes to become a nurse is an individual decision and, therefore, may vary from person to person. As nurse educators, we must recognize that each avenue that a potential student might take along his or her educational journey is significant and contributes to the overall health of our nation by adding to the nursing workforce. Earning a bachelor of science in nursing (BSN) is part of many nurses' educational journeys; however, this undertaking may be viewed by some as a cumbersome step toward their overall professional goals. According to the American Association of Colleges of Nursing, there are 607 registered nurse (RN)-BSN programs in the United States (American Association of Colleges of Nursing, <http://www.aacnnursing.org/Nursing-Education>), yet barriers still exist, which prevent RNs from returning to school, such as time, lack of academic support, and lack of recognition for their prior education (Megginson, 2008). One BSN-granting institution sought to break down the barriers that many RNs encounter by forming partnerships with community colleges in the state to improve access and create as seamless a transition as possible from associate degree in nursing (ADN) to BSN. The following describes the current model used by one baccalaureate degree-granting school, as well as the results of a program survey given to students. While this

partnership is similar to others that have been reported (Sizemore, Robbins, Hoke, & Billings, 2007), there are attributes that make it different, such as the blended delivery method of both face-to-face and online teaching methods used in the courses through an innovative strategy where two courses share one time slot. In a time that completely online programs have become so prevalent, this program's strengths appear to be, according to current students, the ability to interact with faculty and colleagues face-to-face. In addition, having class in a familiar location, the community college, which also decreases costs to students, are strengths. The program would not be possible without the support and dedication of the community college partners.

Program Overview

A BSN-granting institution at a public university partnered with six community colleges in the state to provide on-site RN-BSN programs on the campuses of the community colleges. The goal of this model is to improve access for students, particularly those living in rural areas. The university has had a long history of RN-BSN education, dating back to the 1970s. It also had an established distance RN-BSN program that lasted over 25 years. The current model, implemented in 2014, built upon the strengths of the former program, mainly the off-site location, and utilized the existing RN-BSN curriculum.

The partnership includes the signing of a formal contract, which outlines the expectations of the community college and the university. The community college agrees to provide instructional space, access to a skills laboratory, free parking, a workspace for teaching faculty, and on-site library access. In addition, the community college is asked to designate an employee to serve as the contact person for the university. This person is asked to assist with recruitment of students to the RN-BSN program and to assist with student advisement, particularly as it relates to general education requirements needed to enter the program. The university agrees to provide university faculty to orient, advise, and teach students throughout their program. The university also agrees to maintain all academic records on their campus, as well as provide a contact person for the community college.

The students are admitted to the university through the regular university admissions process and progress through the program in cohorts. Cohorts vary in size but average 25 students (Table 1). Priority is given to students who graduated from the community colleges where the cohorts are being taught. The program is hybrid, meaning that it is a combination of face-to-face and online. An innovative model of delivery is utilized, in which two courses share one time slot. Therefore, students come to their respective campuses once a week; however, credit is earned for two courses. For example, students will meet face-to-face 1 week from 1 to 4 p.m. for their community health course, whereas their leadership course has online activities for the week. Faculty teaching the courses coordinate their schedules with each other and work together to ensure that the schedules support the student learning outcomes. Students are taught and advised by the university faculty.

This RN-BSN program, which currently has 256 students enrolled, offers working RNs the opportunity to earn a BSN in a convenient, usually familiar, location through a part-time plan of study. The cohort sequence is designed so that required nursing courses can be completed in three semesters. Students in this RN-BSN program are not dually enrolled in an ADN and BSN

program but rather choose to apply to the university after successfully completing their ADN. In order to begin coursework, students also have to have successfully passed the national council licensure exam for the registered nurse (NCLEX-RN). Because this program is aimed at nurses who work, it differs from a dual enrollment program in the state, called *Regionally Increasing Baccalaureate Nurses*, which is a prelicensure program aimed at high school students (Knowlton & Angel, 2017). In addition, unlike the program described by Babbo, Fought, Holk, Mulligan, and Perrone (2013) in which the community college granted the BSN, the university is the degree-granting institution and provides the faculty and other resources to implement the curriculum.

