Registered Nurses’ Beliefs Regarding the
Preparedness of Nursing Students Who Have
Completed the DEU Program

by

Tavithia Heidelburg, RN, BSN

Submitted in partial fulfillment of the requirements for
the Master in Science Degree in Nursing in the
College of Sciences and Health Professions
Albany State University
Spring 2017
Abstract

The purpose of this pilot study was to explore beliefs of Registered Nurses’ regarding the preparedness of nursing students’ who have completed the Dedicated Education Unit (DEU) program. In response to nursing shortage in the U.S., nursing education programs are expanding to keep up with the demand. A critical aspect of nursing education is the clinical experience. An innovation in the clinical teaching environment that promotes evidenced-based practice and high quality clinical education are vital components of the Dedicated Education Unit (DEU). The Dedicated Education Unit was modeled to increase collaboration within healthcare institutions and the student clinical experience. The DEU offers hope for a more positive clinical learning experience with greater opportunities for clinical advancement and successful transition to nursing practice for undergraduate nursing students. The DEU Model of Clinical Instruction serves as the theoretical framework for this study. This quantitative pilot study using a descriptive approach provided necessary information from surveys to evaluate nursing students’ readiness to practice upon completion of the DEU program from the belief of the RN. Survey data obtained regarding RN’s beliefs of nursing students’ readiness to practice upon completion of the DEU was explored for this Pilot Study.
Thank you for your submission of New Project materials for this project. The Albany State University IRB has APPROVED your submission. This approval is based on an appropriate risk/benefit ratio and a project design wherein risks have been minimized. All research must be conducted in accordance with this approved submission.

This submission has received Expedited Review based on the applicable federal regulation.

Please remember that informed consent is a process beginning with a description of the project and insurance of participant understanding followed by a signed consent form. Informed consent must continue throughout the project via a dialogue between the researcher and research participant. Federal regulations require each participant receive a copy of the signed consent document.

Please note that any revision to previously approved materials must be approved by this office prior to initiation. Please use the appropriate revision forms for this procedure.

All UNANTICIPATED PROBLEMS involving risks to subjects or others (UPIRSOs) and SERIOUS and UNEXPECTED adverse events must be reported promptly to this committee. Please use the appropriate reporting forms for this procedure.

All NON-COMPLIANCE issues or COMPLAINTS regarding this project must be reported promptly to this committee.
This project has been determined to be a Minimal Risk project. Based on the risks, this project requires continuing review by this committee on an annual basis. Please use the appropriate forms for this procedure. Your documentation for continuing review must be received with sufficient time for review and continued approval before the expiration date of October 31, 2017.
# Table of Contents

Title Page .................................................................................................................. i

Abstract ...................................................................................................................... ii

Thesis Approval Form ................................................................................................. iii

Table of Contents ........................................................................................................ v

Chapter 1 Introduction ............................................................................................... 1

  Background .............................................................................................................. 1

  Problem Statement ................................................................................................. 1

  Purpose .................................................................................................................... 3

  Significance ............................................................................................................ 3

  Theoretical Framework ......................................................................................... 4

  Assumptions .......................................................................................................... 5

  Limitations ............................................................................................................ 5

  Research Question ............................................................................................... 6

  Definition of Terms .............................................................................................. 6

Chapter 2 Review of Literature ................................................................................. 8

Chapter 3 Research Methodology .............................................................................. 16

  Research Design ..................................................................................................... 16

  Setting .................................................................................................................... 17

  Population and Sample ......................................................................................... 17

  Instruments .......................................................................................................... 18

  Data Collection .................................................................................................... 18

  Data Analysis ....................................................................................................... 18
Limitations ...........................................................................................................19
Protection of Human Subjects .............................................................................19
Chapter 4.............................................................................................................20
Presentation and Analysis of Data ........................................................................20
Chapter 5.............................................................................................................23
Discussion...........................................................................................................23
Conclusion ..........................................................................................................23
Recommendations...............................................................................................24
References...........................................................................................................25
Acknowledgements .............................................................................................28
Appendices..........................................................................................................29
A: Informed Consent............................................................................................30
B: Invitation .........................................................................................................32
C: Cover Letter ..................................................................................................34
D: Questionnaire .................................................................................................35
E: Survey.............................................................................................................36
F: Citi Certificate ................................................................................................37
G: IRB Application ..............................................................................................40
H: Survey Results/Demographics........................................................................50
Chapter 1

