



Development of a Tool to Assess Clinical Educator Role Perceptions

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Objectives and Disclosure

1. The learner will be able to state the three factors/subscales of the Nursing Clinical Instruction Role Assessment Tool (N-CIRAT).
2. The learner will be able to list the two main models of clinical education employment assessed using the N-CIRAT.

Disclosures:

The authors state no conflict of interest and no commercial support was provided.

Cheryl Zlotnick (PI) was partly supported by KAMEA, a grant given by the Israeli government to newly immigrated scientists.



Background

- Nursing faculty shortage (AACN, 2015; Nardi & Gyurko, 2013)
- Partnership models globally (Grealish & Smale, 2011; Kring, Ramseur, & Parnell, 2013)
- Based on employer of Clinical Instructor (CI)
(Allan & Aldebron, 2008; Wilhelm & Zlotnick, 2015)
 - Educational Institution (EI)
 - Healthcare Institution (HCI)



Question and Purpose

- **Question:** Does the CI work role perspective differ based on the partnership framework under which the instructor is employed (EI vs HCI)?
- **Purpose:** To develop a tool to measure CI perspectives of work roles and compare educator perspectives based on primary employer (EI vs HCI).

*CI Clinical Instructor: Undergraduate, pre-licensure, nursing clinical instructor



Tool Development

- Focus Group study: To describe the various roles of the clinical educator in undergraduate nursing programs (Wilhelm & Zlotnick, 2015)
- Sample: Clinical nurse educators in Israel
- Participants in groups

Hospital Type (Beds)	Participants
General (898 beds)	10
General (400 beds)	20
General (651 beds)	25
Psychiatric (228 beds)	6



Focus Group Findings

Three Roles

- Educator Role
- Hospital Partner Role
- Patient Advocate Role

Led to draft of Tool using statements from focus groups



International Collaboration

- Draft of tool by Zlotnick & Wilhelm (Israel)
- Revisions International collaboration
- English, Hebrew, Norwegian versions





Nursing - Clinical Instruction Role Assessment Tool (N-CIRAT)

(Zlotnick et al., in press)

- Measures clinical educators' perceptions of three main roles of the nurse educator
- 25 items on 3 subscales
- 5-point Likert-type scale
 - 1 indicating least importance
 - 5 indicating highest importance
- Total score on subscales



Sample items for each subscale

(Zlotnick et al., in press)

How important are the following to you in your work as a clinical instructor? (1 least importance, 5 most importance)

Educator:

- 1. Instructors have one-on-one time with students on the clinical unit.
- 24. Instructors encourage students to strive to improve clinical care.

Hospital Partner:

- 12. The health facility rewards or recognizes the contribution of instructors.
- 14. Instructors perceive themselves as an important part of the unit.

Patient Advocate:

- 6. Instructors are aware of the patients' needs.
- 23. Instructors formulate treatment plans for safe patient care.

