



Kentucky League
for **Nursing**

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**Poster
Presentations**



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TITLE OF ABSTRACT

“Practicing Cultural Humility: A Competency-Based Education Strategy”

Faculty are challenged to find active, experiential ways for new nursing students to build foundational competencies such as cultural humility. Problem-based, student-centered activities may also contribute to deeper learning (Iwasiw et al., 2020). Faculty created an innovative, team-based teaching strategy to assist new students in developing the knowledge, skills, and attitudes to provide person-centered care by practicing cultural humility (Carter et al., 2022). In this activity, students selected a culture or subpopulation, created an informational brochure, and then engaged in an informal discussion among their peers. The brochure provided an overview of a culture’s values, practices, and health risks as well as tips for providing culturally congruent care.

Several student learning outcomes were met by completing this activity. The activity engaged students with diverse learning needs to develop their understanding of other cultures and non-ethnic groups, supported their abilities to identify evidence-based data, and provided opportunities for self-reflection of biases. Students learned to share their opinions and lived experiences with others in respectful ways, and to recognize how practicing cultural humility requires a commitment to lifelong self-awareness of biases, seeking knowledge of other groups, and expanding one’s worldview to better provide patient-centered care (Khan, 2021).

For the nursing faculty, this type of activity can provide an opportunity to intentionally connect the American Association of Colleges of Nursing’s (2021) *Essentials Domain 2: Person-Centered Care* and *Domain 9: Professionalism* and nursing concepts such as caring, diversity, equity, and inclusion, evidence-based practice, communication, ethics, and social determinants of health to a competency-based education strategy.

Keywords: cultural humility; competency-based education; active learning; teaching strategy

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Practicing Cultural Humility: A Competency-Based Education Strategy

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Background

- Nurses must provide culturally sensitive care to diverse populations.
- Faculty are challenged to find active, experiential ways for new nursing students to build foundational competencies.
- Practicing cultural humility requires a commitment to lifelong self-awareness of biases, seeking knowledge of other groups, and expanding one's worldview to better provide patient-centered care.¹
- Problem-based, student-centered activities contribute to deeper learning.²

Aim

- Create a competency-based education (CBE) strategy to assist students in developing cultural humility.³



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Instructional Design

- Work in groups and select a culture or sub-population.
- Create an informational brochure to address the culture's values, practices, and health risks; identify community resources; list nursing tips to provide culturally congruent care.
- Facilitate an informal discussion among peers about the topic.

Competencies

- Identify evidence-based data and utilize scholarly sources.
- Develop knowledge, skills, and attitudes of cultures and non-ethnic groups.
- Improve communication skills to share sensitive topics in respectful ways.

The Essentials

- The following AACN⁴ domains and nursing concepts intentionally connect to this CBE teaching strategy:
 - Domain 2: *Person-Centered Care*
 - Domain 9: *Professionalism*
 - Nursing Concepts: Caring; Diversity, Equity, and Inclusion; Evidence-Based Practice; Communication; Ethics; Social Determinants of Health

Learning Outcomes

- Enhanced understanding of different cultures.
- Engaged in self-reflection to transform attitudes and biases.
- Recognition of the lifelong commitment to practice cultural humility to enhance patient care.

References

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TITLE OF ABSTRACT

“Converting a Leadership Assignment to Meet the Essentials”

AACN (2023) defines competency-based education as “a system of instruction, assessment, feedback, self-reflection, and academic reporting that is based on students demonstrating that they have learned the knowledge, attitudes, motivations, self-perceptions, and skills expected of them as they progress through their education” (para. 1). Competency-based education can improve teaching and learning to ensure students are able to demonstrate and transfer knowledge into practice. Educators design assignments to assess competency. How does the educator determine if the assignment will assess a competency? The aspects to consider are program outcomes, course objectives, domains of the competencies and sub-competencies, level of the competencies, concepts of nursing practice, and spheres of care. Each of these aspects must be taken into consideration. In addition, where is this assignment placed in the curriculum and will the assignment be an introduction, re-enforcement, or demonstration? Once the educator has all this information the creative process can begin.

The original assignment asked the students to describe three leadership strengths and areas of improvement of the current manager and cross-post to one of their classmates. The converted assignment expanded beyond the original two questions. The students were to identify if he or she was a leader or follower, compare two leadership theories, and describe three leadership strengths and three leadership areas for improvement of the current manager. In addition, the students were to examine his or her biases and how this may contribute to the work culture and environment, ways to modify this finding, and how to communicate a consistent image of nursing. Also, the students were to identify and describe any committee in which he or she contributed to practice and policy issues. The students were also tasked to provide two peer cross-post.

The conversion of the assignment allows the students to demonstrate competencies and sub-competencies, and communicate within the educational environment through dialogue, and across spheres of care based on place of employment. This leadership assignment can be leveled to the undergraduate or graduate student.

Keywords: competency-based education, competencies, leadership, assignment

American Association of Colleges of Nursing. (2023). The essentials. *What is Competency-Based Education*.

<https://www.aacnnursing.org/Essentials/Definition-of-Competency-Based-Education#:~:text=AACN%20defines%20competency%2Dbased%20education,they%20progress%20through%20their%20education.>

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Converting a Leadership Assignment to Meet the New Essentials

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Background/Significance of Problem

- Competency-based education (CBE) has been approved (AACN 2021)
- CBE is a system of instruction, assessment, feedback, self-reflection, and academic reporting (AACN 2023)
- CBE is based on student demonstrating they have learned knowledge, attitudes, motivations, self-perceptions, and skills expected to progress (AACN, 2023)
- CBE can improve teaching and learning to ensure students are able to demonstrate and transfer knowledge into practice.
- Educators design assignments to assess competency.

Clinical Question

How does an educator determine if the assignment will assess a competency?

Necessary Aspects

- Program outcomes
- Course objectives
- Domains of the competencies and sub-competencies
- Level of the competencies
- Concepts of nursing practice
- Spheres of care
- Placement within the curriculum
- Will this be an introduction, re-enforcement, or demonstration?

Original Assignment

This is a discussion board assignment.

- Necessary aspects present was a purpose statement and objectives of the course.
- Describe three leadership strengths of your current manager.
- Describe three areas for improvement of your current manager.
- Provide one peer cross-post.

In its current format, this assignment would not meet the essentials checklist or the necessary aspects.

Converted Assignment

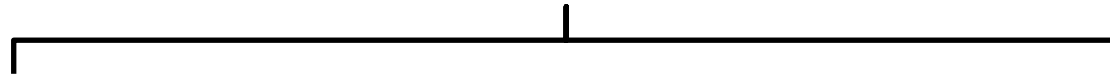
- Contains all the necessary criteria.
- Still is a discussion board assignment with demonstration.
- Can be an undergraduate or graduate-level assignment.
- Students use communication and the sphere of care varies based on employment.
- Essentials: 1.1a, 1.2a, 1.2b., 1.2c., 10.2a, 10.2c, 10.2d, 10.3 a, 10.3g, 10.3h, and 10.3i.
- Kept the two original questions.
- Additional content – identify if he or she was a follower or leader, compare two leadership theories, examine his or her biases and how this might contribute to the work culture and environment, ways to modify findings, how to community a consistent image of nursing, identify and describe any committees in which he or she contributed to practice and policy.
- Provide two peer cross-post.