Introduction

Background

Nurses’ today play an increasingly important role in addressing the health care needs of the nation. Current innovation of a Dedicated Education Unit (DEU) is to prepare nursing students for clinical practice. Immersing students in a “real practice” environment with opportunities to apply critical thinking in various clinical settings is essential to the preparedness of nurses entering the nursing workforce (Evans L., Costello, Greenberg, & Nicholas, 2013). For the successful entry into the nursing workforce, nursing students’ have to be prepared to practice in this new health care delivery system. Close collaboration with Registered Nurses’ in clinical education are key in the preparedness of nursing students upon completion of the DEU.

The Dedicated Education Unit (DEU) was created as a result of an academic clinical partnership formed at exploring innovation in nursing clinical education. The DEU model involves collaboration with the bedside Registered Nurse (RN) as the Clinical Instructor (CI) to undergraduate nursing students. Bedside nurses’ combination of skills and expertise serve to enhance students’ clinical education and prepare students for practice. The purpose of this project was to explore Registered Nurses’ beliefs regarding preparedness of nursing students upon completion of the DEU.

Problem Statement

According to Spector and Echternacht, less than 50% of nursing students are prepared to practice in entry level positions (Spector & Echternacht, 2013). Today, the
transition of new nurses to practice is even more important. Health care is becoming increasingly complex, and the need for systems thinking continues. The patient population is more diverse, sicker, older, and patients have multiple conditions. Technology is growing exponentially, and nurses are working at a faster pace. Patients are discharged quicker and go home with complex medical, social, and economic issues. Moreover, the looming nursing shortage will soon be triggered by massive nurse retirements, which will leave fewer seasoned nurses and more novice nurses in the workplace.

With the traditional method of clinical learning, each clinical professor had to be divided amongst on average eight nursing students. Traditional clinical method requires that each student be assigned to one client for nursing care, while the clinical instructor’s time is divided among the other nursing students. The problem with the traditional model is that the clinical time is not evenly divided amongst nursing students to allow for a beneficial clinical learning experience that prepares nursing students for clinical practice. Vital clinical skills, such as medication administration, often must be put on hold due to unavailability of clinical professors for one to one student guidance. It is very difficult for the clinical professor to prepare nursing students’ an optimal clinical experience that will prepare them for clinical practice with a high faculty-student ratio of 1:8.

The need for consistent transition-to-practice clinical education programs are needed now more than ever because of changes in health care in the past 20 years. Patients are living longer lives with most having multiple chronic conditions; systems are becoming more complex; and technology is growing at an exponential pace. At the same
time, the focus is on quality improvement, on patient safety, and evidence-based practice, which require high-level thinking to be prepared for clinical practice.

**Purpose**

The purpose of this pilot study was to explore Registered Nurses’ beliefs regarding preparedness of nursing students who have completed the DEU program. The inspiration for the project was driven by my own experience as a Clinical Instructor (CI) on a DEU. Improvements I witnessed first-hand in the progression of nursing students’ clinical education in preparation for clinical practice was phenomenal. There is little published data that exists regarding the effectiveness of a DEU in preparing nursing students for clinical practice from the nurses’ perspective. In this study, surveys were be administered to Registered Nurses’ to measure if nursing students are prepared for clinical practice upon completion of a DEU.