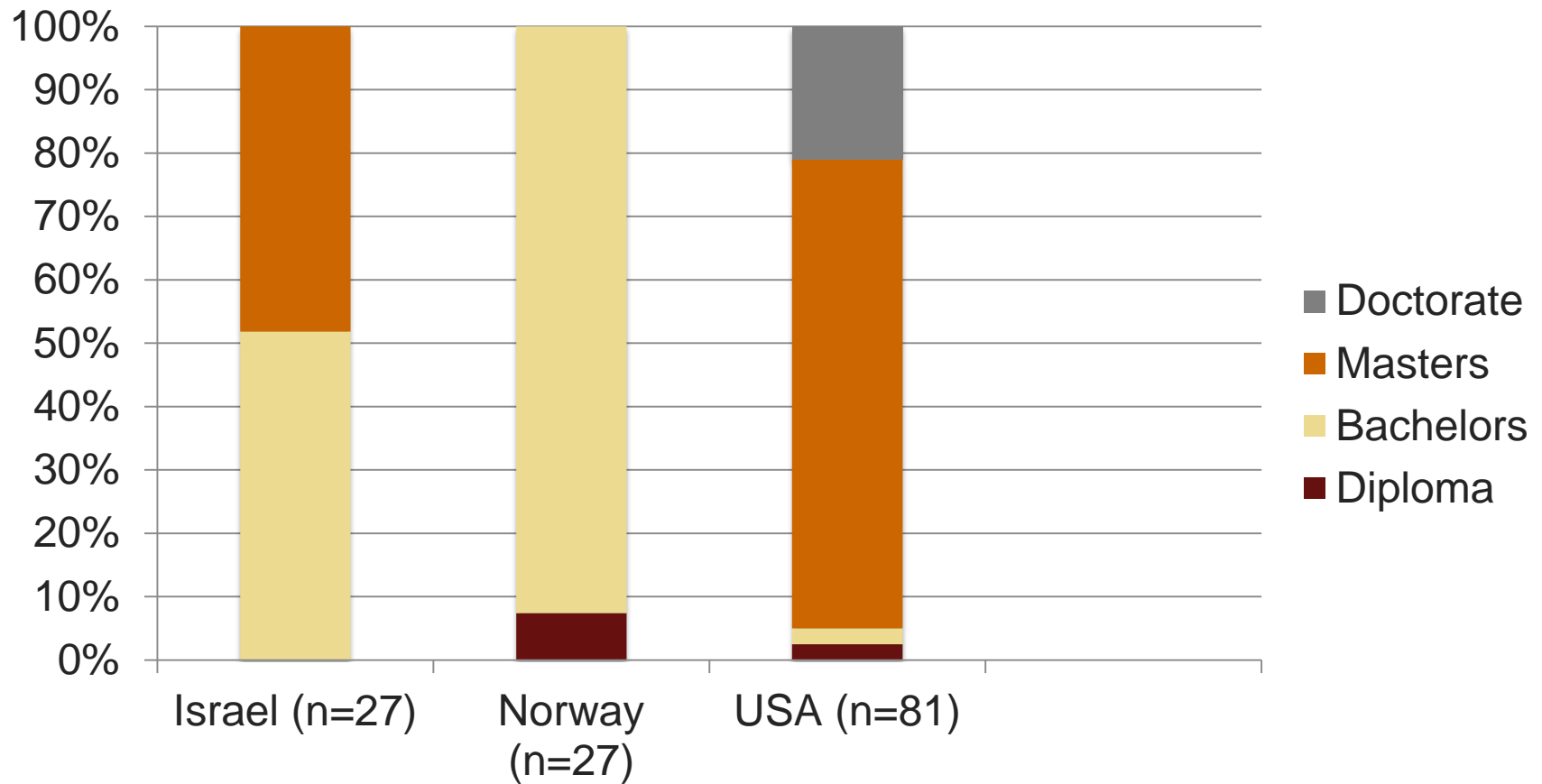


Testing Tool: Recruitment and Sample Criteria

- 5 sites
 - Israel (1), Norway (1), and USA (3 -IN, MA, NJ)
- Inclusion criteria: nurses currently teaching clinical to baccalaureate nursing students
- Convenience sample (N=135)
 - Israel (n=27), Norway (n=27), USA (n=81)
- Snowball sampling
- Email link to an online survey, paper/pencil
- April 2014 thru January 2015

