

# Academic/Practice Innovation: An Interview with Dr. Kenya Beard and Dr. Sally Carlisle

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*Bonsall, Lisa:* Hi, this is Lisa Bonsall, Senior Clinical Editor for Lippincott NursingCenter. And I'm speaking today with Dr. Kenya Beard, Inaugural Dean and Chief Academic Officer at Mercy College School of Nursing, and Dr. Sally Carlisle, the Director for the Nurse Faculty Fellowship at Chamberlain University.

Today we're going to answer some of the questions that were submitted by attendees of the webinar, Preparing the Next Generation of Practice Ready Nurses. Thank you both so much for taking the time to follow up and answer these questions.

I first want to start talking about the faculty residency program that you started at Chamberlain University. It was the first one in the country. So what drove you to develop this program and how did you demonstrate to Chamberlain University that this program should be implemented?

*Beard, Kenya:* That's a great question. And first, thank you Lisa for inviting Dr. Carlisle and myself here to talk about the Nurse Faculty Residency/Fellowship program. This was something that I had thought about for many, many years. As a Macy Faculty Scholar. I had identified that not all faculty come into higher ed with the tools that they need to be successful transitioning from either a bedside nurse or working in the clinical arena. And then coming into a nursing program and being an educator, they didn't always receive the training that they needed in pedagogy and creating exam items for assessing students. And I felt that more needed to be done.

So I had a workshop that I co-created years ago with a colleague and when I left the institution, I still felt that more needed to be done, more than just having workshops to prepare faculty. And recently with this increasing critical shortage of nursing faculty, there's more than 1000, right? faculty vacancies across the country. That, coupled with the national movement to advance health equity and knowing that again not all faculty and not all clinicians were steeped in what healthcare disparities really meant and what their role was in trying to address some of those factors.

And so now we have it, where you have faculty coming in that are novice faculty. They're expected to hit the ground running and when they make this transition, if they don't have the formal training, you could see on the back end, inconsistent levels of student outcomes.

When faculty come in without the support that they need to be expert educators in the classroom, that will impact the quality and the delivery of education. So there's a way that we could bring faculty in so

that they can hit the ground running with more skills and more support so that they are successful. Because when the faculty are successful, students have a better opportunity of being successful.

So that's where this originated. The National Advisory Council for Nursing Education and Practice, a few years ago, they called on schools to have this residency program. And I said, Oh my goodness. That's right, this is something now that's in writing. We need to do it. And sometimes you could screen something and it just goes out. And that's just it. It just goes out and it doesn't actually happen. You don't have the support and then some, some organization, some powerful organization could give your idea the air that it needs to move to the places that it would be most beneficial.

So from the beginning we wanted this program to roll out on a national level. We didn't want it just to be one school. We looked at the AACN's nurse residency program for acute care settings. I ask Dr. Carlisle to help me because I knew this was not something that I could do on my own. While I had the vision I needed someone who had expertise in curriculum design and she was it. She was part of the air that was going to breathe life into this program and we were able to come together, collaborate in a way that we created a pitch, that elevator pitch, distributed it to probably 23/24 nurse leaders, nurse educators throughout the country who had expertise in the areas that Dr. Carlisle identified as being very critical, and to our surprise, every single person we invited, they all said yes, they would love to be a part of an Advisory Council that would create this program that was so desperately needed, and to then go back out into the areas that they serve and try to co-create additional fellowship programs or residency programs.

Sally could share, we started out with a residency model, but because we have faculty who have at least six months of experience, for the accreditation piece, we changed it to a fellowship model, so it's the Nurse Faculty Fellowship program. But residency programs are needed as well for faculty who have no education experience, but ours focuses on those who have at least six months.

*Bonsall, Lisa:* Wow, thank you so much. What have been the measurable outcomes you've discovered since implementing the program?

