

Full Length Research Paper

An evaluation of mentorship and management activities within an accelerated baccalaureate nursing programme

*Kelsey Laura, Amelia Chow, Cameron Vergara and Karthryn E. Russell

School of Nursing, Columbia University, New York City, New York. Email: laura.kelsey@columbia.edu

Accepted 25 April, 2015

Accelerated second-degree baccalaureate nursing programs are a common feature in schools of nursing, therefore it is essential that schools of nursing examine the attributes of these programs and these graduates as they transition into practice. It was found that accelerated students assume leadership roles in the nursing workforce and benefit from continued peer mentorship post-graduation. Graduates expressed the preference that accelerated students form a separate cohort, rather than being integrated with basic baccalaureate students for upper division nursing courses. Faculty perceived the need for some adaptation of pedagogical approaches that reflect the needs of these more advanced learners.

Keywords: Baccalaureate nursing, nursing program, leadership and mentorship.

INTRODUCTION

An accelerated second-degree Registered Nurse (RN) baccalaureate program was introduced by a major east coast university School of Nursing (SON) in 1991. The program is three academic semesters in length, scheduled over one full calendar year. The 69 credit accelerated baccalaureate program (ABP) design is typical of such programs enacted widely across the country over the past several decades (Caldwell et al., 2010; Miklancic and Davis, 2005; Schreier et al., 2009; Suplee and Glasgow, 2008). Accelerated students begin their program during the summer, which is divided into two sessions. Summer classes include courses in nursing perspectives, mathematics for healthcare, health assessment, fundamentals of nursing practice and nutrition, for a total of 19 credit hours. In the fall and spring semesters, accelerated students are enrolled in nursing classes alongside upper-division baccalaureate degree students and graduate with them in May.

The SON has been the recipient of Robert Wood Johnson Foundation (RWJF) New Careers in Nursing scholarship funds over the past five years. These funds are provided to increase the number of nursing graduates in the ABP, and to increase the diversity of nursing professionals. RWJF scholars are selected based on their prior academic achievement and personal profiles.

The RWJF scholars receive individual mentorship that extends beyond the typical avenues of

student support and counselling. Their education experience is also enhanced with focused leadership development activities given the understanding that leadership identity development is seen as a part of becoming an expert nurse (Scott and Miles, 2013).

The SON conducted a survey in order to assess the effectiveness of the mentorship strategies as perceived by the RWJF scholarship graduates, and the workforce impact that stemmed from the focus on leadership development. A complementary objective was to evaluate elements of the program design, specifically, perceptions of the value and challenges related to the integration of the basic and accelerated students in selected courses. Findings from this assessment can be used by other SONs as they consider ways and means of promoting the confidence and competence of accelerated baccalaureate RN program graduates as they transition to the nursing workforce.

Literature Review

Applicants to second-degree nursing programs have certain characteristics that set them apart from generic RN baccalaureate students. The applicants are typically older (given that they have already completed a first degree), married, and more likely to be employed while

enrolled (Beal, 2007; Cangelosi and Whitt, 2005). Many of the applicants hold first degrees in the biological or social sciences (Lyon et al., 2010, Meyer et al. 2006; Penprase and Koczara, 2009). The enrolment of men has been increasing over time (Siler et al., 2008).

Allen et al (2010) note that accelerated programs have proven attractive to students who have previously considered nursing as a career, to relatively new graduates who have had difficulty finding employment related to their degree, and to employed individuals who are discouraged with the current focus of their work. Accelerated programs are attractive because of the opportunities available in nursing, the possibility of finding meaning in the nature of the work, and the shorter duration of the programs (Meyer et al., 2006; Raines, 2011).