References

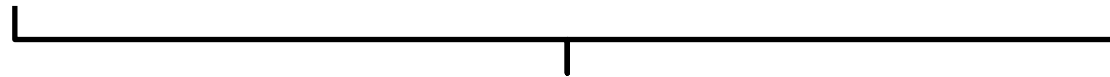
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TITLE OF ABSTRACT

“Improving Asthma Management Behaviors in School Nurses Through Facilitator Training and Supported Implementation”

Uncontrolled asthma in middle school age children and adolescents results in increased morbidity and often impairs a student's ability to participate in school activities. School absenteeism is an unintended consequence which in turn can impact academic success. School nurses can improve student asthma outcomes through effective asthma management behaviors (AMB's). The purpose of this multi-phase quality improvement DNP project was to improve both knowledge and confidence, and thereby improve AMB's in Kentucky school nurses. [A convenience sample of 12 nurses participated in the project. The American Lung Association's \(ALA\) Kickin' Asthma training was extended to all Kentucky school nurses who utilized the Kentucky school nurse list serve.](#) A paired t test was used to calculate pre-post intervention scores. Post intervention scores for both knowledge and confidence were significantly improved, knowledge ($p < .001$), and confidence ($p < .001$). Findings suggest that increased asthma education for Kentucky school nurses can improve asthma outcomes.

Keywords: asthma, asthma management, school-nurse, webinar training, and stock albuterol

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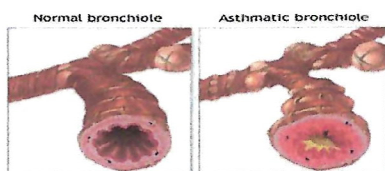
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Improving Asthma Management Behaviors in School Nurses Through Facilitator Training and Supported Implementation

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BACKGROUND AND SIGNIFICANCE

- Asthma - most prevalent chronic respiratory disease in school age children and adolescents
- Poor control leads to school absenteeism and unplanned emergency room visits
- Economic burden 1.9 billion dollars
- Kentucky incidence higher than national average



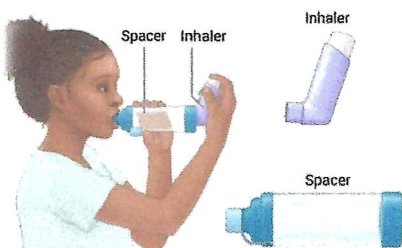
- School nurses can improve asthma outcomes with knowledge and confidence

PURPOSE

The purpose of the DNP quality improvement project is to improve asthma management behaviors in Kentucky school nurses in order to improve asthma outcomes in school age children and adolescents

THREEFOLD AIM

- First: Increase knowledge and confidence
- Second: Provide implementation support
- Third: Identify barriers that prevent or hinder execution of asthma management behaviors



RECRUITMENT

Kentucky School Nurses


IMPROVING ASTHMA MANAGEMENT BEHAVIORS IN SCHOOL NURSES THROUGH FACILITATOR TRAINING AND SUPPORTED IMPLEMENTATION A DNP PROJECT

LOOKING FOR SCHOOL NURSE VOLUNTEERS

Participate in a 6-week study to improve asthma management and to help students with asthma improve outcomes
Your change to improve student health and to earn CEUs

Participants will receive a scholarship to participate in the American Lung Association's Kickin' Asthma Program
Funding for this training was received from the Centers for Disease Control and Prevention (CDC) National Center for Environmental Health Asthma Program grant N01EH001372

TO LEARN MORE & SIGN UP CONTACT
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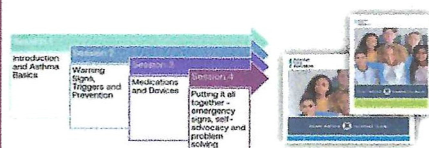


Scholarship Eligibility Requirements

- Participants must work with school age students ages 11 through 16 years
- Complete all phases of the project in six weeks

METHODS

Kickin' Asthma Training



- Identify barriers that prevent Kickin' Asthma Strategies
- Identify a solution to barriers
- Introduce CDC EXHALE Strategies
- Discuss benefits of stock albuterol

IMPLEMENTATION

Phase One

- Organizational Readiness to Implement Change (ORIC) Survey Completion
- Demographic Survey
- Pre-Knowledge Survey
- Pre-Confidence Survey

Phase Two

- Complete Kickin' Asthma training and achieve 80%
- Post Knowledge Survey
- Post Confidence Survey

Phase Three

- Implementation Support

Phase Four

- Follow Up Process Survey
- Participant Satisfaction Survey

DEMOGRAPHICS

Nursing Education

- Bachelors Degree - 25%
- Associate Degree - 67%
- Licensed Practical Nurse - 8%

Less Than Five Years of Experience - 50%
Certified as a School Nurse - 33%

RESULTS

ORIC

- Over 73% of school nurses agree asthma management could be improved in school health clinics
- 55% strongly agree that the Kickin' Asthma Program can improve asthma management

RESULTS

Pre-Knowledge

Ability to identify asthma triggers - 23%

Pre-Post Knowledge Paired Test

Paired Samples Statistics				
	Mean	N	Std. Deviation	Std. Error Mean
Pair 1 PRE-K TOTAL	22.68	12	4.295	1.240
POST-K TOTAL	27.75	12	2.094	.605

RESULTS

Pre-Confidence

Confident in ability to demonstrate peak expiratory flow meter (PEM) - 17%

Pre-Post Confidence Paired Test

Paired Samples Statistics				
	Mean	N	Std. Deviation	Std. Error Mean
Pair 1 PRE-C TOTAL	21.70	10	3.713	1.174
POST-C TOTAL	28.10	10	1.792	.567

FINDINGS

- The Kickin' Asthma training was effective in increasing knowledge and confidence in school nurses
- School nurses were not aware of the CDC EXHALE strategies prior to the project
- 60% of the school health clinics school health clinics utilize stock albuterol

Process Survey Results

Barriers

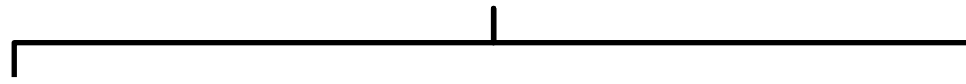
- Time constraints - 67%
- Communication challenges - 56%
- Lack of knowledge - 44%
- Limited support - 44%
- Lack of awareness of nurses' expertise - 11%

Solutions

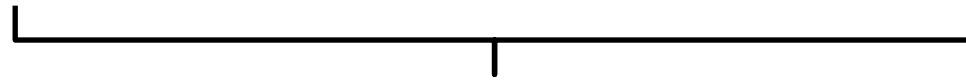
- Asthma education
- Adequate ancillary support

