

Nurse Faculty Enhancing Best Practices in the Clinical Setting

Phygenia Nimoh, MSN, APN



Introduction

Nursing clinical teaching is a valued and essential part of nursing education (Roberts & Glod, 2013).

Undergraduate nursing students identified preceptors as vital to their clinical learning (Grealish & Ranse, 2009), but staff nurses who precept student nurses may not be prepared to function in this role (Burns & Northcutt, 2009). Preceptors may not have the necessary knowledge and skills to provide care based on best evidence (Ciliska et al., 2011).

Students have noted differences in what they learned at school and how a procedure is performed in health care settings (Adelman-Mullally et al., 2013).



Background

Preceptorship is an effective approach to clinical education by assisting students to develop competence and confidence (Madhavanpraphakaran et al., 2014). Faculty members working with preceptors act as educational resource (Madhavanpraphakaran et al., 2014).

Clinical faculty may observe unequal implementation and administrative support for evidence-based practice (EBP) among units and across settings in a health care organization (Hagler, et al., 2012) but may not see the need to voice their concerns about nursing practice on the clinical unit.

Primary goals in health care are excellence and optimal patient outcomes; clinicians' experience and skills influence clinical decisions (Hagler, et al., 2012). Faculty have the knowledge and skills to ensure quality patient care and are familiar with current evidence.

Recommendations

Faculty must be active participants in clinical settings. Schools of nursing must collaborate with health care organizations to ensure students attain appropriate skills and experience.

Nurse faculty need to play a significant role in nursing practice by collaborating with staff nurses and nurse preceptors to provide an optimal learning experience for undergraduate students (McClure & Black, 2013) and to ensure nursing care is based on best practices.

It is expected that nurse educators will function as change agents and leaders in the complex healthcare settings (Halstead, 2007). They must address nursing care that is not congruent with current best practices in the clinical setting.

Conclusion

Nursing care should be based on current evidence and staff nurses must be congruent with best evidence to provide appropriate care to patients. Best practices in nursing promotes optimal quality care and patient safety, prevents hospital acquired infections, promotes a quick recovery, and prevents adverse events and death.

Nurse faculty have the potential to transform nursing units by providing information and suggestions about new evidence for change in nursing practice (Adelman-Mullally et al., 2013). It is important for faculty to collaborate with staff nurses to ensure safe and quality nursing care.

Clinical faculty in academic institutions that integrate EBP into curriculum can serve as a resource for clinical agencies to advance EBP (Hagler, et al., 2012). Nursing students are expected to learn and provide evidence based care; they need to be guided by clinicians who believe in and implement EBP (Hagler, et al., 2012).



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