**Significance**

Clinical education is a vital component of nursing education. Experiences students receive during clinical education are directly impacted by the instruction they receive from the clinical faculty. The DEU serves as a village with contributions to raise nursing students in preparation for their role as a nurse (Moscato, 2007). A structured and supportive clinical learning environment not only increases student’s ability to apply learned classroom theory, but also enhances vital clinical components necessary for a positive clinical experience and successful transition for entry into nursing practice. The lack there of with the traditional model of clinical instruction has posed a significant problem in the transition to the nursing profession (Rafiee, 2014).
The DEU is an innovative clinical tool that addresses issues surrounding the clinical experience in preparing undergraduate nursing students for clinical practice. Collaboration of Registered Nurses’ as Clinical Instructors on a DEU serve to close the gap between education and clinical practice. RN’s work closely with senior level nursing students’ in the clinical environment to create opportunities that positively support student learning to ensure quality and safety in the delivery of care for preparedness in nursing practice. Current literature suggests that RN’s on a DEU prepare nursing students for clinical practice by submerging students in a real clinical environment that enhances clinical competencies necessary for entry into clinical practice. Let us explore from current literature how the DEU curriculum better prepared nursing students for clinical practice.

Theoretical Framework

The concept of DEUs is one that embodies proven teaching and learning strategies collectively to maximize the preparedness of nursing students’ for clinical practice. The design of the DEU is to provide students with a positive clinical learning environment that maximizes the achievement of student learning outcomes, uses proven teaching/learning strategies, and capitalizes on the expertise of clinicians as RN’s (Moscato, 2007). The DEU was first modeled at Flinder's University of South Australian School of Nursing in 1999 (Rafiee, 2014). Its purpose was to create optimal hands on clinical learning environment for nursing students, to enhance clinical competencies and skills required for a successful transition into nursing practice. The DEU Model of Clinical Instruction served as the theoretical framework for this study, which is a
partnership between the university and the clinical venue specifically designed to maximize nursing students’ clinical learning (Edgecombe, 1999).

Assumptions

For the purpose of this study, assumptions are as follows.

1. RN’s want to prepare nursing students for clinical practice.
2. RN’s are honest in answering the survey questions.
3. Clinical education should be tailored to fit individuals' needs.
4. A survey should be given to assess if nursing students are prepared to practice.
5. Evaluation of survey results are necessary to determine outcomes whether nursing students are prepared to practice.

Limitations

For the purpose of this study, limitations are as follows.

1. This study was limited in its scope because only one 5 question survey was used due to the time limitations for completion of study.
2. The potential for bias may be present, as some participants may not want to be measured into the success of nursing student’s clinical education outcomes.
3. The use of no personal identifiers in data collection alleviated some of this problem.
Research Question

What are RN’s beliefs regarding the preparedness of nursing students’ who have completed the DEU program?

Survey Questions

For the purpose of this study, the research survey questions are as follows.

1. Do you believe nursing students are competent to practice upon completion of the DEU program?

2. Do you believe nursing students are confident to practice as a nurse upon completion of the DEU program?

3. Do you believe the DEU 6 week program is long enough?

4. Do you believe the nursing students are prepared to practice upon completion of the DEU program?

5. Do you believe the DEU curriculum adequately prepares nursing student’ to practice?

Definition of Terms

For the purpose of this study, these are the definition of terms.

1. Clinical Experience: Any situation that involves interactions between nursing students and patients involving the nursing process.

2. Clinical Learning: A process that allows nursing students to incorporate what has been learned from clinical experience as a foundation for future patient interactions.

3. Clinical Instructor (CI): A registered nurse who has been given the opportunity to facilitate learning to nursing students.
4. **Dedicated Education Unit (DEU):** a clinical setting that is developed into an optimal teaching/learning environment through the collaborative efforts of nurses, health care team members, management and faculty.

5. **Clinical Learning Environment:** All variables that exist during a clinical learning experience.

6. **Perspective:** An individual’s opinion or insight on a particular subject.

7. **Registered Nurse (RN):** A nurse who has graduated from a nursing program and passed a national licensing exam.
Chapter 2

Review of Literature

Introduction

This chapter includes previous studies regarding the role of nurses’ in clinical success of nursing students and how the DEU curriculum better prepares nursing students for clinical practice. The DEU allows the RN to serve in the forefront of preparing undergraduate nursing students for entry into clinical practice. The DEU model involves collaboration with bedside Registered Nurse (RN) as the clinical instructor to undergraduate nursing students. Bedside nurses’ combination of skills and expertise serve to not only enhance nursing students’ clinical education but to also develop the skill set in preparation for entry into nursing practice. Enhanced understanding of the essentials necessary in the clinical education of nursing students improve patient care and better prepare students for entry in the nursing profession (Evans L. , Costello, Greenberg, & Nicholas, 2013).