ACKNOWLEDGEMENTS

- Ms. Rahel Basse, Program Manager of the Kentucky Asthma Management Program
- Ms. Heather Cox, Training Coordinator of the Kentucky Asthma Management Program
- Ms. Sue Thomas-Cox, Branch Manager for Chronic Disease Prevention at the Kentucky Department for Public Health
- Centers for Disease Control and Prevention (CDC) National Center for Environmental Health Asthma Program Grant



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TITLE OF ABSTRACT

“Dementia Live: A Simulation Experience for Undergraduate Nursing Students”

Implementing a realistic simulation activity can assist in the development of an undergraduate nursing student's appreciation of how everyday life is experienced for individuals and families living with dementia. The word dementia is a broad term used to describe symptoms including difficulty with remembering, speaking, planning, and other cognitive abilities problematic enough to interfere with daily life. The medical diagnosis of Alzheimer's disease is the most prevalent cause of those types of symptoms. In the United States approximately 6.7 million individuals 65 years old and older are living with Alzheimer's diseases. Projections indicate by 2050 there could be 12.7 million individuals living with the condition (Alzheimer's Association, 2023). Dementia Live is a simulation utilized to demonstrate what it could be like to live with Alzheimer's disease. Students wear glasses that restrict peripheral vision, gloves to reduce tactile sensation of the hands, and headphones to introduce sounds like thoughts going through the mind of an individual with Alzheimer's disease. The items help evoke the sensory changes experienced by those living with Alzheimer's disease. Once the students have the items in place the faculty running the simulation stand behind each student and state in a normal voice four tasks the student should complete upon entering the simulation room. The simulation room is set up like a home living environment. The faculty observe and made notes to complete a short debrief with the students upon completion of the simulation. Qualitative feedback from the students indicates the Dementia Live simulation enhanced understanding of living with Alzheimer's disease.

Alzheimer's Association. (2023) *What is dementia*. <https://doi.org/www.alz.org/alzheimers-dementia/what-is-dementia>

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Dementia Live: A Simulation Experience for Undergraduate Nursing Students

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Background

Globally more than 55 million people have dementia; each year there are about 10 million new cases.

Dementia results from varying disease processes or injuries that affect the brain and cognition.

Alzheimer disease is the most common form of dementia and is estimated to affect 60–70% of cases (World Health Organization, 2023).

Undergraduate nursing clinical experiences via simulation can positively influence attitudes and empathy while providing care for clients with dementia.

Simulation Purpose

The intent of this simulation is to provide training for nursing students to promote knowledge, understanding, and empathy when providing care for persons living with dementia



The Dementia Live Process:

Students are placed in gear to simulate typical age and dementia-related vision, auditory, and tactile sensory changes.

Each student performs a list of standardized daily tasks, such as hanging clothing, addressing an envelope, or counting coins.

Students perform tasks in a space set up to replicate a living environment like a bedroom.

The coach observes and records the student's approach to the tasks and reactionary behaviors (Ageucate, 2023).

Empowerment Session

Students examine their reaction to the dementia simulation, reflecting on feelings, thoughts, and behaviors.

Students compare how people living with dementia may feel, think, and act in the presence of diminished sensory and cognitive function.



Simulation

Dementia Live® is a high impact, dementia simulation experience that immerses students into life with dementia, resulting in a deeper understanding of what it's like to live with cognitive impairment and sensory change.

DEMENTIA Live®
Proven. Powerful. Essential.



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TITLE OF ABSTRACT

“Education Impasse and Embracing the Essentials: Competency-Based Education and Development of a New Curriculum”

Bellarmino nursing faculty strive to be innovators in pedagogy and to ensure our students have fulfilling learning experiences while navigating our curriculum. In March 2021, the American Association of Colleges of Nursing (AACN) published a new framework for baccalaureate nursing education, The Essentials: Core Competencies for Professional Nursing Education (AACN, 2021). This innovative report presents an opportunity for curriculum revision that embraces the development of competency and outcome driven education. The Bellarmino nursing program has embraced the AACN Essentials 10 Domains and 8 Concepts in undertaking a major curriculum revision. The Essentials promote nursing as a discipline that is reinforced through liberal education and the themes of competency-based education (CBE). Faculty understand the new generation of student-learners are challenged by active learning, debriefing with clinical and subject experts, self-reflections, and student-directed learning. (Welch & Smith, 2022).

The Bellarmino Nursing Department took special care to align the program objectives with the learning objectives outlined in The Essentials, identifying national benchmarks, and building the Bellarmino curricula program and clinical assessments accordingly (Giddens & Mullaney, 2023). To increase retention of crucial competencies, Bellarmino reorganized the traditional undergraduate program, added chemistry as a pre-requisite, increased admission requirements, and added professional and population health nursing courses. These nursing courses promote vital BSN outcomes including leadership, inclusivity, quality, evidence-based practice, and vulnerable populations. In line with the competency-based education, students will have immersive experiences and special topics courses in their final semester. Data supports The Essentials and CBE will engage students. Our program will monitor student satisfaction data, certification examinations, etc. to determine the effectiveness of our methods related to the curriculum development and implementation of CBE.

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Education Impasse and Embracing the Essentials: Competency—Based Education and Development of a New Curriculum

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ABSTRACT

In March 2021, the American Association of Colleges of Nursing (AACN) published a new framework for baccalaureate nursing education, The Essentials: Core Competencies for Professional Nursing Education (AACN, 2021). This innovative report presents an opportunity for curriculum revision that embraces the development of competency and outcome driven education. The Bellarmine nursing program has embraced the AACN Essentials 10 Domains and 8 Concepts in undertaking a major curriculum revision. The Essentials promote nursing as a discipline that is reinforced through liberal education and the themes of competency-based education (CBE). Faculty understand the new generation of student-learners are challenged by active learning, debriefing with clinical and subject experts, self-reflections, and student-directed learning. (Welch & Smith, 2022)

INTRODUCTION

The Bellarmine Nursing Department took special care to align the program objectives with the learning objectives outlined in The Essentials, identifying national benchmarks, and building the Bellarmine curricula program and clinical assessments accordingly (Giddens & Mullaney, 2023). To increase retention of crucial competencies, Bellarmine reorganized the traditional undergraduate program, added chemistry as a prerequisite, increased admission requirements, and added professional and population health nursing courses. These nursing courses promote vital BSN outcomes including leadership, inclusivity, quality, evidence-based practice, and vulnerable populations.

BACKGROUND

In line with competency-based education (CBE), students will have immersive experiences and special topics courses in their final semester. Data supports The Essentials and CBE will engage students (AACN, 2021). Our program will monitor student satisfaction data, certification examinations, etc. to determine the effectiveness of our methods related to the curriculum development and implementation of CBE. The newly developed curriculum utilizes revised Bellarmine School of Nursing Student Learning Outcomes, which completely align with the AACN Essentials Domains and Concepts of CBE. This is accomplished through innovative courses, integrative learning and assessment strategies, and clinical engagement experiences. Academic and clinical experiences of the new curriculum focus on complex health, professional nursing, population health, practice immersion, and intensive study of specialty areas. Students also benefit from complete curriculum mapping and alignment to the revised NCLEX-RN (NGN) launched in 2023.

