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# Report from Like Schools
# 2015 Spring Annual Meeting

**Group:**     Private Colleges/Universities without an AHC

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**Agenda:**
1. Payment for Pre licensure and APRN Clinical Sites
2. APRN Clinical Issues
   - 3 "P's" before clinical.
   - Clinical immersion prior to graduation.
   - What are programs doing?
   - How are APRN programs organized?

3. Role of simulation to build competencies for APRNs
4. Participation in all-faculty meetings
   - Do faculty attend?
   - Do they have trouble obtaining a quorum?
   - Does anyone use a senate-model within nursing?
   - Or some other representation model?

**Notes:**

1. Payment for Pre-licensure and APRN Clinical Sites.

   - Concern is that costs ultimately get passed on to students and that payment to sites is a self-propelling cycle.
   - One strategy to address the pressures put on schools by clinical sites has been to create a collaborative among schools, which increases communication. This type of collaborative has led to a pact among area schools that if they do make a change in policy they will notify the other schools.
   - Schools are looking at other awards/recognitions for preceptors/sites.

2. APRN Clinical Issues.

   - Almost all schools represented in the discussion had designed the curriculum so that the three P courses are placed prior to any clinical coursework. Several schools indicated they were requiring an immersion prior to graduation.

3. Role of simulation to build competencies for both baccalaureate and graduate students, particularly APRNs.

- There are an increasing number of outcome-based simulations developed for medical education (via the AAMC) and are available online. These have been found to be relevant for APRN students and also are good opportunities for IPE.
- Medical schools are moving to competency-based education and testing so that they are now seeking to use the nursing school's simulation lab.
- A variety of staffing models for the simulation labs exist. Schools have identified the need for nurse faculty involvement in the design of the simulations and the debriefing process.
- Distance programs are primarily using case studies and discussions for online courses.

4. Strategies to increase faculty participation in meetings, particularly when have multiple campuses.

- Fundamental issue is why are faculty not interested in being engaged or interested in self-governance?; one recommendation was to have a faculty retreat or conduct a survey to identify and address underlying issues.
- Videoconferencing and dedicated times for meetings.
- Rotate days of week; record meetings; faculty participation is part of the promotion criteria and performance appraisal process.
- Establish guiding principles for participation, submission of agenda items, proposals, etc.

5. Inclusion of students with diverse disabilities and how have schools accommodated learning opportunities?

- Identify the essential abilities for the nurse in a foundational document.
- Define what service animals are and where they are allowed to go in contrast to companion animals. Service animals can be dogs or miniature horses; each is used/recognized for different needs and cultures.
- Notify sites and individuals prior to service animal going to a clinical setting.
- Use of service animals applies to students and faculty.

6. How do programs perform student clinical assessments/evaluations, particularly for distance programs?

- Virtual site visits, videoconferencing, skype, faculty person assigned to each course/clinical group and face-to face-visits.

7. Formula for teaching units/faculty workload for traditional, online, clinical experiences.

- Time did not allow for in-depth discussion of this topic. It was recommended that this discussion could be continued through the collaborative community and/or added to the topic list for the fall meeting discussion.