One study by Edgecombe et al. (1999) stated that DEUs dedicated more time for clinical practice and many opportunities for learning through repetition of clinical skills (Edgecombe, 1999). The Clinical Instructor (CI) is dedicated to one, at most two students, each clinical day in order to effectively communicate and teach clinical objectives necessary for a nurse. Learning through repetition daily serves to increase the clinical learning competencies of students. In a traditional setting, there was a lot of confusion on staff nurses and student’s behalf due to the mass number of students present on any given day and the differing levels of clinical practice available.
In my experience on a DEU unit, constant feedback was given which in turn significantly improved nursing student’s knowledge, skills, and daily exposure to learning opportunities. CI’s could learn more about nursing students, their strengths and weaknesses and ways to improve upon; which in turn allowed for a higher level of clinical competency and preparedness into nursing practice. In conjunction with the same CIs, nursing students could develop working relationships and monitor progress in achieving course outcomes in addition to personal objectives. Due to continuity of working relationship, and CI student ratio of 1:1, there were much greater learning opportunities for nursing students. Learning on a DEU fosters accomplishment of fundamental clinical nursing skills through repetition and practice. Every clinical day, in collaboration with CI, students on a DEU could provide care to an entire patient assignment in an effort to increase clinical competencies necessary for preparedness into clinical practice.

Much professionalism was attained on part of CI and nursing students. The set-up of the DEU fostered mastery of clinical nursing skills and tasks, and in turn increased levels of competency and confidence as well. Each clinical day, both the nursing students and I were entitled to put our “best face forward.” In doing so, there was a high level of professionalism and presence to maintain and transfer in providing patient care. In the traditional model, the nursing students were not able to mimic the manner in which staff nurses were able to perform day-to-day functions because of the limited exposure. By providing environments conducive to maintain a working relationship between the CI and the nursing students, higher levels of thinking were fostered. Professionalism and personal relationships enabled the nursing students to feel comfortable and confident in
the development of nursing skills and nursing knowledge. In my experience as a CI, I was able to provide constructive criticism in which the nursing students were much more receptive verses the traditional models. Through my professionalism and working relationships with the student nurses, I was very pleased with the progression in the clinical competencies and patient that I saw taking place.

According to (Ryan, Shabo, & Tatum, 2011), “students could meet and practice all course objectives in a timely manner and students were more pleased with rotation when compared to traditional settings” (Ryan, Shabo, & Tatum, 2011, p. 168). This study also revealed that by providing increased opportunities for learning led to increased participation in the culture of nursing. The DEU was found to provide a unique opportunity into the life of a nurse and improved confidence and knowledge of patient care. Prior to the DEU model, students had limited opportunities in hands on clinical care and insight to staff nursing knowledge. By working alongside staff nurses, the student nurses were able to capitalize on their clinical competencies and were able to feel a part of the nursing team.

Findings from a study authored by Moscato, Miller, Logsdon, Weinberg, & Chorpenning reported, “students were more likely to model professional nursing behavior, staff understood students learning needs, nurses helped develop important clinical learning skills, and that nursing students were members of the nursing unit responsible to nursing staff and the health team” (Moscato, 2007). In my experience as a CI, I could see firsthand the impact made on student nurses as they modeled professional behaviors, values, and beliefs that I had displayed. Clinical competency skills were expounded upon as nursing students participated in practicing even the simplest of tasks
while learning new concepts each day staff nurses on DEU units are much more dedicated to student nurses than traditional units because of the rapport attained by close working relationships of CI and student nurses. Consistency from learning on a DEU unit allowed for an abundance of hands on learning increasing knowledge base of nursing students and clinical skills. Clinical Instructors are vital to the support of optimal hands on clinical learning by working with students on a personal level, recognize strengths, as well as areas for improvement. In traditional units, nursing students were presented with limited clinical time and much redundancy of clinical skills not allowing for expansion of new clinical training and hands on experience. Quality of care and patient safety were also clinical skills acquired with implementation of DEU unit’s verses traditional units. While working on a DEU unit, nursing students were able to increase patient care assignments starting at one and eventually ending up with three patient assignments. This was accomplished by the consistency from the CI and the nursing students by increasing competency levels, fostering optimal learning environments, and appropriate learning experiences based on needs and progression of the student nurses.

