Transformational Leadership Operationalized in Concept-Based Clinicals By Using a Faculty Coach

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Session Title:
Clinical Leadership for Transformational Change

Keywords:
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Abstract Summary:
A faculty coach in a clinical support role relates achievements, challenges, and lessons learned. Over the past two years, twenty-five nursing faculty moved from traditional clinicals to augmented, concept-based clinicals. Transformational leadership supported increased nursing student success as evidenced by the number of both AAS and AA degrees.

Learning Activity:

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<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<td>Describe role of faculty coach in a clinical setting.</td>
<td>How the role was developed. Responsibilities. Teaching material needed.</td>
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<td>Describe an example of clinical faculty coach support.</td>
<td>Collaboration with facility staff.</td>
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<td>Discuss two identified challenges of concept-based clinical.</td>
<td>Scheduling activities. Lack of facility support. Solutions.</td>
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<td>Examine two lessons learned as clinical faculty coach.</td>
<td>Help faculty to find own solutions. How to offer resources and support.</td>
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Abstract Text:
Background: Nursing experts are asking which approaches promote nursing student success. Using concept-based clinicals is one approach; faculty support for concept-based clinicals is another. Recently, Williams, Avolio, Ott, & Miltner (2016) used a supportive approach for clinical nurse leader practice integration. We used a similar supportive approach through implementation of a clinical faculty coach position when our nursing program transitioned to concept-based clinicals and 1+2+1 for an RN to BSN pathway. Historically, less than 10% of this nursing program’s graduates planned to continue their education. Methods: Health care clinical site visits were completed at least once per semester for support and to validate clinical concepts with Level I through Level IV clinical faculty (N=25). The clinical faculty
ranged from novice adjuncts to expert clinical instructors. Anecdotal notes, emails, and texts written at the
time of the visit were analyzed for transformational leadership strategies as described by Sherman
(2013). Data were collected on the percentage of graduates who were on the new BSN pathway. Results:
Over the two years, clinical faculty demonstrated growth in owning the clinical concepts; nursing students
benefited from this growth. Thirty-four percent of graduates completed both AAS and AA degrees. The
faculty clinical coach was instrumental in supporting clinical faculty as they successfully transitioned to
concept-based clinicals. Summary. This presentation relates the achievements, challenges, and lessons
learned when implementing a concept-based clinical from a clinical faculty coach perspective. At the end
of this presentation, the nurse participant will have the knowledge to 1. describe the role of faculty coach
in a clinical setting, how the role was developed, the responsibilities, and teaching material needed; 2.
describe an example of clinical faculty coach support through collaboration with facility staff; 3. discuss
two identified challenges of concept-based clinical: scheduling activities and lack of facility support along
with solutions; and 4. examine two lessons learned as faculty coach: help faculty to find own solutions
and how to offer resources and support. Conclusions. The faculty coach project supports Sherman’s
(2013) transformational leadership strategic outcomes, i.e., a healthy work environment and
empowerment of clinical faculty resulting in better patient outcomes. In addition, using a faculty coach
supported clinical faculty efforts to positively encourage nursing graduates on a BSN pathway.