DISCUSSION & METHODS

- Admission criteria Cumulative GPA 3.0
- Successful completion of Medicaid approved Certified Nurse Assistant course
- Movement of Nursing courses to junior and senior year
- Addition of Chemistry as a pre-requisite
- Movement of Pathophysiology and Microbiology to pre-requisites
- Combining Pediatrics & Maternal Newborn into one course
- Integrating Complex Care into Complex Care Adults 1 & 2
- Addition of two Population Health Courses
- One Applied Pharmacology course
- Adding Across the Lifespan (ALS) to Health Assessment, Psychiatric Mental Health, and Population Health
- Addition of a Nursing Practice Immersion with a 135-hour clinical in final semester/session
- Addition of Special Topics course last semester—accelerated student will complete 45-hour practicum

AACN Essential Concepts will be introduced in specific courses and "threaded" throughout the curriculum to reinforce vital knowledge and skills necessary for student success (Welch & Smith, 2022). Content the student is learning will align with assessments and clinical experiences. Students will critically think and apply knowledge as they progress through the program. Multiple teaching—learning methods will provide flexibility for various types of student-learners (Welch & Smith, 2022).

AACN Featured Concepts

1. Clinical Judgment—Bellarmine Concept
2. Communication—Bellarmine Concept
3. Compassionate Care
4. Determinants of Health
5. Diversity, Equity & Inclusion
6. Ethics—Bellarmine Concept
7. Evidence-Based Practice—Bellarmine Concept
8. Health Policy—Bellarmine Concept (AACN, 2021)



(Giddens & Mullaney 2023)

CONCLUSIONS

Faculty innovation and dedication is a driving force in curriculum development. Bellarmine School of Nursing has aligned revised BSN student learning outcomes with the AACN Essentials 10 Domains and 8 Concepts to develop a curriculum framework that will prepare students to succeed in a continually evolving academic and healthcare environment (AACN, 2021).

Students must have a dynamic curriculum that is engaging with evidence-based learning activities aligning to both course and clinical work. This further reinforces the importance Bellarmine School of Nursing curriculum development has placed on students threading knowledge across courses from the academic setting to the clinical and simulation environments (Welch & Smith, 2022). Planning of interactive, flexible, hands-on teaching—learning activities are part of the curriculum development process to ensure students are active stakeholders in their nursing education.

Faculty will continually assess the performance of students and evaluate the outcomes of the CBE curriculum. A successful CBE should be in a constant state of evaluation to ensure students are being introduced to concepts at the appropriate time, assessment activities are current with clinical practice, and academic/clinical experiences align with evidence-based practice and evidence-based medicine (Giddens & Mullaney, 2023).

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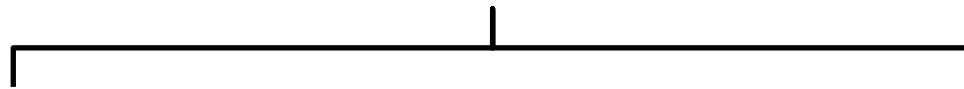
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BELLARMINE
UNIVERSITY
Lansing School of Nursing
& Clinical Sciences

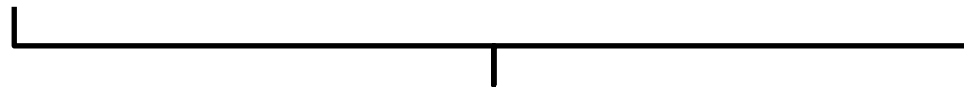
Bellarmine School of Nursing—BSN Program Outcomes Revised

Revised BSN Student Learning Outcomes (AACN Competencies)	Domain
1. Synthesize knowledge of the liberal arts and sciences and the discipline of nursing, in the provision of professional nursing care	1. Knowledge for Nursing Practice
2. Integrate best evidence with patient uniqueness to support clinical judgement in planning & delivery of care across time, spheres of care & developmental levels	2. Person-Centered Care
3. Collaborate to manage population health including health promotion & illness prevention to improve health outcomes across the health care delivery system	3. Population Health
4. Apply, synthesize, and translate best evidence for clinical judgement to improve health and transform health care systems	4. Scholarship for the Discipline
5. Demonstrate leadership skills to enhance quality and minimize risk of harm to patients and providers through individual performance and coordination of system resources for efficiency & effectiveness	5. Quality & Safety
6. Collaborate & coordinate across professions and with team members including patient, families, and communities to enhance the healthcare experience and improve outcomes	7. System Based Practice
7. Incorporate informatics & healthcare technology to manage & improve high-quality, safe, and efficient healthcare services in accordance with professional & regulatory standards	6. Interprofessional Practice
8. Function as a leader in nursing in accordance with professional values, standards of care, ethical and legal conduct	8. Informatics & Healthcare Technology
	9. Professionalism
	10. Personal, Professional & Leadership Development



Cody Ryan
DNP, MA-DICO, RN, FNP-S

Patrick Lynch
Student



TITLE OF ABSTRACT

“Price of success? The increasing prevalence of depression, stress, and anxiety amongst nursing students”

Nursing students in undergraduate traditional four-year and accelerated one-year (second-degree) baccalaureate programs experience significant academic and emotional stressors. This can lead to decreased focus and learning resulting in increased attrition (Turner & McCarthy, 2017). Institutions of higher learning must be proactive in developing interventions to identify and help nursing students cope with increasing mental health issues. Increased emotional stress and feelings of academic insecurity may lead to increased illness and class/clinical absence (Galbraith & Brown, 2011). Nursing faculty and administrators can help nursing students manage mental health stressors through the development of innovative curriculum that improves students' coping skills (Turner & McCarthy, 2017).

Nursing students must feel supported by program faculty and administrators. Program effectiveness, outcomes, and satisfaction must be quantified regularly. Interventions featured revised curriculums with “You Attitude” communication, wellness courses, “home hospital” clinical sites, high fidelity and standardized patient simulation, nursing mentor program using senior and graduate students, pet therapy sessions, guided imagery prior to clinical, meditation prior to class, and aromatherapy (Turner & McCarthy, 2017). Methods included the Nursing Anxiety and Self-Confidence with Clinical Decision-Making Scale, Nurse Self-Concept Questionnaire, Stress Warning Signals Checklist (SWS), State-Trait Anxiety Inventory (STAI-A), Student Nurse Stress Index (SNSI), Psychological Stress Measure, Perceived Stress Scale, Cognitive Test Anxiety Survey, Personal Views Survey-R, and the Situational Awareness Global Assessment Technique (SAGAT) (Turner & McCarthy, 2017). This data can prove to be a reliable tool to measure the success of curriculum and delivery of content. Open communication and anonymous feedback provide a forum for issues to be addressed. Identifying relationships between nursing school and emotional stress allows programs to develop sound policies, practices, curricula, simulations, etc. to prepare nurses for the fast-paced and stressful healthcare arena (Olvera Alvarez et al., 2019). It is important to address mental health issues that arise as soon as possible. Relationships (personal, family, faculty, and mentor), academic and clinical performance, moral distress, guilt, anger, frustration, desire to give up profession, and loss of self-esteem may all develop if mental health issues are not addressed in a timely manner (Sasso et al., 2016). Nursing programs should take deliberate actions in teaching, curriculum development, and student support to address mental health issues impacting nursing students.

