Developing Those Who Develop Others:
Quarterly Educator Symposiums

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Abstract Highlights:
* Large academic clinical setting, various roles have the responsibility of staff competency.
* Monthly Educator Forum- share information, coordinate standardized training.
* Activities expected from this group: orientation; competency programs; continuing education; career development and role transition; EBP, research and scholarship; and academic partnerships.
* Decentralized organization - challenging to coordinate a unified educator development plan.
* Started Off-campus Educator Symposiums

Purpose of the Symposums
• Develop Educator competency

• Teambuilding/Networking

• Collaboration- common initiatives

• Share best practices in teaching learning

How do we do it?
• Educator Forum Steering Group

• Based on learner needs assessments and organizational initiatives

• Budget
Examples of Agendas for some of the Topics

### NNSDO Nursing Professional Development Practice Model

<table>
<thead>
<tr>
<th>ANPD Nursing Professional Development Practice Model</th>
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<tbody>
<tr>
<td>Environment- Practice and Learning</td>
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<tr>
<td>System Inputs- NPDS, Learner</td>
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<tr>
<td>System Throughputs- EBP, orientation, competency, inservices, continuing education, career development and role transition, research and scholarship, academic partnerships</td>
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<td>System Outputs/Outcomes- Change, Learning, Professional Role Competence and Growth</td>
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<thead>
<tr>
<th>Standard 1 Assessment</th>
<th>“Exposures to a Coughing Patient”</th>
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<tbody>
<tr>
<td>Standard 2 Identification of Issues and Trends</td>
<td>“NDNQI and Outcome Indicators”</td>
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<tr>
<td>Standard 3 Outcomes Identification</td>
<td>“Asthma Education for ALL AREAS”</td>
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<tr>
<td>Standard 4 Planning</td>
<td>“The Story of Culture Change with Urinary Catheters”</td>
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<tr>
<td>Standard 5 Implementation</td>
<td>“The Role of the Nurse with Breastfeeding Practices”</td>
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<td>Standard 5A Coordination</td>
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<tr>
<td>Standard 5B Learning and Practice Environment</td>
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### The Role of the Educator

**Adult Learning Principles**

**Domains of Learning** (Technical, Interpersonal, Critical thinking)

**Teaching Strategies** (useful in large group orientation, unit based less than 5, preceptor one-to-one, Education Days, and teaching to competency)

**Evaluate Competency**-

- **Knowledge** (post test, self assessment)
- **Skill** (demonstrate, observe, mock events)
- **Attitude-Critical Thinking/Behavior** (case studies, unit rounds, exemplars, peer review)

**Outcomes** (QI data, presentations, delayed survey)

**Documentation of learning**

- Inservice Program Plan;
- Education Activities Record
- Learning Management System
- Central Orientation class content

**Critical Thinking**:

- Assessing critical thinking (clinical reasoning), Strategies to develop

**Work Improvement Plans**:

- Identifying need; Measurable goals; Implementation plans and Outcome/consequences
EBP and QSEN for Educators

TEAMBUILDING- Common Ground

QSEN (Quality and Safety Education for Nurses): KSAs: knowledge, skills, and attitudes

TEAMBUILDING Bingo Card Mingle

Evidence Based Practice: What is it, 7 Steps & What is a PICO Question?

Educational Outcomes: How to get better ones

De-Escalate Violent Situations

Situational Awareness

Safety of patient, Self and Others

Behavioral Health assessment

Code Violet

Interventions

Communication
Protective maneuvers
Restraints

Stop Lateral Violence

Interference

A. Nonverbal innuendo (raised eyebrow, faces)
B. Verbal affront (covert or snide remarks)
C. Undermining activities (being unavailable)
D. Withholding information (practice or patient)
E. Sabotage (deliberately setting up a negative situation)
F. Interference fractionalizes our energy

Read and ID Case Scenarios

A. Overt behaviors
B. Covert behaviors

Impact HH has on nursing

A. Distractions, break concentration, create stress “Overload”
B. Social Capital

Why do Nurses Bully?