Table 1. Cohort enrollment

| Location | Date started/number of students enrolled | Date finished/number of students who graduated |
|-----------------|---|---|
| 1 | Fall 2014 35 students | Spring 2016 26 students |
| | Spring 2017 36 students | Spring 2018 33 students |
| 2 | Fall 2014 15 students | Spring 2016 15 students |
| | Fall 2016 19 students | Fall 2017 13 students |
| 3 | Spring 2015 23 students | Fall 2016 22 students |
| | Spring 2017 25 students | Spring 2018 28 students |
| 4 | Fall 2016 37 students | Fall 2017 24 students |
| | Spring 2018 19 students | in progress |
| 5 | Spring 2016 25 students | Spring 2017 22 students |
| | Fall 2017 42 students | in progress |
| 6 | Fall 2017 19 students | in progress |

Note. Students who did not graduate with their cohorts may still be enrolled but are finishing other university requirements.

The school of nursing does not have a secondary admission process for the RN-BSN program, so once a student is admitted to the university, he or she is considered a nursing major. However,

students are required to have completed an inferential statistics course and a historical perspectives course prior to beginning their nursing courses. Most students have completed these at the community college during their ADN program. Students must earn a grade of C (77 average) or better in order to progress in the program.

Although most students who choose this program want a part-time plan of study, those who desire to attend full-time may do so, but it means taking courses at two different locations. The part-time plan of study is ideal not only because it allows students to work full-time and earn an income but also because it allows them to apply new concepts to their own practice. Rush, Waldrop, Mitchell, and Dyches (2005) found that working full time while attending school led to an increased sense of professionalism. Although being employed is not a requirement for this program, the majority of students are employed full time in an acute care setting; however, employment is not tracked throughout the program.

These RN-to-BSN outreach cohorts are offered in collaboration with grant funding aimed at educational mobility, which has allowed the university to increase support services provided to the students. One of the resources provided to the students, which has proven to be extremely beneficial to both students and faculty, is the academic success advisor. Faculty are able to refer struggling students to the advisor, who can then follow up with the student at the community college in order to provide academic support and/or life coaching, as needed. Many times, the success advisor helps the student prioritize competing life demands and works with the student to develop strategies to say “no.” Often, the advisor refers students to helpful online university resources, such as Career Services, or the success advisor may provide helpful tools to students, such as information on netiquette, writing resources, or applying to graduate school. In addition, the success advisor sends out a monthly newsletter to students, which provides helpful tips, such as dealing with stress, and updates in the school. The newsletter also highlights one of the student cohorts. The success advisor has improved retention of struggling students. During the Fall 2017 semester, the success advisor had 56 encounters with students who had either self-referred for support or, more likely, been referred by faculty. During Spring 2018, the success advisor had 45 student encounters. The majority of these encounters resulted in student success as shown by students remaining in the program, or choosing to stop out for a semester, and then return. Only three students completely withdrew from the program.

The program grant also provides support for faculty to travel to and from these distance sites, textbooks for all of the courses to be housed on the community college campus, and graduate assistants to support both faculty and students. An additional graduate assistant will begin this academic year to focus specifically on students in their first semester and will be available to students during their face-to-face courses to assist with questions that may arise.

Program Survey Results

Currently enrolled RN-BSN students were surveyed in December 2017 by the program director at the university to gather more information about their experiences in the program. The online survey was completed by 87 students, which represented 43% of the enrolled RN-BSN students. The findings demonstrate that the current model, particularly the hybrid delivery, is providing a meaningful, yet manageable, learning environment for students (Table 2).