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DNP, MA-DICO, RN, FNP-S

Patrick Lynch
Student

Bellarmino University



Price of success? The increasing prevalence of depression, stress, and anxiety amongst nursing students.

Dr. Cody Ryan, DNP, MA-DICO, RN, FNP-S and Mr. Patrick Lynch (student)

Bellarmine University, Donna & Allan Lansing School of Nursing & Clinical Sciences, College of Health Professions, School of Nursing

ABSTRACT

Nursing students in undergraduate traditional four-year and accelerated one-year (second-degree) baccalaureate programs experience significant academic and emotional stressors. This can lead to decreased focus and learning resulting in increased attrition (Turner & McCarthy, 2017). Institutions of higher learning must be proactive in developing interventions to identify and help nursing students cope with increasing mental health issues. Increased emotional stress and feelings of academic insecurity may lead to increased illness and class/clinical absence (Galbraith & Brown, 2011). Nursing faculty and administrators can help nursing students manage mental health stressors through the development of innovative curriculum that improves students' coping skills (Turner & McCarthy, 2017).

INTRODUCTION

The Nursing students must feel supported by program faculty and administrators. Program effectiveness, outcomes, and satisfaction must be quantified regularly. Interventions featured revised curriculums with "You Attitude" communication, wellness courses, "home hospital" clinical sites, high fidelity and standardized patient simulation, nursing mentor program using senior and graduate students, pet therapy sessions, guided imagery prior to clinical, meditation prior to class, and aromatherapy (Turner & McCarthy, 2017).

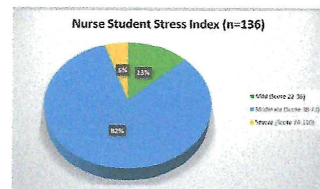
BACKGROUND

Nursing, as a profession, continues to require greater clinical and academic dedication and discipline. Nursing students are experiencing an increasing pressure to achieve perfection. Research shows nursing students feel increased competition among peers, stress in the academic and clinical environment, and fear of poor academic, clinical, and exam performance (Olvera Alvarez et al., 2019). Students report intense anxiety and stress making a mistake in clinical practice, applying theory, being adequately prepared, and the relationships they will have to develop with peers, faculty, and physicians (Olvera Alvarez et al., 2019).

Stress is normal and adaptive in certain situations and can act as a motivating force. Mild stress can activate physiologic responses in the body and improve learning efficiency, but too much stress can be debilitating and lead to an array of serious problems i.e., anxiety, depression, disrupted sleep wake cycle, and ultimately impaired performance (Nebhinani et al., 2020). Nursing students' ability to effectively cope with stress and addressing the its source of is essential in navigating successful management.

METHODS

Methods included the Nursing Anxiety and Self-Confidence with Clinical Decision-Making Scale, Nurse Self-Concept Questionnaire, Stress Warning Signals Checklist (SWS), State-Trait Anxiety Inventory (STAI-A), Student Nurse Stress Index (SNSI), Psychological Stress Measure, Perceived Stress Scale, Cognitive Test Anxiety Survey, Personal Views Survey-R, and the Situational Awareness Global Assessment Technique (SAGAT) (Turner & McCarthy, 2017). This data can prove to be a reliable tool to measure the success of curriculum and delivery of content. Open communication and anonymous feedback provide a forum for issues to be addressed. Identifying relationships between nursing school and emotional stress allows programs to develop sound policies, practices, curricula, simulations, etc. to prepare nurses for the fast-paced and stressful healthcare arena (Olvera Alvarez et al., 2019). In a research study conducted at an academic institution with a nursing school population close to the size of Bellarmine University (n=136), findings were 82% of nursing students experienced moderate stress levels when assessed using the Student Nurse Stress Index (Nebhinani et al., 2020, p. 173).



Anxiety and Stress Scale Comparison

SCALES	Undergraduate, Mean (SD)	p-value
Maslach Burnout Inventory		
Emotional Exhaustion	26.01 (10.87)	0.016
Personal Accomplishment	25.00 (10.26)	0.000
Professional Quality of Life		
Compassion Satisfaction	39.59 (16.67)	0.250
Compassion Fatigue	25.19 (5.88)	0.000
Perceived Stress Scale	1.72 (0.53)	0.000
Items: Taking Care of Patients	1.35 (0.58)	0.000
Items: Assignments and Workload	2.54 (0.87)	0.000
Items: Lack Professional Knowledge and Skills	1.37 (0.80)	0.000
Items: Environmental	1.52 (0.71)	0.000
Items: Peers and Daily Life	1.66 (0.79)	0.000
Items: Teachers and Nursing Staff	1.65 (0.72)	0.000
Coping Strategies (Short Form)		
Engaged Coping	20.71 (4.95)	0.000
Disengaged Coping	24.83 (4.83)	0.000

(Turner & McCarthy, 2017)

DISCUSSION

Student nurses are exposed to numerous stressors throughout their academic studies and clinical training period. If effective coping strategies are not used, student nurses may experience an array of debilitating symptoms i.e., academic, social, emotional, physiologic, and/or physical (Engelbrecht et al., 2021). Stress, anxiety, and effective use of coping strategies vary from person to person. Research showed only 6% of nursing students sought out some form of stress management program or workshop while in school (Nebhinani et al., 2020, p. 173). A positive trend showed most nursing students utilized positive active coping methods while substance use was found to be among the least utilized form of coping in nursing students (Nebhinani et al., 2020, p. 174-175).

Coping Strategies	Mean ± f - Standard Deviation (SD)
Active Coping	6.3 ± f - 1.4
Positive Reframing	5.8 ± f - 1.5
Planning	5.8 ± f - 1.3
Acceptance	5.4 ± f - 1.7
Instrumental Support	5.4 ± f - 1.5
Religion	5.2 ± f - 1.7
Self-Distraction	5.2 ± f - 1.3
Emotional Support	5.1 ± f - 1.4
Behavioral Disengagement	4.6 ± f - 1.5
Venture	4.5 ± f - 1.4
Self-Blame	4.4 ± f - 1.6
Denial	3.7 ± f - 1.5
Humor	3.5 ± f - 1.6
Substance Use	2.1 ± f - 0.4



CONCLUSIONS

Stress, anxiety, and difficulty coping are universal. Nursing students exposed to rigorous academic and clinical training are at increased emotional risk (Engelbrecht et al., 2021). It is vitally important faculty and administrators in higher education are aware of the prevalence of increased stress and anxiety in nursing students. Furthermore, it is the responsibility of these individuals to identify healthy coping strategies for students and create safe environments in institutions of higher learning. It is important to address mental health issues that arise as soon as possible. Relationships (personal, family, faculty, and mentor), academic and clinical performance, moral distress, guilt, anger, frustration, desire to give up profession, and loss of self-esteem may all develop if stress and anxiety are not addressed in a timely manner (Sasso et al., 2016). Nursing programs should take deliberate actions in teaching, curriculum development, and student support to address mental health issues impacting nursing students (Engelbrecht et al., 2021).

