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Nurse Success: A Faculty Intervention to Help Students Realize their Goals

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Nursing school requires students to be able to analyze and apply their learning in the classroom, as well as to real life situations. For various reasons, many students are not always ready or prepared to demonstrate that they can comprehend and apply their learning. At Piedmont Virginia Community College (PVCC), the nursing faculty strives to meet the teaching needs of all of our students. For that reason in Spring 2011, a group of five nursing faculty members initiated a formal mentoring program: Nurse Success. We hoped to address some of the issues preventing our students from being successful.

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The nursing faculty’s knowledge and experience paves the way for successful student counseling sessions. This rapport-building lasts throughout the student’s time in their nursing program. Cahill (1996, p. 795) emphasizes what many nursing faculty observe and experience in their years of teaching; mentoring relationships are time intensive efforts which require an investment by both mentee and mentor to be successful. Research in the field of nursing indicates that a lack of social connection, limited financial aid resources, and a lack of faculty support and commitment lead to high attrition rates especially among African American nursing students (Etowa, Foster, Vukie, Wittstock & Youden, 2005; Hassouneh-Phillips & Beckett, 2004). At PVCC, these factors not only affect our minority students but many other students who attend our community college program. Ofori and Charlton (2002, p.512) found in their study of the factors which influence the academic performance of nursing students that “seeking academic support had the greatest direct effect on academic performance.” Furthermore, Montes-Berges & Augusto (2007) note that nursing curriculums should also include supportive supervision and mentorship.

Nurse Success was introduced at PVCC in Spring 2011 to support students at risk of failing a nursing course. Historically, we find that these students are often less likely to seek out help from faculty, have financial or personal issues, or appear to be isolated from their peers. Additionally, our experiences with these at-risk students show that they are unlikely to pass the National Council Licensing Examination (NCLEX), the exam that all nursing students must pass in order to become a registered nurse. This exam has recently become more challenging, requiring a higher passing score and integrating more application questions (NCLEX 2013).
Each Nurse Success faculty mentors accepts up to 10 student-mentees who are assigned at the discretion of the Nurse Success program coordinator. Faculty mentors do not have any direct grading or supervisory role with their assigned students. This exclusive focus on the mentoring relationship allows students more opportunities to obtain guidance without an accompanying concern of grades or formal evaluations.

When Nursing Success was developed, written and verbal guidelines were constructed and reviewed with each nursing faculty mentor. Letters were sent to high risk students who met one or more of the following criteria: achieving a final class grade of 75% (passing grade) to 80% in the previous semester; readmission into the program after a class failure; entering the program as a new transfer student; or by direct nursing faculty referrals. In Fall 2012, the passing grade in nursing courses was changed to 80% in keeping with the standards of the majority of Virginia Community College System (VCCS) nursing programs.

In the initial meeting between a nursing faculty mentor and student-mentee, student and faculty concerns are addressed in addition to any other reports by clinical or academic instructors. Some of the topics typically emphasized include struggles with time management, personal or family concerns with finances, child-care challenges, marital or illness-related issues, lack of social supports, ineffective study habits and skills, limited testing strategies, testing anxiety, and/or undiagnosed or untreated learning disabilities.

The first meeting also entails a discussion of the Nurse Success basic guidelines and other resources within the college that may be helpful to the student. Faculty mentors work with the student-mentee to adapt Nurse Success to fit the student’s individual needs. For example, some students feel that weekly emails and one monthly face-to-face contact is adequate, while others prefer more frequent contacts. If the faculty mentor feels more time is needed, this suggestion is also made to the student.

Nurse Success completed its third semester in Spring 2013. By Fall 2012, all 10 of PVCC’s nursing faculty were volunteering to serve as Nurse Success mentors. At least two thirds of the high risk nursing students who have been offered the opportunity to participate in Nurse Success remained active in their contact and communication with their faculty mentors. Faculty has expressed personal satisfaction in working with these at-risk students, helping them to identify their trouble areas and working to find solutions together.

Individual academic and clinical faculty members note an overall improvement in class engagement, student responsibility and academic success from the Nurse Success mentees. All Nurse Success mentees, even those who have not been successful, have expressed verbal appreciation for the efforts of the faculty in encouraging them in the program.

The example of one student, “David,” is instructive in that his background and particular challenges highlight the ways in which Nurse Success helps students to remain in their academic program and succeed:
David, a second year nursing student, had many stressors indicating that he could benefit from faculty mentoring. David was in his early 30’s. He had struggled for many years to find his career path, was the first person in his family to attend any college and described himself as having both “high anxiety” and a “real fear of failure”. Additionally, David worked 30+ hours/week at the hospital as a patient technician. In the second semester of the nursing program (Spring 2011), David scored below an 80% average in the first medical-surgical nursing class. When offered a Nurse Success faculty mentor, David excitedly agreed to participate in the program.

