What’s Working

Promoting Nursing Student Best Practices for Michigan

Introduction

This white paper offers a framework to better understand best practices to promote the success of diverse nursing students. Examples are offered to illustrate the impact of these programs. The SAFER model that emphasizes social, academic, and financial support paired with the empowerment of students and responsibility by students discussed within these examples offers a robust structure to build inter-institutional approaches to address diversity issues.

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The need to diversify the US nursing workforce has been clearly stated by the Institute of Medicine (IOM) in its landmark 2010 report: “Initiative on the Future of Nursing” (thefutureofnursing.org/IOM-Report) the US Office of Minority Health (OMH), and other federal, state and private healthcare agencies and institutions. This diversification is essential so that culturally and linguistically competent care may be provided to the rapidly growing diverse US population that currently accounts for approximately 37% of US residents and is projected to comprise 57% of US residents in 2060 (US Census, 2012). The diverse population of Michigan is also growing from the current 19.9% to a projected 23% by 2030 (US Census Bureau, 2013). This white paper profiling best practices responds to the need and goal of Michigan stakeholders to diversify the nursing workforce to better meet the healthcare needs of its residents.

Recommendation Four of the IOM “Initiative on the Future of Nursing” report states: “Academic nurse leaders should partner with health care organizations, leaders from primary and secondary school systems, and other community organizations to recruit and advance diverse nursing students.” Therefore, it is critical that the retention and success of diverse nursing students be promoted through best practices. This will build on successful recruitment of diverse nursing students to significantly increase the number of diverse nurses who enter the US nursing workforce.

Best practices that are associated with promoting the success of diverse nursing students have the following characteristics: 1) documented success, 2) cultural and linguistic competence, 3) scalability, 4) portability and 5) respond to complex social challenges. Best practices with these characteristics have the greatest potential for
sustainability as well as rapid and smooth implementation by health care stakeholders across the US.

Cultural and linguistic competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. Cultural competency is one of the main ingredients in closing the nursing workforce disparity gap in the US. It is a way that nursing students and educators and support personnel can come together and talk about education and patient care. Student and academic services that are respectful of and responsive to the health beliefs, practices and cultural and linguistic needs of diverse nursing students can promote successful outcomes (OMH, 2013).

Best practices that promote the success of diverse nursing students must be scalable. Scalability is the ability to retain performance levels when adding additional resources in response to increased demand. Scalable best practices promote the success of all nursing students by yielding commensurately and calculable results in relation to increased resource investment. Scalable best practices also facilitate budgetary planning with successful execution by academic and community entities.

Portability is transferability of best practices from one geographic region or educational setting to another. This makes best practices generalizable and applicable to diverse nursing students throughout the urban and rural US. Furthermore, best practices that are portable can be employed in public, private, and for-profit educational or academic models with expected outcomes.

**RECRUITMENT**

Several best practices have been identified to promote recruitment of diverse nursing students. Some of these best practices include the following:

1. Partnering with institutions that have been designated as either Hispanic-serving institutions or historically black colleges and universities to maximize outreach
2. Conducting early developmental, age-specific outreach efforts into diverse communities to maximize awareness of nursing careers
3. Maximizing social media outreach to diverse populations through age-specific strategies

The following are examples of programs that demonstrate application of best practices for recruitment of diverse nursing students.

**Bridging high school with higher education**

The University of Wisconsin-Milwaukee (UWM) School of Nursing implemented a comprehensive program to recruit and increase the college success of minority students interested in nursing or a health-related career. The Health Careers Bridge Program ([www.ncbi.nlm.nih.gov/pubmed/8830134](http://www.ncbi.nlm.nih.gov/pubmed/8830134)) is a pre-collegiate program aimed at providing mentoring, instructional and practicum experiences, and exposure to

Josie Foley, RN, MS, CCM, National Association of Hispanic Nurses Michigan Chapter

“Supporting student success in college-level math and science coursework helps ensure bridge program students realize their health care career aspirations.”
The program also provides college preparation support throughout the senior high school year as well as continued support throughout college for all participants. Participants must have at least a B average in math and science and an interest in a health profession.

The program begins in the summer following the students’ junior year of high school with a two-week orientation seminar composed of didactic training and computer and clinical laboratories related to health care topics and college success. Following the orientation, participants take part in a supervised clinical practicum at nearby hospitals which allows them to learn about the health care professions directly and to observe professionals in specialty areas such as the operating and emergency rooms. The final week of the program consists of an introduction to professional activities such as attending a national conference, or visiting congressmen. Throughout their senior year, students take part in a two-semester preparation seminar and in community service programs and activities with health care professionals. Upon completing the college preparation seminar, visits are arranged to colleges and universities both regionally and nationally.