A. Intrinsic Factors
B. Extrinsic Factors

Strategies to decrease HH

A. Awareness
B. Communication
C. Responding to horizontal hostility

DESC Communication Model

A. Describe– Lead with the fact
B. Explain– Let them know the impact (pause, pause, pause)
C. State– What you want. Be descriptive
D. Consequences– Describe impact (individual, social and work environment)

Action Plans

A. Professional Behaviors
B. Action Plan for New Nurses
C. RN Action Plan
### Know your Learner

**Caring approach Model** (Components and Definition of terms)
- Nurturing effective relationships as Educator for Professionals
  1. Staff relationships
  2. Staff engagement
  3. Shared decision making

**Pathways in Professional Development**
- 1. Position based strategies (Expert clinician, Educator, EBP/Research)
- 2. Role based strategies (Committees, Certification, Formal education, Projects, Professional organizations, EBP, CARES)

**Learner Assessment**
- VARK Learning Styles; Benner’s levels; Adult Learning Principles
- Generational Differences (Boomers, Xers and Yers characteristics)
- Cultural Differences (Cultural awareness; Brainstorm- considerations in planning education)

Each table assigned a learning activity (8)
--- Using the 5 concepts from morning, show how they are applied to your activity.
--- Ideas of how to do better incorporating concepts into learning activity

**You Matter Program**
- Second Victim response
- Promoting Resilience and Emotional Well Being in our Workplace

### Critical Thinking

<table>
<thead>
<tr>
<th>Critical Thinking Concepts</th>
<th>A. Facione --- Cognitive and Dispositional Components</th>
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<tr>
<td></td>
<td>B. Scheffer and Rubenfeld--- “Habits of the Mind” ANPD</td>
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<td>C. Ignatavicius ---Characteristics of Critical Thinker</td>
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<th>Preceptor Role in Critical Thinking</th>
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<tr>
<td>A. Attributes of a Critical Thinker</td>
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<td>B. Del Bueno’s performance based system</td>
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<td>C. Simulating Critical Thinking</td>
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<tr>
<td>D. Prioritization Principles</td>
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<tr>
<td>E. Strategies (Teachable Moments, Handling Judgment Errors, Self-Reflection, Reflective Writing, Thinking Out Loud, Concept Mapping, Clinical Scenarios)</td>
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<td>F. Debriefing</td>
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<th>California Critical Thinking Disposition Inventory</th>
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<tr>
<td>Truth Seeking</td>
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<tr>
<td>Open Mindedness</td>
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<tr>
<td>Analyticity</td>
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<tr>
<td>Systematicity</td>
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<tr>
<td>Self Confidence</td>
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<tr>
<td>Inquisitiveness</td>
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<td>Maturity</td>
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<td>A. Low Fidelity (Case studies: “what if’s” and “think out loud”)</td>
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<tr>
<td>B. High Fidelity (Simulation Center, Portable Simulator, Mock Codes, any Scenario)</td>
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<td>C. Debriefing – value of reflection on the simulation experience</td>
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<tr>
<td>A. Examples of Concept Maps</td>
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<td>B. Advantages and Disadvantages of Different Formats</td>
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<tr>
<td>C. Table Exercise – assigned concept to develop a map</td>
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<th>Critical Thinking and the Role of Educator</th>
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<td>A. Communicating Changes in your Area</td>
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<tr>
<td>B. Critical Thinking Video--Discuss application for Clinical Educators</td>
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Combined Symposiums with Managers

Evidence Based Practice

Emergency Preparedness

New IBM Competencies cross-walked with ANPD Roles and Responsibilities

Future Topics:
- Onboarding- links between central and unit based; preceptor development; documentation; feedback loops; first 2 years
- Employee Engagement-

Learning Strategies
- Short Topics
- Case Scenarios
- Table work and present
- Kahoot it
- Audience Response System
- Passport with Stations
- Rapid Fire