Another study by Foster, Hill and Oermann states that “DEU units can meet needs for precepted nursing courses with benefits geared towards successful delivery in the healthcare system” (Foster, Hill, & Oermann, 2015). In the collaborative agreement between the nursing school and the DEU unit, optimal learning is enhanced while fostering a quality learning environment for nursing students. From the beginnings of the DEU, the atmosphere has always been one to provide the best atmosphere in the clinical setting so that the student nurses would gain the most. During their clinical course,
student nurses were given unique opportunities to practice their clinical competencies with their clinical instructors and understand how to function in a real nurse’s role.

According to Mulready-Shick and Flanagan, DEU signify a strong recommendation for viability for the long-term practice in the preparedness of nursing students (p.606). Mutual benefits have accumulated because of the success of the DEU units. The complex decision making strategies exhibited by CI’s provided a solid infrastructure for the clinical standards of the nursing students. Student nurses achieved outcomes and gained new clinical knowledge by way of the DEU that had not previously been explored.

The quality of clinical instruction is improved due to clinical instructors having substantially more time on the unit (Mulready-Shick, Kafel, Banister, & Mylott, 2009). The individualized needs of students were met because of the enhancement and development of learning skills in the clinical setting. Because of the DEU, students exceed clinical expectations and deemed more competent to practice in the nursing profession. Collaboration by CI’s in clinical education assists students in acquiring clinical knowledge and skills necessary for nursing practice.

In addition to nursing students’ achieving greater outcomes, a study by Ranse, K., and Grealish, major themes of students’ perception were identified. Three major themes of accountability, learning, and acceptance were identified (Ranse & Grealish, 2007). Students’ recognized the value in sharing learning experiences with clinical instructors in a real time setting. Students’ exhibited enhanced knowledge and learning on the DEU unit, experiences never shared before on a traditional unit. The study concluded that
clinical experience in an actual work environment for the nursing students’ deemed valuable in preparation toward clinical success.

The enhancement of knowledge and learning for nursing students’ on a DEU unit has not gone into question thus far, but does the DEU address the nursing shortage? According to a study by Svejda, Goldberg, Belden, Potempa, & Calarco, addressing the nursing shortage is a real focus of the healthcare industry (Svejda, Goldberg, Belden, Potempa, & Calarco, 2011). The DEU unit, although recently introduced, has acted to bridge the gap between the student nurse and the workforce. The DEU introduces nursing students to settings of those expected upon graduation. Being baccalaureate prepared means more clinical training and experience during nursing school. By building on practice skills in a more in depth clinical setting is one way to bridge the gap and prepare nursing students for the future of nursing.

The next study by Nishioka explored the DEU model from outcomes of the nursing students’ (Nishioka V. M., 2014). This repeated measure design study compared surveys from nursing students’ on DEU units and traditional non-DEU units. This study concluded that students highly recommended the DEU model because of the high-quality learning environment and mentoring partnerships gained with their CI’s. High quality clinical instruction exhibited by CI’s to the students is key to implementing theory into practice and continuing to gain nurses’ ready for entry into the nursing workforce.

Another study by Nishioka, et. al, examined the perspectives of nurses regarding their clinical role (Nishioka, Coe, Hanita, & Moscato, 2014). The DEU recognizes roles of staff nurses and seeks to maximize upon the use of expert skills and teaching. The satisfaction on part of the CI’s and students were enhanced as a result the clinical
progress. Because of the stronger partnership created on the DEU, clinical teaching roles could be capitalized upon.

