

Nursing Department  
National Advisory Board  
Crown Council Report  
April 2015

July 2014 was the launch of the Nursing Department National Advisory Board.

**Nursing Department History**

Gustavus and Bethesda Lutheran Hospital were both founded by the Swedish Lutheran Church in the mid to late 1800s, in response to the great need for education and health care among struggling immigrants. The college and the hospital had an obvious sibling relationship. Students at Gustavus interested in medicine or religion became doctors and chaplains for Bethesda Hospital, and the hospital's nursing students were required to take a semester each of chemistry, ethics, and religion at Gustavus.

The Brown Report of 1948 was a national recommendation that nursing programs move to a baccalaureate degree. In 1954, Bethesda built a dorm, called Mattson Hall, in partial anticipation of Gustavus nursing students in the future having a residence hall while fulfilling two years of clinical experiences at Bethesda. In the fall of 1956, Bethesda literally handed their incoming nursing students to Gustavus, much to the surprise of that class! These first Gustavus nursing majors graduated in the Class of 1960. With exceptionally interesting stories to tell, this tight knit alumni group remains exceptionally supportive of Gustavus nursing! From that first class to the class of 1987, nursing majors spent the first two years on the Gustavus campus taking pre-requisite courses and the last two years on the Bethesda campus taking nursing courses with clinical experiences. The Bethesda campus students were given access to college cars in order to make trips to the Gustavus campus whenever they wanted. The Bethesda students also chose one non-nursing faculty member at Gustavus to provide a course on the Bethesda campus.

The 1980s were hard on most nursing programs across the country due to the Women's Movement. Enrollment decreased in nursing programs across the country. Many programs closed. Gustavus was down to six students interested in nursing as first year students compared to the 1978 graduating class of 50 nursing majors. Enrollment was down to five at St. Olaf, and St. Kate's enrollment was also down. These three programs came together and formed the Minnesota Intercollegiate Nursing Consortium (MINC) in 1986. Students in MINC took classes at St. Kates, and clinicals remained in a variety of settings in the Twin Cities. In 1991, St. Kate's pulled out of the MINC to expand their own program. Gustavus and St. Olaf students returned to their own respective campuses, and nursing faculty travelled between the two schools to allow students to stay on their own campus for all four years.

In 2008, the Minnesota Board of Nursing noted striking institutional differences between St. Olaf and Gustavus during the accreditation evaluation process. In the 2010 report by the Institute of Medicine (IOM) entitled, *The Future of Nursing: Leading Change, Advancing Health*, the IOM proposed the need for nursing programs to be nimble enough to respond to the changing face of health care. Due to growing enrollment at Gustavus and the cumbersome institutional differences that made change difficult, the MINC Administrative Board voted to dissolve the MINC on April 16, 2014. The Board of Trustees of Gustavus Adolphus College gave formal approval to the establishment of the Gustavus Nursing Program on April 25, 2014. The Minnesota Board of Nursing granted continuous approval for the Gustavus Nursing Program on June 5, 2014. The class of 2016, will be the first class of students post-MINC to graduate from Gustavus. Currently, Gustavus Nursing is preparing for a fall site visit by the Council on Collegiate Nursing Education (CCNE), the accreditation arm of the American Association of Colleges of Nursing (AACN)

## **Interest in Nursing**

- 40% of incoming first-year students indicate they plan on a health career
  - Tom Crady from Admission pulled up a report in 2014 which indicated nursing was the third highest intended major (300) of the 5000 prospective student applicants behind Biology and Biochemistry.
- The Gustavus Nursing Program has increased enrollment from 24 students to 32 students each fall. Due to agency requirements, clinical groups cannot have more than 8 students. The 32 students create 4 clinical groups.

## **Nursing Faculty and Curriculum:**

Four full-time nursing faculty that work together to cover courses that include the following content areas: clinical assessment; individual, holistic, and community assessments; pharmacology and alternative therapies; medical surgical, pediatric, geriatric, maternity, psychiatric, intensive and emergency medical surgical, and public health nursing; leadership, political advocacy, and collaboration/communication among inter-profession health care teams.

Part-time clinical faculty hold master's degrees prepared and actively engage in clinical practice and provide guidance to cover 1 -2 clinical groups per year.

There is a strong connection between the Gustavus Nursing Program and Gustavus Alumni, who provide support as clinical faculty, guest speakers, mentorship of nursing students, financial support of the simulation nursing lab, and funding for student research presentation.

## **Accreditation:**

There are 9 Essentials for Baccalaureate Nursing Education that are required for accreditation:

### **Essential #1: Liberal Education for Baccalaureate Generalist Nursing Practice**

- Involves integrating theories and concepts from a liberal arts education into nursing, such as: applying socio-cultural understanding of diverse human experiences; ethical reasoning; using skills of inquiry and analysis; and promoting advocacy for social justice.

### **Essential #2: Basic Organizational and Systems Leadership for Quality Care and Patient Safety**

- Involves understanding the complex health care environment and promoting safety and quality improvement initiatives.

### **Essential # 3 Scholarship for Evidence Based Practice**

- Involves an active understanding of the research process and the ability to integrate 6 evidences, clinical judgment, inter-professional perspectives, and patient preferences in planning, implementing, and evaluating outcomes of care.