*Carlisle, Sally:* I'll take that question and I would like to echo Dr. Beard and say thank you for allowing us this opportunity to talk about the program. We really identified outcomes at the beginning prior to implementing the program. So we worked with some short term goals and then longer term goals.

Definitely, you know our focus was really you know the teaching and sort of those foundational practices for nurse educators, while also supporting faculty as they, you know, it can be a little scary to realize that we really do have to talk about health equity and social determinants of health and not just what's out there for patients, but what are some barriers in the classroom that occur that keep our graduates from being able to really support and be inclusive practitioners.

So we really wanted to start back there. And so the first place was retention in the program. Obviously, we wanted to retain our fellows. The second is 1 year retention at the university. So our goal is that everyone would remain employed as a nursing faculty. The third goal was achievement of end of course survey benchmarks. At our university, we have very specific questions related to how the students feel about the teaching environment. So really looking at those, but also at the overall end of course surveys.

We want to see also from the student perspective that 90% of our goal is that the faculty would be able to retain 90% of the students in their classroom with the idea that they are promoting that inclusive

belongingness in the classroom. And then long term, we would like to see our fellows be certified nurse educators and then continue to be retained in academia within a nursing faculty role or leadership.

Now that the pilots wrapping up, of course, along the way we have those stated outcomes, but I would like to look a little bit more specifically at some of those tenets of multicultural education and how are the faculty feeling about implementing those tenets. So I'm looking for some reliable and valid tools that that we can use to do a little bit more exploration with the upcoming cohort.

*Bonsall, Lisa:* That's great. Wow, this is so inspiring. What an undertaking that you two have accomplished here. What would you recommend to others who want to develop a similar program?

*Beard, Kenya:* Oh, that's a great question also. First, I think we need to understand in nursing that it's so difficult to be a faculty member of any institution. The demands are so incredibly great, it's just a significant role. You have such a significant impact on student outcomes, and it's important that we recognize not just the role of faculty, but that faculty need the support to be dynamic, to be awesome in the classroom, to be all the things that today's learner needs. And that's not going to happen overnight and it's not going to happen without intentionality.

So oftentimes, faculty development is not part of a budget. It's not, you know, it's one of the first things to go when the money is declining, so I think we need to realize and amplify how important it is to educate and provide professional development for faculty, that's first and foremost, and I really appreciate the fact that at Chamberlain University, they have a faculty development program where they focus 24/7 on the needs of faculty and they coach faculty in their role.

And it's really an exemplar for the country. I'm hoping that other institutions prioritize faculty development, that they don't just look at the residency program or a fellowship program as an opportunity to say, OK, we're training faculty or we're educating faculty. But look and have that vision of where we need to be as a healthcare system, where we're actually saying we need to advance health equity, we need to make sure that every individual has the right to achieve their highest level of health and we are going to graduate nurses, the future of nursing, who is so well prepared to advance that model, that theory,

And I think if we start from that perspective, looking at the end goal. I think we'll be able to create and replicate this program in a variety of ways across the country so that we change the way we transition faculty from the clinician role to the nurse educator role.

*Carlisle, Sally:* I agree Kenya. My first note was you know, what is it that you want to achieve? You know, think about what is it that you would want to achieve with a program like this, but also step back and find out from your faculty what is it that they want to achieve? What do they see as their strengths and opportunities? What scares them about a program like this? Or even about the content about, you know, having difficult conversations and being vulnerable and really thinking about who are the right people and how can you create that space and model for faculty.

That you're allowed to be vulnerable and ask questions and really dialogue so that they can grow through the program, not only learning foundations of teaching, but also teaching about health equity.

*Beard, Kenya:* Well said. It's the marrying of those two domains, that's the critical ingredient to make any residency or fellowship program for nurse faculty successful.

*Bonsall, Lisa:* Great thoughts and great advice. Thank you both so much for sharing your story.

*Beard, Kenya:* Oh, you're welcome. Thank you again Lisa, for inviting us to share our story.

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