

Registered Nurses returning to school to complete the baccalaureate degree: Does the educational process empower them to practice differently?

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Research Grant Proposal Submitted to the Faculty Development Committee
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Project Description: An exploratory survey research study to determine if participants in Elmhurst College RN to BSN completion programs increase levels of empowerment while completing coursework toward the Bachelor of Science degree.

Project Summary: Empowerment is a desired characteristic of registered nurses. Nurses who are empowered are often able to work in multidisciplinary teams to assume leadership roles and advocate for patient/family needs to achieve better outcomes. Nurse executives are encouraging nurses to return to school to complete the baccalaureate degree and expect that those nurses will behave differently at the completion of their program. Hospitals with higher percentages of registered nurses with baccalaureate degrees have been shown to have lower mortality rates and less situations where caregivers were involved in a “failure to rescue”. If nurses are empowered to achieve better outcomes and hospitals with higher percentages of baccalaureate-prepared nurses have better outcomes on some measures, the question for study is “Do nurses returning to school to complete the baccalaureate degree have different levels of empowerment at the beginning and end of their program?” Using the Klappkovich Empowerment Scale, three consecutive cohorts of registered nurses matriculating in Elmhurst College baccalaureate completion programs will be surveyed during the first nursing course and at the end of the last nursing course. It is expected that this exploratory study will yield data that can lead to a more in-depth understanding of the concept. It may also provide preliminary data that will ultimately lead to a model to explain the development of empowerment and its relationship to better care outcomes.

Project Narrative

In the United States, only 47% of the registered nurse workforce holds a baccalaureate or higher degree (AACN, 2004). At the same time, research shows that hospitals with higher percentages of registered nurses in the US and Canada have lower mortality rates and situations where there is a “failure to rescue” (Aiken, 2003; Estabrooks, 2005; Tourangeau, 2007). Hospital and nursing administrators are encouraging nurses to return to school to complete the baccalaureate degree, and some are developing expanded tuition assistance plans to support them. In addition, many U.S. hospitals are currently seeking recognition as “Magnet Hospitals”, a designation that rewards excellence in nursing practice and quality patient care (ANCC, 2007). One of the many criteria examined in the application process is the percentage of registered nurses holding a baccalaureate degree.

In 2003, the Deicke Center for Nursing Education (DCNE) and School for Advanced Learning began partnering with area hospitals to increase the educational preparation of their nurse workforce. An accelerated degree completion program was devised and graduated its first students in the spring of 2005. Since that time, 65 nurses have graduated with another 20 expected in the 2008 calendar year. In addition to devising a curriculum plan to meet the essential characteristics prescribed by the Commission on Collegiate Nursing Education (CCNE, 1998), this program was developed based on input from area hospital nursing administrators regarding the new skills and behaviors desired in graduates of this program. While meeting the overarching CCNE roles of provider, manager, and coordinator of care, nurse administrators wanted nurses who “saw the big picture” and were assertive when advocating for needs of patients and families in a multidisciplinary environment.

Many nurses who hold associate degrees or diplomas in nursing have never wanted to further their education. Others have always desired the baccalaureate degree but have been held back by access, finance, or family situations. A third group have found themselves in more senior clinical or managerial positions and either recognized the need for further education to be successful or were told by their organizations that a baccalaureate degree would be required to remain in that position. Some investigators have attempted to examine the reasons for returning to school and the effects of formal education on the practice of these nurses. Many report that they are practicing differently at the end of their educational experience, having more appreciation of the broader needs of the health care system and how they can affect it (Cangelosi, 2006). Anecdotal conversations with Elmhurst College graduates indicate that they do have a different perspective of professional nursing at the end of their educational experience. In addition, follow-up surveys of graduates conducted by the DCNE indicate that some have moved to more senior management positions, care coordinator positions, or elected positions representing the professional nursing staff in self-governance activities in their organization. What are the concepts and traits that cause behavior change in these nurses? The concept that has been chosen for study in this project is that of empowerment. Empowerment is defined as “the process of increasing the capacity of individuals or groups to make choices and to transform those choices into desired actions and outcomes” (Alsop, Bertleson, and Holland, 2006). In a qualitative study examining the role of education of registered nurse baccalaureate students, one of the themes that emerged was translating knowledge into empowerment to act (Delaney, 2006). Nurses in the study reported that both self-perception and perceptions of others were changed. This enabled them to see themselves as more able to effect change and to appreciate the viewpoints of others.