This UWM Bridge program has met with both recruitment and retention success. Students’ interest in pursuing their career choice in the health care professions was heightened. Mentors and program faculty reported that students are exemplary and are committed to the program, and that there is a high rate of retention with many of the students graduating successfully (Underwood & Fay, 1996).

Expanding the nursing pool

Paraprofessionals in the nursing profession, such as allied and auxiliary healthcare workers, are a viable source of future minority nurses since there is a much larger minority representation among these workers (Dower, McRee, Briggance, & O’Neil, 2001). However, these allied and auxiliary health care workers face numerous barriers to entry to the nursing profession such as lack of mentoring, lack of financial incentive to pursue nursing, limited information about career options and nursing education, inflexible and incompatible work and class schedules, and lack of synchronization and coordination between nursing education and auxiliary and allied health care training programs.

The California Workforce Initiative, a project to promote the diversification of the nursing workforce in California, published its report, “Diversifying the Nursing Workforce: A California Imperative” (futurehealth.ucsf.edu/Public/Publications-and-Resources/Content.aspx?topic=Diversifying_the_Nursing_Workforce_A_California_Imperative) (Dower, McRee, Briggance, & O’Neil, 2001). This report documented research on the barriers faced by minority nursing students and auxiliary and allied professionals in the nursing profession. It also described five case studies of innovative and successful programs to increase the recruitment of minority nurses. Six strategies were recommended for removing the barriers to minorities entering the profession.

Three of the programs studied focused on helping allied and auxiliary nurses transition into nursing. These were Project Ladders in Nursing Careers (Project LINC), the Kaiser Permanente and Health Care Workers SEIU Local 250 Collaborative, and Health Care Integrated Education System. Two programs focused on helping elementary, middle, and high school students explore career options in nursing and other health professions. These were Learn About Unlimited New Careers in Healthcare (LAUNCH) and Health Occupations Students of America (Cal-HOSA).

Project L.I.N.C. started in New York in 1988 by involving auxiliary and allied healthcare professionals in a work-study program. They worked part-time with full pay and benefits while becoming full-time students in a nurses training program. Both the Kaiser Permanente and Health Care Workers SEIU Local 250 collaborative and the Health Care Integrated System programs create career ladders or pathways for auxiliary and allied health care workers. In the Kaiser Permanente collaborative, auxiliary healthcare workers receive training to become allied healthcare workers who in turn receive training for more advanced nursing positions. Maricopa Community College District in Arizona developed the Health Care Integrated Education System, a competency-based curriculum which creates multiple entry, exit, and reentry levels to the nursing profession for students and allied health workers with various levels of education and work experience. Students may enter at Level I, which provides basic skills and competencies in health care; at Level II, which provides training in advanced skills and shared competencies for many health care professions;
or at Level III, which is very specialized and advanced and provides students with the prerequisites to complete majors in their health care field of study.

K-12 students may have inaccurate information and negative perceptions about nursing and other health care professions (Dower, McRee, Briggance, & O’Neil, 2001; Greenwald & Davis, 2000). Early intervention programs in the schools can help to dispel negative views of certain careers and present these careers as attractive options. Learn About Unlimited New Careers in Healthcare (L.A.U.N.C.H.), an initiative of California’s Department of Education and Kaiser Permanente, provides information about health care careers using different strategies to capture students’ attention, including rap lyrics. Cal-HOSA, a member branch of Health Occupations Students of America, works with elementary through high school students to redesign health education curricula and implement academic programs, develop counseling, and form community partnerships to prepare students for higher education in health careers. HOSA students are also eligible for academic scholarships. Preliminary evaluations indicate that HOSA students have higher standardized achievement test scores (Dower, McRee, Briggance, & O’Neil, 2001).

Successful recruitment programs require both time and money (Tomas Rivera Policy Institute, 2007). Therefore, it is essential that the retention and success of newly-recruited diverse nursing students be promoted through best practices. This will ensure that diverse nursing students complete studies in a timely manner and join the nursing workforce competently and expeditiously.

RETENTION AND SUCCESS

Best practices that are being used to promote the retention and success of diverse nursing students ideally need to be founded on an amalgamation of social and academic support. This unique combination of support is prompted by the complex challenges that diverse nursing students face in relation to successful completion of studies. These challenges often include: students’ lack of financial support for tuition and living expenses, isolation and discrimination by faculty and peers, and a potential lack of fluency in English, and family responsibilities and work obligations. The SAFER model developed by Swinney and Dobal (2008) provides a framework for best practices that respond to these challenges by combining academic support with comprehensive social support for diverse nursing students.