Another study by Galuska used a mixed methods qualitative approach to explore the outcomes of the DEU unit and leadership development (Galuska, 2015). According to this study, students exhibited significant increases in leadership development. The DEU units provided the supportive framework that focused on themes of growth and leadership. In today’s innovative healthcare system, nurses are the driving force in leading the transformation and continuing nursing practice.

Themes of leadership, confidence, and enhanced clinical competencies were all attained as a result with the DEU model of clinical training (Evans L. , Costello, Greenberg, & Nicholas, 2013). Nursing students’ have unique opportunities to apply theory in practice and build partnerships with CI’s that they had not previously had the opportunity to. Leading the future of nursing takes more than just incorporating nursing courses into education. Nursing theory provides the basis for our knowledge development but the clinical setting is ultimately where theories get tested. Equipping students with tools for success in the everyday life of a nurse has been shown to be a proven method of clinical delivery for undergraduate nursing student.

The last study by Rhodes et. al, concluded that DEU units also spark interest furthering nursing education (Rhodes, Meyers, & Underhill, 2012) Senior nursing students were given the opportunity to collaborate with sophomore nursing students’ during their last clinical rotation. The partnership, along with that of the CI, sparked interests of preceptorship and nursing education down the lines for the nursing students’.
The future of nursing depends greatly on innovators and leaders in the field to further the movement of healthcare in a positive direction.

In summary, RN’s today play an increasing important role in preparing nursing students for entry into nursing practice. To bridge the gap in nursing education and nursing practice, the collaboration of the DEU and the RN serve as ammunition for the future of proficiency for entry into nursing practice. With the increasing nursing shortage looming in the United States, RN’s are sought to train the next generation of nurses. An environment that is evidenced based and welcoming to the clinical enhancement of nursing students necessary for clinical practice is the primary focus of the DEU. The quality of instruction and clinical competency are significantly enhanced as a result the DEU due to dedicated Registered Nurses’ functioning as clinical instructors to prepare nursing students with the tools necessary for preparedness into nursing practice.
Chapter 3

Research Methodology

This chapter includes the research design, setting, population, sample for data collection and review the instrument used for this study. The procedures used in collecting data and the ethical considerations for this study were identified, including human protection of participants.

Research Design

This quantitative study using a descriptive design provided necessary information from surveys to describe beliefs of Registered Nurses (RNs) regarding the preparedness of nursing students’ who have completed the DEU program. The project design was the result of implementation and evaluation of an evidenced based innovation to improve the clinical learning environment. A Dedicated Education Unit Model of Clinical Learning framework was used to establish the purpose and layout for the scholarly project. This model helped determine outcome data pertinent to evaluating the effectiveness of the program and nursing student’s readiness to practice upon completion from the belief of the RN.

Quantitative or empirical research uses objective data that is measurable. Data were gathered using questionnaires or other objective measures such as surveys. Deductive a way to describe reasoning from general to specific is useful in testing theory. Descriptive studies offer a way to discover new meaning and describe what exists to categorize information (Burns & Grove, 2009). Statistical analysis for the survey was compiled using the Statistical Package for Social Sciences and Microsoft Excel.
There are threats to validity with this chosen design. The study allows for limited control of the environment as well as distracting influences for the participants. By doing the survey using the interview style, the researcher can clarify questions without influencing patient responses. Another threat to this study was the proposed sample size. Discrepancies between results of this study and previous studies may arise from the smaller sample size.

Setting

This study was conducted at a local library in southcentral Mississippi. The collection of data occurred over a one month period. The library has a conference room for needed privacy to conduct the study.

Population and Sample

The study was conducted using convenience sampling. Burns and Grove (2009) stated "in convenience sampling, subjects are included in the study because they happened to be in the right place at the right time" (p. 353). There was no quota regarding race, ethnicity, culture, or socioeconomic status. Inclusion criteria for the targeted population are: a) Registered Nurse; b) able to read, write, understand, and speak English; c) be aged 30-60 years old; d) be mentally and physically able to comfortably complete the survey; and e) have previous experience as a Clinical Instructor on a DEU for at least 2 years. Any person who did not meet the inclusion criteria was excluded.