A few studies have examined faculty perceptions and expectations of accelerated students (Lockwood et al., 2009). The potential for leadership is a common theme. D'Antonio, et al. (2010) specifically note that these students demonstrated creative and assertive approaches (leadership oriented) to problematic clinical encounters to a greater degree than generic learners given that the accelerated students could call upon their wider social experience to anticipate challenges and solutions. Hegge and Hallman (2008) expressed the firm opinion that professionalism and prior leadership experiences in previous employment roles can be readily transferred to experiences encountered in the nursing context. Lekan et al. (2010) provided an example of an integrated instructional approach designed to develop these clinical leadership skills. Leadership potential extends to the workplace environment following graduation. Martin et al. (2012) remarked that transformational leadership competencies are essential as nurses become managers of change within healthcare organizations, where they will be working within inter-professional, multidisciplinary, and collaborative health care teams (MacPhee et al., 2011; Adeniran et al., 2012).

The RWJF's focus on mentorship was informed by the body of evidence that mentoring is important for the recruitment and retention of qualified applicants, their career progression, and leadership development (Nick et al., 2012; Robert Wood Johnson Foundation, 2009). Evaluations of the outcomes of accelerated nursing education programs reported in the literature typically included comments from graduates that affirm that a closer faculty/student relationship could have been helpful in making the transition to the new nursing role and identity (Kemsley et al., 2011). Graduates noted that it was empowering when faculty members helped them to identify the connections between previous life experiences and the new experiences in nursing (Cangelosi, 2007). The Institute of Medicine's (2010) report on the future of nursing recommends that nursing programs prepare and enable nurses to lead change to

advance healthcare. Mentorship is one way to strengthen the nursing workforce, promote high quality care and improve patient outcomes. Mentorship strategies for the RWJF program were based on the evaluation of effectiveness of various approaches implemented by the SON in other contexts (Escallier and Fullerton, 2009).

METHODS

The mentorship program included individualized support from the Project Director aimed at identifying any issues that presented a challenge to enrollment and progression in the program of study. In addition, each student was surveyed concerning his/her preferences for ways and means of additional mentorship support, and plans were made for meeting these preferences. The students met once/twice each month with the Program Director to discuss their progress and issues of concern.

Leadership development was initiated early in the program during a two day workshop and repeated each year for the scholars selected in the relevant academic year. Components of the leadership program included participatory workshops conducted over the academic year focused on the leadership skills necessary for provision of healthcare services in both inpatient and community based healthcare settings. A special emphasis was placed on skills such as interpersonal communication, presentation and public speaking, empowerment, vision and creativity, and professional involvement.

A graduate survey was conducted in alignment with the SON evaluation protocol (Escallier and Fullerton, 2012). A mixed-method survey instrument was designed by the authors. The instrument solicited socio-demographic information about respondents, and their experiences since transition into the nursing workforce. Open-ended questions allowed narrative (qualitative) responses about the respondents' experiences as an RWJF scholar, the program adaptations and interventions related to leadership and mentorship, and their potential effect on the experience of RWJF graduates since entry into the nursing workforce. Scholar-graduates' opinions were solicited about the benefits and drawbacks of their immersion into the basic baccalaureate nursing courses, and their perceptions of the value of establishing a parallel cohort comprised only of accelerated students.

Faculty were asked to think about basic and accelerated students enrolled in the classes that they taught. They were asked to offer five adjectives that they believed best characterized the accelerated baccalaureate student, and to describe the type of support that the faculty member expected to provide to the accelerated students that differed from the support typically provided to all other students.

The study was exempt from institutional review board approval as it was considered part of the SON's alumni assessment. Participation was voluntary; return of the survey was considered consent to participate. Surveys were sent by electronic mail to all 22 RWJF Scholar graduates from the five academic year cohorts. Follow-up phone calls or e-mails were sent to late responders. A 45% (10 of 22) response rate was achieved. Six faculty provided responses concerning their perceptions of these students.

Narrative responses from both students and faculty were reviewed for the emergence of themes related to the purpose of the study, i.e., the ways in which the enrichment of the RWJF scholar's education program with specific leadership and mentorship activities and experiences was perceived to affect the ease of transition into the workforce, and perceptions of the program design. Narrative responses were independently reviewed by the co-authors, and interpretations mutually confirmed.