The SAFER model supports students so that they will be more inclined to remain in nursing school. Components of the model include:

- S (Social Support)
- A (Academic Support)
- F (Financial Support)
- E (Empowerment of Students)
- R (Responsibility by Students)

There are a number of programs described in the professional literature that meet the best practice standards through either purposeful or serendipitous use of the SAFER model. The published literature was reviewed and the following retention strategies
that can be applied to promote the retention and success of diverse nursing students were identified:

• Intense academic support through early at-risk identification and learning-style tailored support. Academic support may include assistance in test taking or study skills, or peer study groups. Support for students for whom English is not a first language or whose English is difficult to understand is also critical. The acknowledgement and reduction of horizontal violence in the educational setting may be needed.

• Targeted social support through wrap-around services combined with case management or retention counselor. This social support can expand to family counseling to deal with relationship violence.

• Financial support may include scholarships or loans. Often an individual staff or faculty may act as a “case manager” or “career coach” to help students find necessary resources. Being accountable for following through with these referrals can empower the student and provide them with an opportunity to assume responsibility for problem solving challenges throughout their course of study.

• Social support through some type of mentorship program. This may take the form of peer support group, and/or mentorship with practicing nurse or a non-faculty advisor.

• Identification of baseline data in relation to the diversity of the educational programs with establishment of concomitant benchmarks or goals. Learn more at michigancenterfornursing.org/diversity

Application of these strategies can be clearly seen in the following three thriving programs that are exemplary in relation to ensuring the success of diverse nursing students. These exemplary best practice programs have documented outcomes, are culturally and linguistically competent, scalable, portable and congruent with the SAFER model.

Economic development initiative

Project ARRIBA is based in El Paso, Texas which is the largest metropolitan area along the US-Mexico border. With a population of nearly 830,000, El Paso County ranks in the lower half of counties in Texas by per capita income. El Paso County’s per capita income is 64% of the national level. 24% of the county’s population is below the poverty line. El Paso County’s median household income is 77% of the national level (Census.gov). Historically, the County ranks low with respect to educational attainment; 31% of individuals over 25 do not have a high school diploma and only 16% have obtained a bachelor’s degree. The region has a civilian labor force of 301,000 and has averaged 7% in unemployment (20,000+ individuals) over the past several years. The unemployment rate is roughly 1.5 points above those for Texas and the US.

Project ARRIBA is an economic development initiative, incorporated on December 16, 1998, as a public, not-for-profit corporation on the premise that a true employment and training initiative must provide a comprehensive, integrated program of occupational, motivational and workplace skills training. It provides wrap-around services that include financial and time organization skills training, child-day care, goal setting and balancing school and family. Every participant is assigned to a case manager that ensures that the training is completed and monitors participant progress. The case managers partner with the nursing instructors to promote the success of enrolled Project ARRIBA nursing students.

Project ARRIBA responds to the need for workforce development program by focusing on residents with the following characteristics:

• Average Age: 32
• 91% Hispanic
• 81% of program participants have been female.
• 64% of program participants have children.
• 70% of program participants earn a 3.0 or higher GPA.
• 77% of Active Participants in training are at or
below Federal Poverty Guidelines.

- 100% of program participants are displaced, unemployed or underemployed.

The impressive outcomes of Project ARRIBA include the following:

- 427 graduates between mid-1999 through 2006
- Pre-program participants average age 30 and earn $7,100 per year.
- Program graduates average age 34 and earn $33,100 per year.
- Graduates have added $185.30 million in income to El Paso’s economy on a present value basis (as of 2006).
- Program’s implied benefit/cost ratio is 28.46, which means that for every $1.00 invested $28.46 is returned to the community.
- Over 90% first try pass rate on NCLEX-RN.
- 94% academic retention rate for FY2008
- 95% job retention rate post-employment.

Project ARRIBA demonstrates the substantial social and economic benefits that can be achieved for those who otherwise would not have the opportunity. Project ARRIBA defines the skills required to succeed in targeted hard-to-fill occupations, and then recruits, trains and develops adults so that they are qualified and ready to fill employer’s needs for skilled workers.