Employers also desire increased empowerment in their staffs. Powerless nurses are often less satisfied with their jobs, ineffective, and more susceptible to burnout or depersonalization. In addition to having care provided that is less than satisfactory, employers are faced with higher turnover rates and budgetary stresses due to turnover costs and the need to use temporary staffing agencies (Manojlovich, 2007). Nurse-managers are trying to create work environments which allow the nurse to have more control over practice, but this requires nurses who have the skills and attitudes to make use of these work environments. (Laschinger & Manojlovich, 2002). Many nurses still do not feel empowered (Fletcher, 2000). This leads to a lack of power, defined by Kanter (1993) as the ability to get things done, mobilize resources, and accomplish goals. This definition of power is remarkably similar to the descriptions of desired nurse characteristics described by local nursing administrators when the current Elmhurst College program was being devised. Benner (2001) further defines the nursing role as one that empowers patients to manage their health states and treatment plans. If a nurse is not empowered, it is unlikely that he or she can empower their patients successfully. Nurses must be prepared to take control over the content of their practice, the context of the practice itself, and the competence of those in the profession itself (Manojlovich, 2007). Many health care institutions have developed self-governance organizations whereby nursing has direct input into all three areas of practice. One of the requisite characteristics of the organizations to be successful is the level of empowerment of the staff as well as the skill set necessary to participate in such self governance (Porter-O'Grady, 2004). Research is still needed to determine how nurse can develop powerful relationships and translate them into improved patient outcomes. Before that can be done, however, it is necessary to more systematically examine levels of empowerment in registered nurse students.

The research question for study is “Is there a gain in empowerment scores by students during an RN to BSN completion program.?” The literature, while suggesting, that education may make a difference, is not conclusive. There are three possible answers to this question. Education may make a difference in levels of empowerment in registered nurse students in baccalaureate completion programs. However, it may also not make a difference, and nurses may have low levels of empowerment at the beginning and end of their programs. Conversely, It may also be the case that nurses who are already feeling empowered are the ones who choose to enter degree completion programs. Therefore a null hypothesis of no difference in empowerment in registered nurse students will exist between the beginning and end of their degree completion program should be tested. To measure empowerment, the Reciprocal Empowerment Scale will be utilized (Klakovich, 1995). This tool was designed to measure empowerment in the context of the leader-follower relationships in organizational settings. It has been developed and tested on registered nurses. An internal consistency alpha of 0.95 has been achieved. The tool has three subscales: reciprocity, synergy, and ownership. Since its original design and testing, the instrument has been used successfully in populations of registered nurses in the work setting. It has not been used with nursing students. However, these students are all registered nurses employed in settings similar to the ones in which it was tested. All of the students are in cohort based programs and have obligations to their employers to remain in these settings because of the tuition assistance they are receiving. Some will go on to leadership positions and all will be practicing in settings where nursing leadership is working through staff to improve clinical outcomes. Therefore, it is expected that this 36 item tool will be appropriate for this population. Consent from the author of the tool has been obtained and is attached (Appendix B). The tool will be administered to consenting students in the next three cohorts to begin the program. It is estimated that

approximately 75 students will begin in either June 2008 or January 2009. The students will be tested at the end of their nursing major courses in either December 2009 or May 2010. A consent form has been developed and is attached (Appendix A). This proposal is also being submitted to the Elmhurst College IRB for approval. Since the program director and DCNE faculty teach in the program and this might be perceived as undue influence on potential subjects, a graduate student research assistant will be employed to explain the study, gain consent and collect the data. While there will be no direct benefits to the subjects of this study, the information obtained will be of great benefit to DCNE faculty and to future students. It will enable us to better understand strengths and limitations of our program, as well as potentially design new educational experiences to promote empowerment in registered nurse degree completion students. Long term goals could include development of a model to explain and later predict development of empowerment in registered nurses and to relate that development to improved patient outcomes. Such a model could improve the practice of professional nursing.

The grant applicant has been a research assistant and site manager on multi-site nursing studies in previous positions. She has done data analyses on several studies and have published an article on managing large data sets. Empowerment scores and subscales will be collected with the difference between time one and two analyzed using paired t-Tests. Principal components extraction will be utilized to determine if the subject responses from this study load on the same factors as previously reported in the tool testing and other nurse studies. If sufficient numbers of subjects are obtained, scale scores will be examined for their relationship to a limited number of demographic factors including type of nursing position the subject holds and years of experience in professional nursing. It is anticipated that the data will be developed into an article for publication for a referred journal such as the *Journal of Nursing Education*. It is also

possible that the study could be submitted for presentation at the American Association of Colleges of Nursing annual baccalaureate nursing conference.

As described in the project plan, the data would be collected between June 2008 and May 2010 with analysis and article preparation being completed in the summer of 2010. Since this is a preliminary, exploratory study, a \$500 research grant is being requested. The funds would be used to pay a graduate student \$75 for each of six data collection sessions, for a total of \$450. An additional \$50 for paper and print supplies for preparation of the surveys is being requested for a total of \$500.

The applicant has not received prior research grants. The studies in which I have participated have been as a research assistant or a site manager, where someone else was the funded principal investigator.