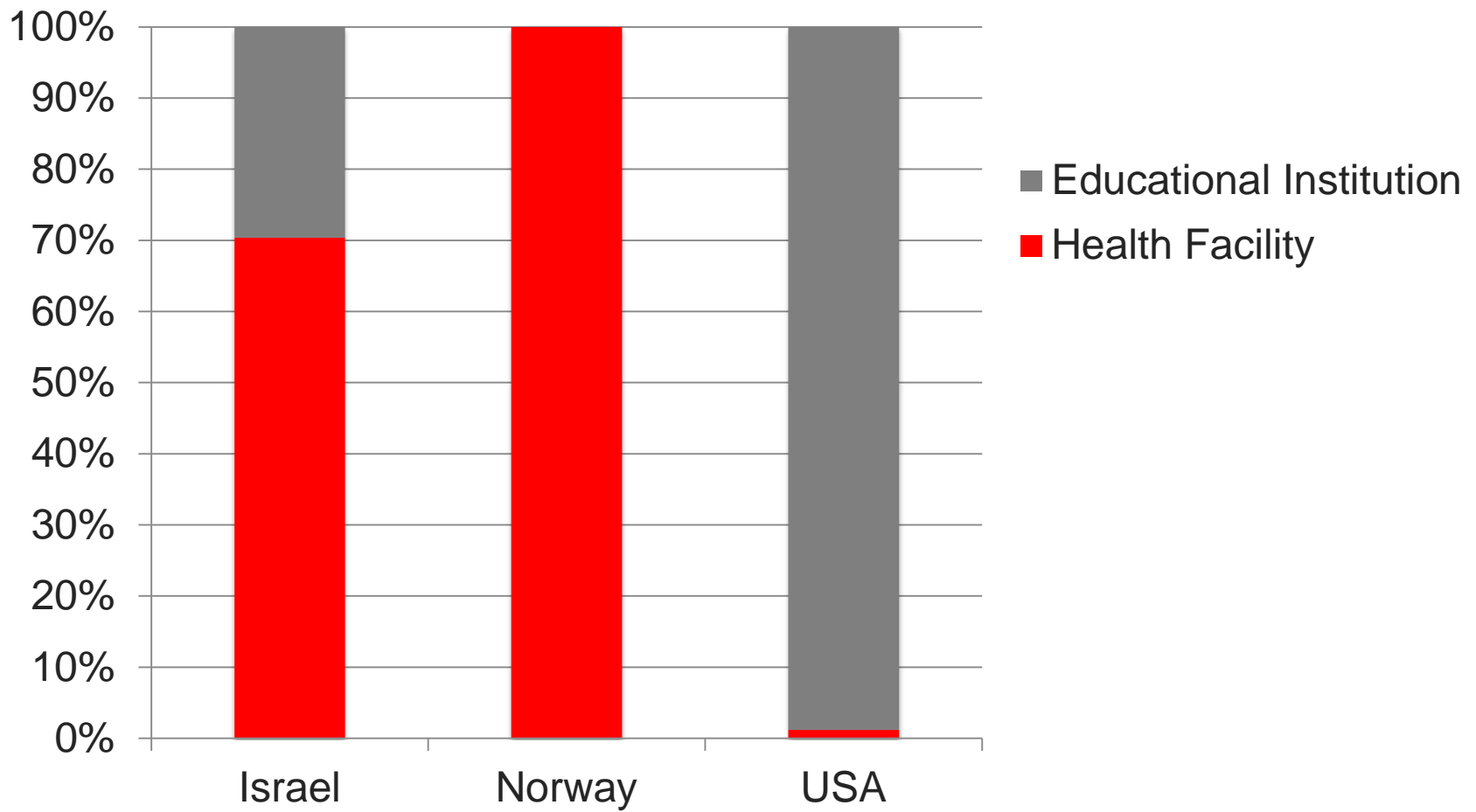


Demographics of Sample: Highest Degree by Country





Primary Employer by Country





N-CIRAT Validity

- Face validity
 - Reviewed by nursing faculty who teach clinical
- Content validity
 - Focus group results
 - Previous research
(Dahlke, Baumbush, Affleck, & Kwon, 2012; Dickson, Walker, & Bourgeois, 2006)
- Construct Validity: Exploratory Factor Analysis (EFA)
 - New area of research (3 countries/3 continents)
 - No model a priori



Exploratory Factor Analysis (EFA)

Factor 1 Educator

Factor loadings 0.44 to 1.00

Factor 2 Hospital Partner

Factor loadings 0.46 to 1.00

Factor 3 Patient Advocate

Factor loadings 0.89 to 1.00

The FACTOR Procedure
Rotation Method: Promax (power = 3)

Target Matrix for Procrustean Transformation

	Factor1	Factor2	Factor3
q9a22	0.77809	0.03559	0.02273
q9a21	0.88633	0.00053	0.03728
q9a25	0.64527	-0.00000	0.18259
q9a20	0.65591	0.12672	-0.00192
q9a17	0.73588	0.00004	0.11898
q9a10	0.44648	0.26325	-0.00407
q9a11	0.65009	0.13958	-0.00002
q9a24	0.62945	0.01497	0.13603
q9a16	0.81734	0.02773	0.01744
q9a19	0.65422	0.10103	-0.01418
q9a9	1.00000	0.00061	0.00321
q9a12	0.00078	0.73587	0.09785
q9a2	0.00257	0.91276	0.01197
q9a4	0.00373	0.95752	0.00104
q9a13	0.00931	0.46586	0.27541
q9a1	0.08609	0.61988	-0.03225
q9a3	0.06660	0.61026	0.05552
q9a5	0.00024	1.00000	0.00000
q9a8	0.21504	0.52677	0.00001
q9a7	0.13286	0.47553	0.06682
q9a14	-0.00405	0.05647	0.96897
q9a18	0.09429	-0.00014	0.91144
q9a23	0.10131	-0.00037	0.89031
q9a6	0.00251	0.05035	1.00000



Factor Analysis Results (cont.)

- Dropped 1 item

Instructors integrate theoretical information into clinical practice. (#15)

- 24-item scale
- Educator role (10 items)
- Hospital Partner role (8 items)
- Patient Advocate role (6 items)



Reliability N-CIRAT (Zlotnick et al., in press)

(Cronbach's $\alpha=.87$)

Clinical Instructor Roles and Standardized Cronbach Alpha Scores by Country

Clinical Instructor Roles	All Countries (n=127)	Israel (n=27)	Norway (n=23) ¹	USA (n=77) ¹
Educator	0.80	0.87	0.85	0.69
Hospital Partner	0.77	0.83	0.73	0.73
Patient Advocate	0.72	0.86	0.71	0.71
Full Instrument ²	0.87	0.93	0.90	0.82

¹Missing values for respondents (n=4).

²Question #15 was omitted due to extremely low correlations to all other questions.



Conclusion

- Practice Implications
- Future Research



Thank You

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Cheryl Zlotnick, Dalit Wilhelm, Sharon Jones
at STTI Research Congress 2015, Puerto Rico



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