**Mentorship**

An exemplary mentorship program that has been demonstrated to promote the success of the Hispanic nursing student is the “Juntos Podemos” (en: “Together we Can”) program (uthscsa.edu/hscnews/singleformat.asp?newID=4299) at the University of Texas Health Sciences Center. The goals of Juntos Podemos are to improve the achievement of academically at-risk students, to increase student recruitment, retention, and academic progression, and to ensure NCLEX RN success. The mentoring program initially involved 20 Hispanic students and has grown to 301 students. The program pairs first-year nursing students with second- and third-year nursing students by identifying commonalities between the mentor and mentee students, who are called protégés.

The mentors provide the following for their protégés: 1) content review sessions to prepare them for tests, 2) guidance on how to balance academic rigors with family and work obligations and 3) coaching on how to interact successfully with professors and fellow students. Protégés are expected to mentor future students following in their footsteps. The mentors receive a stipend that helps defray their educational expenses. An impressive 98% of the students who participate in Juntos Podemos are academically successful. The Mentoring Toolkit and Handbook

**Remy Bruder, DNP, MSN, BSN, Philippine Nurses Association of Michigan**

“Michigan needs evidence-based resources like the Mentoring Toolkit and Handbook to ensure that our nurses are full partners on the health care team.”
by the Robert Wood Johnson New Careers in Nursing (www.newcareersinnursing.org/resources/mentoring-toolkit-and-handbook) is an outstanding resource for organizations that are considering launching a systematic, goal-driven mentorship program.

The features of these best practice programs that make them culturally and linguistically competent are the following: 1) engagement with diverse program leaders/directors and staff for whom English is a second language, 2) inclusion of participants’ family and peers in program activities, and 3) extensive person-to-person contact with participants. The programs have been operating successfully in communities with significant numbers of Hispanics with increased annual participation in different regions of the state. This indicates scalability as well as portability. Therefore, these programs hold promise for stakeholders throughout the US who are committed to ensure the success of all nursing students.

NEXT STEPS

Best practices that promote the success of diverse nursing students have the following attributes: documented positive outcomes, cultural and linguistic competence, scalability, portability, and congruence with the SAFER mode. Michigan stakeholders can consult these best practices and consider refining existing or building new programs to achieve similar levels of success.

One example to build upon in Michigan is the Detroit Black Nurses Association's mentoring program established in 1985. The program pairs a student nurse with an association member. The mentor must spend at least four hours a week with the mentee. The Association also provides scholarships, tutoring, test taking and NCLEX review, as well as assists with whatever personal needs students may have, including transportation, baby-sitting, uniforms, or books.

ADDITIONAL RESOURCES

American Association of Colleges of Nursing Diversity in Nursing (www.aacn.nche.edu/diversity-in-nursing)

American Association of Colleges of Nursing Enhancing Diversity Fact Sheet (www.aacn.nche.edu/media-relations/diversityFS.pdf)

Future of Nursing Campaign for Action Promoting Diversity (http://campaignforaction.org/directory-of-resources/increasing-diversity)

Measuring success: Results from a national survey of recruitment and retention initiatives in the nursing workforce (www.rwjf.org/en/about-rwjf/newsroom/newsroom-content/2014/05/nursing-school-diversity-initiatives-mostly-successful--study-fi.html)

Michigan Center for Nursing Survey of Nurses 2013 (michigancenterfornursing.org/initiatives/data)

Who Gets to Graduate? Published May 15, 2014 in New York Times Magazine (www.nytimes.com/2014/05/18/magazine/who-gets-to-graduate.html?_r=2)
CONTRIBUTORS

Robert Wood Johnson Foundation national nurse expert

Josefina Lujan, PhD, RN

Dr. J. Lujan, faculty at Western Governors University, has been working for the past 20 years in various capacities with state and national stakeholders to diversify the nursing workforce.

Michigan State Implementation Program Diversity Council

Vicki Ashker, DNP, RN, CCRN, National American Arab Nurses Association

Dorothy Bernard, BSN, MHA, Beaumont Health System

Remy Bruder, DNP, MSN, BSN, Philippine Nurses Association of Michigan

Josie Foley, RN, MS, CCM, National Association of Hispanic Nurses Michigan Chapter

Jonnie Hamilton, DNpc, PNP-BC, NE-BC, Detroit Black Nurses Association

Debbie Lopez, BS, RN, National Association of Hispanic Nurses Michigan Chapter

Nettie Riddick, LPN, ADN, MSN, Detroit Black Nurses Association

Regina Traylor, BSN, MSN, CNS, Ingham County Health Department

Please contact the Michigan Health Council at www.mhc.org/contact-us or 517-347-3332 with any questions, comments, or concerns regarding this report.
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