For a student such as David, the weekly meetings allowed him focus on key areas of concern:

> In David’s first Nurse Success faculty meeting, the guidelines were reviewed. The faculty mentor asked David what particular issues he wanted to address in their meetings. David requested meeting weekly with his mentor; and he expressed a desire to focus primarily on time management, decreasing test anxiety, and improving test taking strategies.

The example of David’s experiences highlights some of the relevant impacts of Nurse Success:

> David made a number of changes during the year he participated in Nurse Success. He began to work less than 24 hours each week, and he used his vacation time to study when a test approached. He also established a study schedule; set limits on his participation in study groups if his peers were unprepared; he used NCLEX preparation materials and outside references to prepare for tests; and he sought out faculty in their office hours to review course content.

Nurse Success helped our representative student David to achieve his academic and professional goals:

> David succeeded beyond his expectations in the nursing program. Throughout his second year of the program, David’s grades were in the A and B range (above an 85%). He was offered two, new graduate nursing positions, was accepted into a competitive, university RN-BSN program for Fall 2013, and he passed his NCLEX on his first attempt.

Reflections on some of the successes and challenges of Nurse Success yield the following observations. Not all faculty participants are consistent in following the Nurse Success guidelines for contacting and meeting regularly with their assigned students. Similarly, not all students are consistent in keeping appointments with their faculty mentors despite multiple reminder emails and phone calls. Occasionally, faculty mentors and student-mentees are not a good match and are reassigned. A student can also be reassigned a new mentor if, in a future semester, that faculty member is scheduled to be the student’s clinical instructor.

As noted through students’ responses and in David’s story, students express that they enjoy having a relationship with a faculty member who is aware of and
following their progress throughout the semester. One student stated, “Thanks for meeting with me and going over my exam. It was really helpful to see where I made errors and also to see that I need to take my time and focus on what I am doing.” Another student shared, “I passed!!!! Thank you both for your encouraging words on graduation. You both will never really know how much that meant!!.”

Future plans for Nurse Success include assigning mentors to first year students admitted from the waiting list. This student population consistently struggles to complete the program at PVCC. We also plan to undertake a formal, quantitative study to confirm our observations from the first three semesters of Nurse Success. Structured support and assistance will be provided to faculty mentors during the semester through monthly follow-up meetings. Faculty members will also provide non-credit, optional, small group seminars open to all students to address the most common problems that result in our students becoming high-risk or failing out of the program entirely. These seminars will focus on topics such as improving time management skills, analyzing and applying course materials, developing test-taking strategies, decreasing testing anxieties, and recognizing when a referral for professional mental health is needed.

As Timmins & Kaliszer (2002) emphasize, issues related to both academic and clinical performance in a program of nursing contribute to increased stress in students. Our experiences at PVCC have shown this to be true. However, we also observe that even those students who are less prepared to tackle the academic component or who have more personal stress, benefit from a mentoring relationship with a nursing faculty member and can be both successful in completing the nursing program and in passing NCLEX.
REFERENCES


APPENDIX

Nurse Success Faculty Advisors

Mission:

Nurse Success assists our readmitted, LPN-RN transition, and low performing students as well as those students admitted off our waiting list and requesting academic supervision to remain and succeed in the nursing program. Students who are readmitted into the nursing program or are in the LPN-RN Transition program are required to be part of Nurse Success. A low performing student is one who has scored less than an 82% in a required nursing course and is offered the opportunity to join Nurse Success.

Role:

To work with the individual student to identify areas of concern and help him or her to improve study skills, time management behaviors, and address their barriers to success.

Nurse Success mentors are not responsible for fixing the student’s problems; our central areas of responsibility are to listen, to observe the student’s academic progress, and to refer the student to appropriate PVCC resources, if needed.

Faculty Advisor Basics:

• Minimum of one face to face meeting per month with the student.
• Weekly or biweekly email note to check in with the student. *It is the student’s responsibility to let us know if issues arise between contacts.*
• Monitoring the student’s academic progress throughout the semester. *Obtaining access to student’s grades is a necessary step in this process. Checking on quiz and test scores is helpful as it gives us something concrete to focus on in our meetings with the student.*
• Helping the student to identify problem areas: time management, poor study skills, attention issues, test anxiety or personal problems interfering with studying.
• Referring students to other resources available to them in the College such as Early Advantage, Financial Aid, Disabilities Specialist or the Librarian.

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