RESULTS AND DISCUSSION

This RWJF survey focused on the very few scholars in the past five years who were recipients of this award in the SON. These 22 graduates are a very small subset of the 850 accelerated students who have enrolled in the ABP over 22 years. We had anticipated that the informed opinion of each of these exceptional graduates would be of high value in the assessment of the program components (leadership, mentorship, cohort style) so that inference might be drawn about program redesign for the ABP. Therefore, the limited response rate was discouraging, and not explained by either demographic or academic differences between responders and non-responders.

Respondents who provided answers to demographic questions indicated an age range from 24 through 43 (5 male, 3 female). They were of Caucasian (n=2), African-American (n=2), Asian (n=2) and Latino (n=1) ethnicity. All had passed the NCLEX-RN examination, the majority on their first attempt. They held nursing staff positions in a variety of clinical settings; having secured those positions no later than six months following graduation. Each of the respondents indicated that their employers were aware of the accelerated design of the nursing program. Most of the respondents had plans for continuing professional nursing education through graduate studies.

The reasons for choosing nursing as a second career were varied, but respondents indicated that the holistic nature of nursing (i.e., finding meaning in work) (8 responses) and the opportunities available in the profession (5 responses) were major influences. The shorter duration of the program was also seen as an advantage.

Program evaluation ratings were uniformly positive (a rating of "very well" or "well" on a 5-point Likert-like scale) concerning the program's ability to prepare them to practice safely as a registered professional nurse, and on the effectiveness of both the leadership and mentorship strategies that were elements of the RWJF scholar program. There were only very few suggestions for improvement in either program element, most comments indicating the value of these enhancement activities and requesting that "more of the same" be incorporated. Two respondents indicated that the program could have nurtured specialty interests, using a clinical or capstone experience that might also have been perceived by the potential employer as an ideal clinical placement for the new graduate. Another suggested that encouragement to attend national meetings of the profession would have enhanced the nursing identity.

Respondents expressed the opinion that the one-year program design was "just about enough" time to prepare them for the professional nursing role; but several suggested that seminars and workshops following graduation might have helped them to make the transition from student to professional nurse. They also suggested that peer mentoring programs and support groups established during the program should continue beyond graduation via a social networking medium.

Graduates were most responsive to the query about the program's design in which certain classes are shared with basic students. There was support for both an inclusive and exclusive cohort design. Illustrative comments include:

I think accelerated students should form their own cohorts; 98% of accelerated students were men and women of like minds, matured minds, many have families of their own, have been there done that, an assemblage of men and women of diverse educational background with wealth of experience in life... On the other hand, the generic BSN were mainly young boys and girls, many fresh from high school, no life experience at all...

At the end of the programs, we are all going to be nurses, and putting us to share classes with basic BSN students makes us communicate and deal with them ... if you have your own cohort of accelerated students, you tend to get too comfortable in that group.

Accelerated students should have their own cohort because 1) they have an intense course with pressure which general BSN students do not have; 2) accelerated students are more serious and more aggressive in finishing the course and finding a job; 3) accelerated students' course material should be planned differently than the general BSN student...

I found that the majority of student nurses in the accelerated program had held professional careers previously. Due to this, maturity levels, professional experiences and goals seemed to be much different between 1 and 2 year classes. ... Maybe it's good learning to navigate through school with people that are

at multiple stages of professional life, student life and otherwise because we'll be dealing with this in nursing every day.

Faculty indicated that accelerated students were *motivated, experienced, mature, self-directed, and focused*, but also *stressed, and entitled/demanding*.

Faculty expressed that accelerated students required more flexibility and accommodation for other life pressures and events, but less support for development of time-management, test-taking and writing skills.

Despite the limitations of this small cohort study, the findings confirm the experiences reported by others in a broad variety of geographic and practice settings that accelerated students enter seamlessly into the nursing workforce, that their peers, supervisors and employers do not perceive differences in transition to the profession or performance in the role, and that they remain engaged in the work of nursing (Oermann et al., 2010a; Oermann et al., 2010b; Ouellet et al., 2012; Rafferty and Lindell, 2011; Raines, 2007).