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Lisa Wallace
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TITLE OF ABSTRACT

“Competency Based Learning in Nursing Education: Professionalism”

Morehead State University has developed and implemented a Level Up Quality Enhancement Program to enhance student career readiness through development of various student competency skills through education. In NURB 461-700SL: Nursing Leadership and Management, nursing students prepare for their future careers through a service competency based learning hands-on clinical experience in an acute healthcare setting to foster the career skill of Professionalism. Competency Based Learning enhances nursing student career readiness through attainment and demonstration of requisite competencies that broadly prepare college graduates for successful transition into the workplace. Employers value candidates who possess career and technical skills. Students engage in a variety of assignments during their last semester of the Bachelor of Science in Nursing Program at Morehead State University to evaluate their progression toward mastery of professionalism. The Professionalism evaluation tool includes 5 elements: Sense of Self, Sense of Others, Professional Communication, Integrity, and Standards of Excellence/Evidence-Based Practice. Students achieving Professionalism mastery at the end of the course are awarded and recognized for their achievement at graduation.

Lisa Wallace
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Morehead State University



Competency Based Learning In Nursing Education: Professionalism

Lisa Wallace, DNP, MSN, RNC-OB, NE-BC



Abstract

Competency-Based Learning enhances student career readiness through attainment and demonstration of requisite Competencies that broadly prepare college graduates for successful transition into the workplace. Employers value candidates who possess career and technical skills.

Objectives

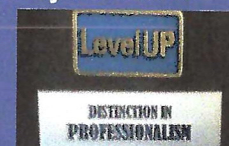
1. Develop Professionalism Mastery
2. Improve job competitiveness
3. Decrease the nursing workforce shortage.
4. Engage students in Professional Organizations.
5. Demonstrate Professionalism Mastery through a STAR story reflection from clinical practice.

Level Up Quality Enhancement Program

Focuses on Professionalism of 4th year BSN students at Morehead State University in Service-Based Learning

5 Elements for Professionalism

- Sense of Self
- Sense of Others
- Professional Communication
- Integrity
- Standards of Excellence/EBP



Tell Your Story: STAR

Situation, Task, Action, Result

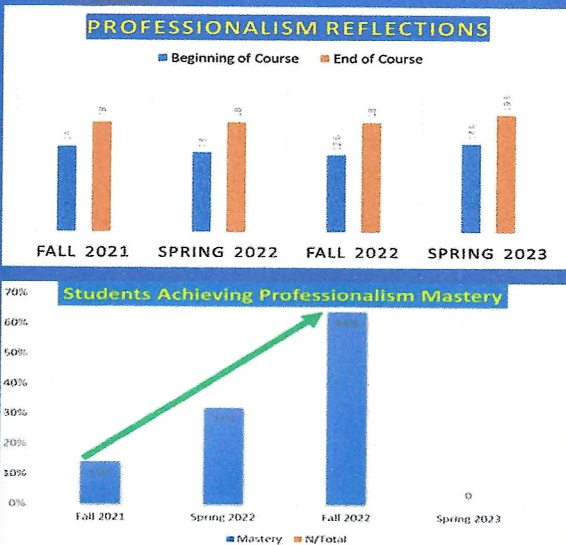
Situation	Situation I was assigned an Emergency Department position for my clinical rotation. There I see many different patients and situations. A 16-year-old boy came in for a fracture of the wrist. He had been playing football that night and fell on his wrist wrong. It was broken, and he needed orthopedics to fix it. He was handed off to my nurse at shift change. The attending, medical students, orthopedic doctors, students, and I were all informed on this patient's admitting story.
Task	Task As we waited for orthopedics to come and realign the bones. The attending physician ordered ketamine via the intravenous line. My nurse and I got it from the medication machine and got it ready to be administered. We made the patient comfortable and asked his family to leave the room during the procedure. Once everyone was in the room, we began the procedure. As my nurse was documenting, the medical student pushed the ketamine. As the ketamine was being pushed the patient's respirations went from 20 breaths per minute to 15, 10, 7, 5, 0. He was not breathing.
Action	Action The attending physician was calm and promptly called me to get the supplies for the patient to help him breathe. I ran out of the room to find the bag valve mask and suction equipment because it wasn't properly placed in the room. I gave it to my nurse and the medical student, and they got the patient breathing again. This helped me develop confidence. During this stressful situation, I was able to remain calm and get the materials the attending physician needed to help the patient. I had the confidence and knowledge to get these materials promptly to help the patient.
Results	Results They had to use the bag valve mask to help the patient breathe and stimulated him to take a deep breath. We were able to get the patient to breathe and increase his respirations back up to 15 breaths per minute. These actions did impact this patient's life and they would have had to use other measures to breathe and get this patient to breathe. This is important because it impacted the patient's life and without these materials could have had a devastating outcome for the patient. I learned that remaining calm during these stressful situations allowed me to think clearly and complete the task that was required. Being professional in the medical profession requires me to be fast on my feet as well as calm in stressful situations. I have grown from this experience and will implement this skill in the future.

Assignments

Escape Fire Discussion
IHI Leadership Module
Tell Your Story: STAR
Group QI Project & Presentation

Reflections
Patient Story
Professional Portfolio

Data Collection



Professionalism Mastery Tool

STAR METHOD REFLECTION RUBRIC

Select the level of attainment for each indicator or dimension of the STAR Method structure that matches best. When giving feedback to students, provide the rating, an explanation for why the rating was chosen, and detailed feedback about how the student can improve to the next level in the future.

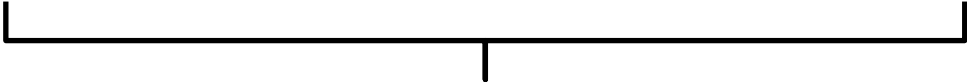
Note: Evaluators are encouraged to assign a zero to any work sample or collection of work that does not meet benchmark (level one) level performance.