Using a convenience sample, the sample consisted of 31 females and 2 males who meet the inclusion criteria. The sampling method may under-represent the general population of this rural area.
**Instruments**

The instrument chosen for this study was a survey regarding participant’s beliefs of nursing students’ preparedness who have completed the DEU program. A survey is generally used in a broad sense to mean any descriptive or correlational study. This instrument allowed for the collection of data to be done in personal and aim to obtain the opinions of participants. Surveys are a very important source of data collection and used within many descriptive designs.

**Data Collection**

Invitation and data collection were conducted over a one-month period allowing enough time to recruit individual participants and collect data. Surveys were administered to participants in a conference style “come and go” setting. After ensuring all participants met inclusion criteria and provided consent, data collection began. The survey was administered during the study introduction, with the researcher giving the participant an opportunity to ask any questions prior to answering. The proposed time required for the study introduction and to complete the survey was about 30 minutes. Confidentiality of participants was maintained by not including identifying information on surveys.

**Data Analysis**

Analysis of data was performed using the Statistical Package for Social Sciences and Microsoft Excel for graphing of data. Graphs are used to clearly identify data in a easily distinguishable manner.
**Limitations**

There are limitations in this study that may affect outcome. The convenience sample of RN’s may not be representative of a larger population. First time use of the 5-question survey may affect study outcome as well.

**Protection of Human Subjects**

Approval by the Institutional Review Board of Albany State University and facility used for this study was obtained prior to collection of data. A letter of implied consent was distributed to participants which states that by completing the survey they are providing informed consent. Informed consent was required for participation, following guidelines set forth by this university. Participants were encouraged to be as honest as they could and to ask for clarification on matters they did not understand. Data were maintained in a locked file drawer in researcher’s office, and accessible only to researchers, for a period of one year following conclusion of study and presentation of findings. After this time, all documents will be shredded.
Chapter 4

Data Analysis

After one month study invitation period from December 15, 2016 to January 15, 2017, 33 participants agreed to participate in the study. Data were gathered by the administration of surveys in a conference style “come and go” setting on Saturday, January 21st, 2017 from 1 to 3pm at a local library in southcentral MS. After a brief study introduction summarizing how the DEU curriculum better prepares nursing students for clinical practice, the 5-question survey was then completed by participants.

The survey questions were:

1. Do you believe nursing students are competent to practice upon completion of the DEU program?
2. Do you believe nursing students are confident to practice as a nurse upon completion of the DEU program?
3. Do you believe the DEU program is long enough?
4. Do you believe the nursing students are prepared to practice upon completion of the DEU program?
5. Do you believe the DEU curriculum adequately prepares nursing student’s to practice?

Survey results were analyzed with the help of Dr. Feng and Dr. Amankwaa using basic math for percentages, SPSS, and Microsoft Excel. The purpose of this analysis was to answer the above questions. Data are listed as percentages including female and male participant responses:
To address research question number one, *Do you believe nursing students are competent to practice upon completion of the DEU program*, data consisted of survey responses after the introduction was completed. To answer this question, data analyzed the number of yes and no responses of RN’s. Since a study introduction including the purpose of the study was presented, there was no variation in delivery of information. Our data showed that RN’s did in fact believe nursing students were prepared to practice upon completion of the DEU program. Basic math percentages were used to determine the results of question 1. The data showed that 100% of the participants including all 31 females and 2 males shared the same belief that nursing students were prepared to practice upon completion of the DEU program.

For the number two question, *Do you believe nursing students are confident to practice upon completion of the DUE program*, data were analyzed with the yes and no responses of survey results. Results are as follows: 90% of participants answered yes and 10% of participants answered no. These participants all had previous experience as a CI on a DEU.
For the number three question, *Do you believe the 6 week DEU program is long enough*, data were again analyzed for number of yes and no responses of participants. Of the 33 participants, 73% answered yes and 27% answered no.