Recent Publications/Presentations are as follows:

Presentations:

“Benefits of Academic Partnerships for Educators, Students, and Nurse Administrators” October 2004, Atlanta, GA. Conference sponsored by Rutgers, Villanova, and University of Pennsylvania at the Annual Meeting of the Professional Nurse Education Group.

“Role of Research in Advanced Practice” – Advocate Lutheran General Hospital, April 2005.

“ Meeting expectations of clinical partnerships while maintaining academic credibility” – American Association of Colleges of Nursing, 2005 BSN Conference, Chicago, IL -- December 2005

“ What is Evidence-based practice” Advocate Lutheran General Hospital, Nursing Research Symposium, December 2005“

“Designing and delivering a successful RN to BSN degree completion program” 2006 International Conference- Commission on Adult and Experiential Learning (CAEL), November 2006

Publications:

Pabst, M. (2000). Methodological Considerations: Using Large Data Sets. *Outcomes Management for Nursing Practice*, 2(1) 1-5.

Pabst, M. (2005) Isolation and Disability, in Albrecht, A., ed. *Encyclopedia of Disability*. Thousand Oaks, CA: Sage Publications .

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Appendix A
**Decike Center For Nursing Education
Elmhurst Collge
Consent to Participate in a Research Study**

Information for the participant:

You are being invited to take part in a research study about nursing behaviors in the workplace. If you take part in this study, you will be one of about 75 people to do so. The person in charge of this study is Dr. Mary Pabst of Elmhurst College. A graduate research assistant will be employed to collect the data and to prepare it for analysis.

This research is being funded by the Faculty Development Committee of Elmhurst College. None of the researchers participating in this study stand to gain financially or personally.

The purpose of the study is to more systematically examine changes in practice that registered nurses display as a result of completing a baccalaureate degree. By doing this study, we hope to learn more about our curriculum and the contributions it makes to your practice as a registered nurse with a bachelor's degree.

If you agree to participate, you will be asked to complete a 36 item questionnaire today and one during the last class in your program. Completion of the questionnaire is expected to take approximately 20 minutes. You will complete the questionnaire in the classroom at the hospital where you normally have class. Your participation in the study is voluntary and will in NO way affect your participation in the degree completion program. The program director, your advisor, or your course instructors will not be able to determine your participation status in this study. The data will be stored in secure space at Elmhurst College. Any identification data will be kept separate from the questionnaire itself. The research assistant will assign an identification number to the questionnaire so that the two surveys can be linked, but the researcher will not have access to the demographic data until the study is completed. When the results are presented, they will be in aggregate form. You will never be identified as an individual.

There are no costs to you to participate in the study other than your time. You will not derive any direct benefits from the study.

Before you decide whether or not to participate in the study, please ask any questions that come to mind now. Later, if you have questions about the study, you can contact the investigator, Dr. Pabst, at 630-617-3506. If you have any questions about your rights as a research participant, contact Dr. Pat Ackles, Chair of the Elmhurst College Institutional Review Board, at 630-617-3584.

I, _____, agree to participate in the study being conducted by Dr. Mary Pabst as described above. I have been given a copy of the signed consent form.

Signed: _____

Date: _____

Appendix B

Marilyn D. Klakovich, DNSc., RN, CNAA, BC
mklakovich@apu.edu

January 3, 2008
Mary K. Pabst, PhD, RN
Director of BSN Partnerships
Elmhurst College
190 S. Prospect St.
Elmhurst, IL 60126
630-617-3506
630-617-3237 (FAX)
pabstm@elmhurst.edu

Dear Dr. Pabst:

I was pleased to hear that you are interested in using the Reciprocal Empowerment Scale (RES) in your study the role empowerment plays in your RN-BSN graduates.

I am happy to grant you permission to use and reproduce the RES subject to the following terms and conditions.

- Permission to use the RES is granted royalty free for individual research and institutional non-commercial use. This permission does not extend to reproduction or transmission of the instrument or scoring guidelines on a computer network, Intranet, Internet server, or Interactive Voice Recognition (IVR) system. It also does not extend to those wishing to re-sell, sub license, or otherwise distribute the RES or scoring guidelines as part of their product or service offerings (whether or not a fee is charged). Such use requires a fee, and interested parties should contact me directly for more information.
- The RES is not to be altered in any way without my permission.
- The complete RES is not to be included in any publications. You may include the sample items included in Table 3 in the *Journal of Nursing Measurement* article*.
- After you complete your study, I would like to receive a copy of the results.

* Klakovich, M.D. (1995). Development and psychometric evaluation of the Reciprocal Empowerment Scale. *Journal of Nursing Measurement*, 3(2), 127-143.

Please let me know if you have any questions. I would be happy to provide any assistance that I can. Good luck with your study!

Sincerely,

Marilyn D. Klakovich DNSc., RN, CNAA, BC