Faculty perceptions of these students were consistent with other studies that indicated the need for some adaptation and accommodation of the teaching and learning approach for these students (Rico et al., 2008), acknowledging the very different life-context of accelerated students; a theme was also reported by Utley-Smith et al. (2007) who comment on the challenges of re-socialization into the student role. The majority of the student respondents saw value in being educated as a cohort, separate from basic students, pointing to some of these same issues and concerns.

Accelerated second-degree nursing programs are currently woven into the fabric of U.S. nursing education program designs. Students enrolled in these programs bring life experiences that could be leveraged in the preparation of nurse-leaders. These more mature students may benefit from different approaches to competency-based education program designs that support a more individualized pace of learning, and mentorship interventions that support the unique needs of these adult learners. Accelerated nursing programs merit continued assessment in order to maximize the benefits of these programs to students, educators and the nursing profession.

REFERENCES

- Adeniran RK, Bhattacharya A, Adeniran AA (2012). Professional excellence and career advancement in nursing: conceptual framework for clinical leadership development. *Nurs. Admin.*, 36(1), 41-51.
- Allen P, Van Dyke Y, Armstrong M (2010). "Growing your own" nursing staff with a collaborative accelerated second-degree, web-based program. *J. Contin. Educ. Nurs.* 41(3), 118-122.
- Beal J (2007). Accelerated baccalaureate programs: What we know and what we need to know – setting a research agenda. *J. Nurs. Educ.* 46(9), 387-388.
- Caldwell L, Tenofsky L, Nugent E (2010). Academic and clinical immersion in an accelerated nursing program to foster learning in the adult student. *Nurs. Educ. Persp.* 31(5), 294-297.
- Cangelosi P (2007). Voices of graduates from second-degree baccalaureate nursing programs. *J. Prof. Nurs.* 23(2), 91-97.
- Cangelosi P, Whitt K (2005). Accelerated nursing programs. What do we know? *Nurs. Educ. Perspec.* 26(2), 113-116.
- D'Antonio P, Beal M, Underwood P, Ward F, McKelvey M, Guthrie B (2010). Great expectations: Points of congruencies and discrepancies between incoming accelerated second-degree nursing students and faculty. *J. Nurs. Educ.* 49(12): 713 -717.
- Escallier L, Fullerton J (2009). Process and outcomes evaluation of retention strategies within nursing workforce diversity project. *J. Nurs. Educ.* 48(9), 488-494.
- Escallier, L, Fullerton, J (2012). An innovation in design of a school of nursing evaluation protocol. *Nurse Educ.* 37 (5), 187-191.
- Hegge M, Hallman P (2008). Changing nursing culture to welcome second-degree students: herding and corralling sacred cows. *J. Nurs. Educ.* 47(12), 552-556.
- IOM (2010). The Future of Nursing: Leading Change, Advancing Health. Available at: <http://www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>.
- Kemsley M, McCausland L, Feigenbaum J, Riegler E (2011). Analysis of graduates' perceptions of an accelerated bachelor of science program in nursing. *J. Prof. Nurs.* 27(1), 50-58.
- Lekan D, Corazzine K, Gillis C, Bailey D (2011). Clinical leadership development in accelerated baccalaureate nursing students: An education innovation. *J. Prof. Nurs.* 27(4), 202-214.
- Lockwood S, Walker C, Tilley D (2009). Faculty perceptions of an accelerated baccalaureate nursing program. *J. Nurs. Educ.* 48(7), 406-410.
- Lyon D, Younger J, Goodloe L, Ryland K (2010). Nursing students' perception of how their prior educational foci and work experienced affected their transition into an accelerated nursing program. *Online J. Nurs. Res.* 10(1), 17.
- MacPhee M, Skelton-Green J, Bouthilette F, Suryaprakash N (2011). An empowerment framework for nursing leadership development: supporting evidence. *J. Advanced Nurs.* 68(1), 159-169.
- Martin J, McCormack B, Fitzsimons D, Spirig R (2012). Evaluation of a clinical leadership programme for nurse leaders. *J. Nurse Manage.* 20, 72-80.
- Meyer G, Hoover K, Maposa S (2006). A profile of accelerated BSN graduates. *J. Nurs. Educ.* 45(8), 324-327.
- Miklancie M, Davis T (2005). The second degree accelerated program as an innovative education strategy: New century, new chapter, new challenge. *Nurs. Educ. Perspec.*, 26(5), 291-293.
- Miklancie M, Davis T. (2005) The second degree accelerated program as an innovative education strategy: New century, new chapter, new challenge. *Nurs. Educ. Perspec.* 26(5), 291-293.
- Nick JM, Delahoyde TM, Del Prato D, Mitchell C, Ortiz J, Ottley C, (2012). Best practices in academic mentoring: a model for excellence. *Nurs. Research Pract.* 997906 e-pub.
- Oermann M, Poole-Dawkins K, Alvarez M, Foster B, O'Sullivan R (2010b). Managers' perspectives of new graduates of accelerated nursing programs: How do they compare with other graduates? *J. Cont. Educ. Nurs.* 2010; 41(9):394-400.
- Oermann MH, Alvarez MT, O'Sullivan R, Foster BB (2010a). Performance, satisfaction and transition into practice of graduates of accelerated nursing programs. *J. Nurses Staff Develop.* 26(5), 192-199.
- Ouellet L, MacIntosh J, Gibson C, Jefferson S (2008). Evaluation of selected outcomes of an accelerated nursing degree program. *Nurse Educ. Today.* 28: 194-201.
- Penprase B (2012). Perceptions, orientation, and transition into nursing practice of accelerated second-degree nursing program graduates. *J. Continuing Educ. Nurs.* 43(1), 29-36.
- Penprase B, Koczara S (2009). Understanding the experiences of accelerated second-degree nursing students and graduates: A review of the literature. *J. Continuing Educ. Nurs.* 40(2), 74-79.