### **Essential # 4: Information Management and Application of Patient Care Technology**

- Involves the evaluation of data from all relevant sources, including technology to inform the care of a patient.

### **Essential # 5: Healthcare Policy, Finance, and Regulatory Environments**

- Involves having knowledge of health care policy, organization, finance, and regulatory environments, including local, state, national and global trends as well as the ability to use an ethical framework to evaluate the impact of social policies on health care, especially for vulnerable populations.

### **Essential # 6: Inter-professional Communication and Collaboration for Improving Patient Health Outcomes**

- Involves team building, communication, and collaborative strategies in working with an inter-profession health care team to deliver evidence-based and patient centered care.

### **Essential 7: Clinical Prevention and Population Health**

- Includes the assessment of environmental exposure, genetic factors, health/illness beliefs, values, and attitudes of individuals, families, groups, communities, and populations, evidence based practice if used to guide health teaching, health counseling, screening, outreach, emergency management, disease and outbreak investigation, referral, and follow-up throughout the lifespan. It also includes advocating for social justice, including a commitment to the health of vulnerable populations and the elimination of health disparities.

### **Essential # 8: Professionalism and Professional Values**

- Includes professional standards of moral, ethical, and legal conduct, accountability; respect for self and others; appreciation of the history of nursing and contemporary issues; and recognizing the impact of attitudes, values, and expectations on the care of the very young, frail older adults, and other vulnerable populations.

### **Essential # 9: Baccalaureate Generalist Nursing Practice**

- Involves the ability to conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients using developmentally and culturally appropriate approaches while recognizing the role of genetics and genomics. It also involves the ability to implement compassionate, holistic, patient-centered care based on evidence that reflects an understanding of human growth, development, pathophysiology, pharmacology, medical management, and nursing management across the health illness continuum, across the lifespan, and in all healthcare settings.

### **Gustavus Nursing Department**

**Mission:** The Department of Nursing fosters the development of nursing professionals who demonstrate the values of justice, faith, community, excellence and service through cognitive practice, integration of learning, ethical reflection, and intercultural understanding.

Graduates of the program are distinguished by:

- synthesis and application of a liberal arts education to provide holistic care
- ethical and reflective practice to promote a just and peaceful world
- the ability to advocate for the health and wellbeing of all people
- a commitment to lifelong learning, leadership, and service to others

The Department of Nursing shares in the Mission of the College through an innovative and dynamic education that embraces the highest standards of teaching and scholarship.

**Philosophy:** The Department of Nursing offers students the opportunity to acquire knowledge and skills necessary for working with individuals and communities in promoting healing and wellbeing across the lifespan. The nursing curriculum provides a broad understanding of the discipline of nursing as a way of looking at the world. Nursing care of an individual with a health variance considers: the family that supports the patient; the home environment in which the patient lives; the community resources available to help the patient; the local, state, and national politics that affect these resources; and the global community from which these resources are taken. As important members of inter-profession health care teams, nurses need to see human needs manifested in diverse beliefs, values, resources, and conditions

that impact the effectiveness of highly sophisticated technical skills, devices and treatments. Throughout the nursing curriculum, students will develop clinical reasoning and critical thinking skills necessary to assess, respond to, and evaluate factors that impact health and wellbeing. Students will have the opportunity to practice inter-profession communication and collaboration, actively participate in the creation of knowledge by engaging in research, examine human issues that impact wellbeing, and advocate for quality, safe, and effective care for patients across the lifespan.

### **NAB Summer Meeting Discussion**

The first meeting was mainly focused on the introduction of members and an overview of the purpose of the NAB. Then the group had a lively discussion on how to improve the clinical experience for students: (using clinical faculty from each agency; allowing students to stay longer in one area of medical surgical nursing rather than moving to a variety of different areas and practicing communication skills with physicians and other inter-profession team members.)

### **NAB Fall Meeting Discussion**

The group discussed such questions as: What does it mean to be career ready? What are the current gaps? What challenges exist in the practice setting? What are changes in the clinical setting that make it challenging? With limited resources on the college side and provider side, how can we prepare the best graduates?

The group generated ideas to help the Department find the right standards and essentials of the program to meet the AACN and Baccalaureate standards while also ensuring the graduates are as career ready as possible. Also, as hospitals and clinics look to reduce costs by reducing training of new staff, this impacts what the College has to teach students.

Ideas focused around the following topics: non-acute care, public health, improved preparation of graduates to reduce turn-over of new hires, preparing students for the workplace atmosphere, behavioral interviews of students in the department selection process, and leadership training.

### **NAB Winter Meeting Discussion**

The group discussed ideas for new clinical sites and how to help students prepare for the job search. The group decided to support an alumni mentoring program for graduating seniors by pairing them with a young alum to help the student transition through their first year after Gustavus.

### **Future Discussions**

The June 2015 meeting will be on campus in conjunction with the Summer Nursing Institute for high school students. Future discussion topics will be about alumni communication and engagement and defining the niche for the Gustavus Nursing program.

### **Members**

Carol Amis  
Logan Becker  
Cindy Gustafson  
Rose Jost  
Jeanne Karp-Oelfke

Joan Krikava  
Gordon Mansergh  
Karen Mathias  
Paula Mesken  
Jamie Newland

Cheryl Olson, Chair  
Kasey Paulus  
Madeline Schmitz  
Barbara Zust, Campus Facilitator