Partnering to Increase the BSN Workforce
Suzanne Zentz, DNP, RN, CNE and Christina Cavinder DNP, RN, CPNP-PC

Background
- A highly educated nursing workforce improves nursing care, increases patient safety and decreases patient mortality (AACN, 2015).
- Institute of Medicine (2010) recommends that 80% of the RN workforce be prepared at the BSN level or higher by 2020.
- Currently, 65% of nurses in the US are BSN prepared or higher – less than 50% of nurses in Indiana hold a BSN degree (Health Workforce Studies Program, 2015; NCBSN, 2015).

Purpose/PICOT
- The purpose of this project is to increase the proportion of BSN prepared nurses within Northwest Indiana.
- What is the effect of implementing a RN-BSN Completion Program individualized to meet the needs of participants on retention rates and perceived program barriers?

Needs Assessment
- A survey was created that included demographics, educational preferences, and potential barriers to BSN completion.
- Surveys distributed via email to 887 RNs within the hospital.
- 286 nurses completed surveys for a response rate of 32%

Needs Assessment Results
- Demographic data
  - Age range 22-67 yrs, Mean 41.8 yrs
  - 96% female
  - 94.4% Caucasian
  - Mean years of experience: 15.3 yrs
  - 51.7% completed degree more than 10 years ago

What is your highest level of nursing education?

What are barriers to pursuing a BSN?

Program Design
- Dedicated program advisor
- Assistance identifying prerequisites
- 30 credit program over 18 month period
- Hybrid format with mixture of traditional face to face classes and online coursework
- Classes held one night a week onsite at hospital
- Cohort model with distinct RN classes
- Commitment from hospital administration to provide flexible work schedule
- Collaboration with University and hospital administrators to reduce student fees and maximize tuition reimbursement

Implementation
- Recruited using multiple methods: information sessions, transcript reviews, application open houses, and hospital education fairs
- Streamlined admission procedures
- To facilitate transition back to school, preparatory classes addressing registration procedures, information literacy, and online course management system offered
- Faculty stipends for course development
- Consensus among faculty for course setup, scheduling of courses, and teaching methods

Measurement
- As students matriculate through the program, these outcomes will be monitored:
  - Ongoing retention rates
  - Program completion rates
  - Data from University course evaluations
  - Program evaluation for RN-BSN cohort including comparison of perceived barriers from needs assessment and obstacles encountered, assessment of accommodations provided, overall strengths and weaknesses of program, and suggestions for program improvement

Lessons Learned
- Recruitment
  - Collaborate with Admissions to develop and implement a recruitment plan
  - Provide group general information sessions at the hospital
  - Evaluate transcripts prior to admission to identify prerequisite courses
  - Follow-up with individualized guidance

- Advising
  - Coordinate with University departments (Registrar, Financial Aid/Student Accounts)
  - Create mechanism for recognizing older credit

- Scheduling
  - Reserve classrooms at hospital
  - Partner with hospital to obtain clinical preceptors

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