INDICATOR	FULLY ARTICULATES (4)	PARTIALLY ARTICULATES (3)	SOMEWHAT ARTICULATES (2)	INSUFFICIENTLY ARTICULATES (1)
Situation	Clearly details the background and provides a context for how the competency was developed during the high impact practice. Includes specific information such as who was involved, what was the situation, where did this take place, and when.	Partially describes the situation but neglects to include key information. Includes at least two of the who, what, where and when elements.	Begins to describe the situation. Only fully describes one of the who, what, where and when elements.	Provides limited or no details of the situation.
Task	Clearly describes the purpose/challenge that was faced including what needed to be done and why this was the goal. Provides specific information.	Clearly describes one element - what needed to be done or why this was the goal but not both. Includes some key details that allow one to understand the goal.	Somewhat describes one element - what needed to be done or why this was the goal but not both. Lacks key details that allow one to fully understand the task.	Insufficiently describes what needs to be accomplished in terms of the purpose, challenge or goal.
Action	Clearly describes the two elements of what was done and how it was done. Includes specific details like software used, timeframe and obstacles encountered. Uses "I" language to convey what individual role was if a team was involved. Highlights how the competency was developed during the high impact practice.	Clearly describes one element of the action - either what was done or how it was done - but not both. Uses "we" rather than "I" which is difficult to tell the individual role.	Partially describes one element of the action - either what was done or how it was done - but not both. Uses "we" rather than "I" which is difficult to tell the individual role.	Action can be deduced but is not explicitly stated.
Result	Clearly describes the outcome of the action. Includes specific information (like number/percentage) to prove results, such as grade on project, cost savings, recognition, accomplishments. Focuses on what was learned and summarizes how the career competency was instrumental in the accomplishment.	Approaches the outcome but doesn't present enough supporting details to convince one of the result. Reflects on only one element - either what was learned or how the competency played into the result.	Summarizes the experience but doesn't clearly include the outcome.	Result or outcome is not included at all.



Dawn Garrett-Wright
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Liz Sturgeon
PhD, RN, CNE



TITLE OF ABSTRACT

“How COVID 19 Changed Nursing School Preparation, Admissions and Student Performance”

Purpose

COVID 19 created tremendous stress in the nursing profession. Nurses faced difficult working conditions and the possibility of being infected while at work. Less is known about how the pandemic affected nursing school admission and retention trends. The purpose of this study is to report program level data from a large school of nursing in the southeast to show trends in how the pandemic affected the preparedness of pre-nursing students, admission pools and retention rates, and student performance in core classes. Changes in the delivery of pre-nursing and nursing coursework was impacted by the inability to meet face to face during 2020 and into 2021. Also, proctored testing was disrupted due to the immediate need to move from face to face to online testing during Spring 2020.

Methods

This was a descriptive study evaluating university data on course DWF rates (Drop, Withdraw, Fail) and course enrollment numbers for courses required for pre-nursing and nursing students. Data was obtained from various university databases and reports. Data was reviewed independently by the researchers and then as a group to determine trends.

Results

Several trends were noted in the admission and retention data for pre nursing and admitted nursing students. It was noted that DWF rates dropped to less than 10% for traditionally difficult courses such as Pathophysiology and Health Assessment during the Spring of 2020. This time period coincided with the start of COVID lockdowns, when courses and testing was forced online with little preparation. Data show that the typical DWF rates for these courses was 15-35% during previous semesters. This single semester period of low DWF rates was followed by higher than normal DWF rates the following semester, as students who may not have actually learned the required material during the Spring 2020 semester had learning difficulties the next semester. In addition, a 25% drop in enrollment was noted for Anatomy and Physiology I from the Spring 2020 to Fall 2020 semester. This drop in a key preparatory science course limited the number of students ready for the additional required science courses (Anatomy and Physiology II and Pathophysiology) that were needed prior to nursing program admission. The nursing program admission and retention rates were further impacted by BSN students who took gap semesters/years because they did not want to receive the COVID 19 vaccination.

Implications

During 2020 and into 2021, the number of students ready to apply to nursing and the number of students that took gap semesters/years already enrolled in the BSN program will impact the number of nurses that graduate from our BSN program in the next three to four years, at a time when Kentucky is already short over 16,000 nurses.

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M. Eve Main, DNP

Oluwatobi Akangbe
Gatton Academy Student



TITLE OF ABSTRACT

“Effects of Arts and Humanities Courses on Nursing Students”

The purpose of this poster is to outline findings from a comprehensive literature review on the use of and benefit of arts and humanities courses and/or workshops for health science students, including nursing students. A search of the education and health care journals obtained from the Ebscohost database with the search terms of arts and humanities and nursing. Inclusion criteria were publication dates of 2015 to present, English language, and full-text availability. Ten articles were included in the review. Key findings from the literature review include arts and humanities content may contribute to nurses' understanding of purpose and assist in the moral, spiritual, and intellectual aspects of their jobs. The studies reviewed demonstrated improvements in skills such as observation, perception, and visual intelligence which could improve assessment skills of nurses. Other benefits cited were improvements in critical thinking skills and interpersonal interactions. Nursing students also perceived in-person workshops more beneficial than lectures on arts and humanities. The findings from this literature review indicate a continued need for arts and humanities courses in nursing curricula. Future research should focus on skills learned in arts and humanities courses and the direct impact on patient care and satisfaction.

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Oluwatobi Akangbe
Gatton Academy Student

Effects of Arts & Humanities Courses on Nursing Students

Dawn Garrett-Wright, PhD, PMHNP, CNE

M. Eve Main, DNP

Oluwatobi Akangbe, Gatton Academy Student

Purpose

- ❖ Outline findings from a comprehensive literature review on the use and benefit of arts and humanities courses and/or workshops for health science students, including nursing students

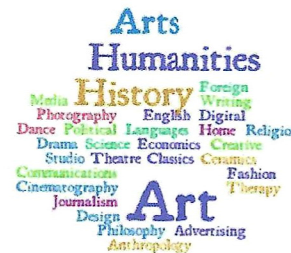


Methods

- ❖ A search of the education and health care journals obtained from Ebscohost
- ❖ Search terms of arts and humanities and nursing
- ❖ Inclusion criteria include the following: publication dates of 2015 to present, English language publication, and full-text availability
- ❖ Ten articles were included in the review

Findings

- ❖ Key findings from the literature review include:
 - Students perceived in-person workshops more beneficial than lectures on arts and humanities
 - Arts and humanities content may contribute to nurses' understanding of purpose and assist in the moral, spiritual, and intellectual aspects of their jobs
 - Studies reviewed demonstrated improvements in skills such as observation, perception, and visual intelligence which could improve assessment skills of nurses
 - Other benefits cited were improvements in critical thinking skills and interpersonal interactions



Implications

- ❖ The findings from this literature review indicate a continued need for arts and humanities courses in nursing curricula
- ❖ Future research should focus on measuring the skills learned in arts and humanities courses and the direct impact on patient care and satisfaction

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TITLE OF ABSTRACT

“All Nurses are Leaders: The Importance of Including Leadership Competencies in Nursing Undergraduate Curricula”

All nurses are leaders. To promote a nursing workforce culture where all nurses are leaders, not just those working in formal executive nursing positions, students need to understand that they are learning to be professional leaders in the healthcare field. The importance cannot be stressed enough that nursing faculty need to incorporate leadership competencies into all aspects of nursing education, starting with orientation. Leadership strategies should be included in each student learning opportunity and threaded through theory, lab, and clinical experiences. A primary focus of undergraduate nursing education should be how nurses use their education, experience, and skills to manage and lead patient care. Management of patient care exemplifies nursing leadership at the bedside and leadership strategies are vital to bridge education to practice. As nursing graduates transition to working at the bedside, it is imperative to prepare them to utilize leadership qualities of critical thinking, decision making, collaboration, communication, change, resiliency, and so much more. Compassion and caring are a highly valued trait of the nurse, and should remain so, but we need to exemplify professionalism, leadership, expertise, and advocacy as well (Godsey & Hayes, 2023; Buresh & Gordon, 2013).