Table 2. Survey questions and responses

| Survey questions | Responses |
|---|---|
| How long have you been an RN? | 0–5 years: 48% Greater than 5 years: 52% |
| What is your age? | 18–24: 8% 25–34: 31% 35–44: 28% 45–54: 28% 55–64: 5% |
| What is your gender? | Female: 95% Male: 5% |
| Which race/ethnicity best describes you? | Asian/Pacific Islander: 1% Black or African American: 14% Hispanic: 2% White or Caucasian: 80% Multiple ethnicity/other: 2% |
| Overall, how satisfied are you with this program? (1 = <i>least satisfied</i>; 10 = <i>extremely satisfied</i>) | 85% rated satisfaction at an 8 or higher, with 35% rating it as a 10. |
| How likely is it that you would recommend this program to a friend or colleague? | 97% reported they were moderately to extremely likely to recommend the program with 58% reporting they were extremely likely. |
| Overall, how satisfied are you with the teaching experience in this program? | 92% reported they were moderately to extremely satisfied with the teaching. |
| Please tell us in your own words why you chose to enroll in this program. | Further career, attend graduate school, location, hybrid (not completely online) |
| What are the strengths of this program? | Faculty, hybrid, flexibility, location, affordability |
| What areas need improvement in this program? What changes should be made to this program in order to improve the student experience? | Difficulty setting up university e-mail, using learning management system, accessing library resources |

Why They Chose Our Program?

Students stated that they chose to return to school because they wanted to further their careers in nursing, increase their knowledge, or continue to graduate school. They were attracted to attending a program that is close to home and in a familiar location. In addition, they wanted a program that provided some face-to-face time in the classroom and was not a completely online program. Likewise, Megginson (2008) found in her qualitative study that personal goals, a desire for learning, and a desire for more career options were all incentives for ADN graduates returning to school to earn a BSN.

Strengths

Overwhelmingly, the students reported that the faculty and the support they provide are the greatest strengths of the program. Robbins and Hoke (2013) also found that RN-BSN students valued interactions with faculty, who viewed them as professionals and respected their prior knowledge. These students also reported that observing the faculty made them desire to return to school and further their education beyond the BSN.

Students also cited the hybrid delivery mode, flexibility, location, and affordability as strengths. Contrary to what some believe, students reported that the program supported their love for learning, negating the belief that the RN student is simply going through the motions to obtain a degree. An added benefit of the hybrid cohort model, as reported by students, is the opportunity to learn from other nurses and to be supported by colleagues who are going through the same experience.

Davidson, Metzger, and Lindgren (2011) found that when their RN-BSN program moved from a traditional model to a hybrid (in class and online) model, that retention and graduation rates increased to 100%. The improved retention rates were attributed to the redesigned program; student support services, especially with technology; and support from faculty and peers.

Suggestions for improvement

Students reported difficulty with navigating the university system, such as setting up e-mail accounts, utilizing the learning management system, and accessing library resources. Duffy et al. (2014) also found that students reported similar difficulties, including difficulty with technology, such as computers, which was a barrier to students starting an RN-BSN program. Although some students reported that the workload was difficult to manage, many seemed to be okay with the workload and the class meetings, as long as they were meaningful and helped advance their learning. As suggested by Duffy et al. (2014), in order to address these difficulties, a day-long new student orientation will be held before classes start to help students set up their e-mail accounts and log into their courses. The university librarian plans to conduct a library orientation session, and the success advisor will present a session on time management and stress management.

Community College Partners

This current model would not be possible without the community college partners. The community colleges provide classroom and laboratory space and assist with logistics such as Internet access, computer and projector access, and parking. However, their role has proven to be much greater than simply a provider of space. They are really the ones who are planting the seeds early in students that they will earn their BSN. These faculty are changing the culture of nursing education and are really the ones who are having those early conversations about why a BSN is important. That culture change is evident in our students. No longer do we see the resentful RN-BSN student who is angry at returning to school, but we see the student who recognizes that this is an expectation and an opportunity for career advancement and lifelong learning. In addition, out of the 87 students who completed the program survey, only 11 stated that their employer was mandating that they return to school.

Conclusion

The 80/20 goal by 2020 (Institute of Medicine [IOM], 2011) is fast approaching; therefore, it is important that nurse educators continue to create opportunities for RNs to return to school to earn their BSNs. While flexibility and manageability are desired by students, the RN-BSN student is willing to put in the effort it takes to earn the BSN. Nurse educators can improve RN-BSN programs by seeking input from the ADN-granting institutions, who are mentoring their graduates to further their educations. Working collaboratively, nurse educators in different settings can help reach the goal of a better educated nursing workforce (IOM, 2010).

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