- Rafferty M, Lindell D (2011). How nurse managers rate the clinical competencies of accelerated (second-degree) Nursing graduates. *J. Nurs. Educ.* 2011; 50(6):355-358.
- Raines D (2007). "One year later" Reflections and work activities of accelerated second-degree bachelors of science in nursing graduates. *J. Prof. Nurs.* 23(6), 329-334.
- Raines D. (2011). What attracts second degree students to a career in nursing? *Online J. Issues Nurs.* 16(1)1.
- Rico JW, Beal, J, Davies T(2010). Promising practices for faculty in accelerated nursing programs. *J. Nurs. Educ.* 49(3):150-154.
- Robert T, Pomarico C, Nolan M (2008). Assessing faculty integration of adult learning needs in second-degree nursing education. *Nurs. Educ. Perspec.* 32 (1), 14-17.
- Robert Wood Johnson Foundation. (2009). Implementing the IOM Future of Nursing Report- Part 1: How to dramatically increase the formal education of America's nursing workforce by 2020. Available at: <http://www.rwjf.org/en/research-publications/find-rwjf-research/2009/01/charting-nursings-future-archives/how-to-dramatically-increase-the-formal-education-of-america-s-n.html>. Schreier A, Peery A, McLean C (2009). An integrative curriculum for accelerated nursing education programs. *Nurse Educ.* 48(5), 282-285.
- Scott ES, Miles J (2013). Advancing leadership capacity in nursing. *Nurs. Admin. Q.* 37(1), 7-82.
- Siler B, DeBasio N, Roberts K(2008). Profile of non-nurse college graduates enrolled in accelerated baccalaureate curricula: Results of a national study. *Nurs. Educ. Perspec.* 29(6), 336-341.
- Supplee P, Glasgow M(2008). Curriculum innovation in an accelerated BSN program: The ACE model. *Int. J. Nurs. Educ. Scholar.* 5(1), 1-13.
- Utley-Smith Q, Phillips B, Turner K(2007). Avoiding socialization pitfalls in accelerated second-degree nursing education: The returning-to-school syndrome model. *J. Nurs. Educ.* 46(9), 423-426.