Godsey, J.A. & Hayes, T. (2023) All nurses are leaders: 5 steps to reconstruct the professional identity and brand image of nursing. *Nurse Leader*, 21(2), 188-194. DOI: 10.1016/j.mnl.2022.12.012

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All Nurses are Leaders: The Importance of Including Leadership Competencies in Nursing Undergraduate Curricula



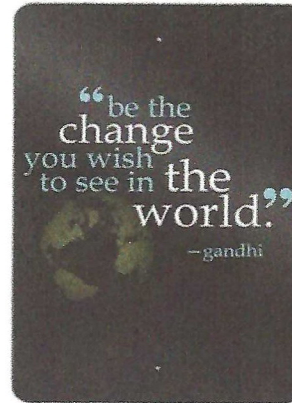
All Nurses are Leaders

- A common misperception is that the term "leadership" implies formal leadership positions (Re-Imagine Nursing with Dr. Judi Godsey, 2023)
- AACN Essentials: 10 Domains and 8 Core Concepts with 31 subcompetencies in the domain leadership (AACN, 2022)
- Nurse leadership through role modeling and life-long learning improves practice environments and patient outcomes/Culture of Health (Dyess et al.; Joseph et al., 2021; Robert Woods Johnson Foundation, 2023)
- "...strong leadership will be required to realize the vision of a transformed health care system. Although the public is not used to viewing nurses as leaders, and not all nurses begin their career with thoughts of becoming a leader, all nurses must be leaders..." (IOM, 2011, para 2)
- Nurse leaders must gain experience in the science of managing the business, the art of leading people, and the leader within to be a successful leader (AONL, 2023)
- Hallmarks of Excellence in Nursing Education Model includes Effective Institutional & Professional Leadership to "Promote healthy work environment & civility...Assume influential positions in the field...Shape a preferred future" (NLN, 2022)
- Hallmark #1-3 "Students are committed to the professional nursing role including advancement in leadership, scholarship, and mentoring." Promote student enthusiasm for continuing education/professional development, career trajectory planning and seeking leadership roles, serving as mentors, contributions/advocacy for the nursing profession, and actively participating in professional nursing organizations. (NLN, 2019, p. 2)
- "Entry-level nurses are required to make increasingly complex decisions while delivering client care." (NCSBN, 2023, p. 2)
- Leadership programs to provide mentorship, personal branding and professional identity, and global leadership in a diverse world (Sigma Global Nursing Excellence, 2023a); Sigma Theta Tau mission: "Developing nurse leaders anywhere to improve healthcare everywhere" (Sigma Global Nursing Excellence, 2023b, para 2)
- "Leadership is an integral part of the nursing profession" (ANA, 2022, para 1)

Undergraduate Implications

- Start at Orientation
- Clinical Opportunities
 - Clinical Pre and Post Conference Activities
 - Utilize Pre-briefing and Debriefing Strategies and Critical Conversations
 - Active Learning Strategies (Pass the Problem, Cooperative Strategies, Scavenger hunts, Grand Rounds, Clinical Questioning, Field Trips, Two Truths and a Lie, etc.)
 - Interaction with Healthcare Team
 - Professional Introduction (Name, RN, Role, Handshake)
 - Clinical Shadowing of a Leader (Unit Manager, Director, Charge Nurse, etc.)
- Learning Lab and Simulation Opportunities
 - Incorporate Leadership Strategies into Simulation Scenarios, Pre-briefing, and Debriefing-Utilize Pre-briefing and Debriefing Strategies and Critical Conversations
- Didactic/Theory Opportunities
 - Practice Application and Critical Thinking Questions
 - Role Playing
 - Leadership Case Studies/Unfolding Case Studies
 - Additional Active Learning Strategies
 - In-class Debate, Think-Pair-Share, Gaming, E-mail Exercises, Clinical Decision-Making Exercises, Web Assignments, Student-Led Seminars, Jigsaw, Team Building Exercises, Discussions, Peer Learning, Collaborative Learning, Student Presentation, etc.
 - Utilize pre-briefing and debriefing strategies and critical conversations

(Billings & Halslead, 2016; Buresh & Gordon, 2013; Forneris & Fey, 2018; Herman, 2016; Swihart, 2007)



Abstract

All nurses are leaders. To promote a nursing workforce culture where all nurses are leaders, not just those working in formal executive nursing positions, students need to understand that they are learning to be professional leaders in the healthcare field. The importance cannot be stressed enough that nursing faculty need to incorporate leadership competencies into all aspects of nursing education, starting with orientation. Leadership strategies should be included in each student learning opportunity and threaded through theory, lab, and clinical experiences. A primary focus of undergraduate nursing education should be how nurses use their education, experience, and skills to manage and lead patient care. Management of patient care exemplifies nursing leadership at the bedside and leadership strategies are vital to bridge education to practice. As nursing graduates transition to working at the bedside, it is imperative to prepare them to utilize leadership qualities of critical thinking, decision making, collaboration, communication, change, resiliency, and so much more. Compassion and caring are a highly valued trait of the nurse, and should remain so, but we need to exemplify professionalism, leadership, expertise, and advocacy as well (Godsey & Hayes, 2023; Buresh & Gordon, 2013).

Contact Information

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References

- Four Domains and Key Characteristics for Nursing Professional Identity
 - Values and Ethics
 - Knowledge
 - Leadership
 - Professional Competent
 - Communication Skills
- AONL Nurse Leader Competencies
 - Professionalism
 - Communication & Relationship Management
 - Knowledge of the Health Care Environment
 - Business Skills and Principles
- Conflict Management
- Change Agent
- Life-Long Learning
- Role Modeling/Professional Presentation/Promotion of the Brand Image of Nursing
- Advocacy
- Manager of Care
- Ethical Decision Making
- Critical/Strategic/Systems/Adaptive Thinking Skills
- Implementing Best Practices
- Autonomy
- Professional Nursing Association Participation
- Skilled (Business, Leadership, Nursing Tasks, etc.)
- Technological Competences
- Diversity, Equity and Inclusion Champion
- Influencing Behaviors
- Collaborator (Healthcare Team, Community, Legislators, Associations, etc.)
- Relationship Builder
- Positive Motivator
- Mentor
- Coach
- Dedicated/Committed
- Innovative
- Caring
- Accountable
- Situation Management
- Nursing Practice and Application
- Clinical Judgement
- Visionary
- Goal Achiever
- Organized

(AONL, 2015; AONL, 2023; Best, 2020; Cockerell, 2014; Dyess et al.; Godsey & Hayes, 2023; Heyck-Merlin, 2016; Joseph et al., 2021; NCSBN, 2023; Re-Imagine Nursing with Dr. Judi Godsey, 2023; Studer, Q., 2003; Tagliarene & Brewington, 2018))



Provided in the handout