For the number four question, *Do you believe the nursing students are prepared to practice upon completing the DEU program*, data were analyzed for each question's yes and no responses. The answer is a resounding yes as evidenced by data of 100% of RN’s who completed the survey. All 33 participants agreed that nursing students are prepared to practice upon completion of the DEU program.

For the number five question, *Do you believe the DEU curriculum adequately prepares nursing students to practice*, the answer is a yes as well. Data from surveys showed that RN’s overwhelmingly believe that the DEU curriculum adequately prepares nursing students to practice.
Chapter 5

Discussion

The purpose of this project was to determine if nursing students were prepared to practice after completing the DEU program from the belief of the RN. The problem researched and identified by survey responses were that nursing students are prepared for clinical practice after completing the DEU program. It was unexpected to find that not only did RN’s believe nursing students were prepared to practice upon completion of the DEU program but that nursing students were more confident towards clinical practice upon completion the program. The foundation that most of participants had received prior to our study was prior experience as a CI on a DEU. The study introduction presented prior to the survey emphasized how the DEU Model of Clinical Education better prepares nursing students for practice, which is vital to clinical success as RN’s. Participants were willing and eager to participate. The study required more time than planned due to the sample size of 33 participants and the need for all 33 participants to have experience as a RN. Participants were also required to have at least 2 years of nursing experience as a CI on a DEU.

Conclusion

The projected outcome of this research study was that Registered Nurses believe nursing students are prepared to practice upon completion of the DEU program. This was an expected result based on the prior experience of the researcher as a CI on a DEU unit. The evidence based conclusion was that in fact nursing students are prepared for clinical practice upon completion of the DEU program. It was also evident from survey results, and in support of previous literature, that nursing students are adequately
prepared by the DEU curriculum and more confident to practice upon completion of the DEU program. In conclusion, the DEU has been shown to be a worthwhile clinical approach in the preparedness of nursing students for clinical practice from the belief of the RN.

**Recommendations**

Based on the outcome of the study, it is suggested that future research should focus on extending the length of time of the DEU program from 6 weeks. In addition to extending the amount of time the nursing students spend with the CI, ways in which to incorporate confidence boosters into the DEU curriculum should be explored. A DEU program longer than 6 weeks may yield greater opportunities to boost confidence in senior level nursing students by instruction of the clinical instructor on a DEU. Different types of DEU learning environments outside of the southern states should be studied toward the contribution of research in the field of clinical education from the perspective of the RN.
References


doi:doi: 10.5480/14-1379


doi:http://dx.doi.org/10.3928/01484834-20150617-05


Acknowledgements

I would like to first acknowledge my wonderful husband, Jerry, and beautiful children, Sidney, Madison, Lauren, Rhiley, and Brooke for your patience which allowed me the time necessary to complete this project. You are and will always be my #1 fans and I love you so much! Secondly, I would like to thank my grandparents, who like to be called “Bigma and Bigdaddy”, for their prayers and continuous support throughout this entire process. I would also like to thank my mom, Angela, for all your encouragement. I would also like to thank Dr. Amankwaa, Dr. Peters, Professor Thorton, Professor Moultrie and the entire ASU Graduate Nursing Faculty for your assistance and guidance.
Appendices
Appendix A

Informed Consent

Research Question: “What are Registered Nurses’ Beliefs Regarding the Preparedness of Nursing Students Who Have Completed the DEU Program?”

You are being asked to participate in a research study. Before you give your consent to volunteer, it is important that you read the following information to be sure you understand what you are asked to do.

Investigators
Tavithia Heidelberg RN, BSN
Dr. Linda Amankwaa, Ph.D, RN

Purpose of the Research
The purpose of this research is to describe the beliefs’ of Registered Nurses’ (RN) regarding nursing students’ preparedness to practice who have completed the Dedicated Education Unit (DEU) program. This quantitative pilot study using descriptive statistics will provide necessary information from surveys to evaluate nursing students’ preparedness to practice upon completion of a DEU program.

Procedures
If you volunteer to participate in this study, you will be asked to complete a 5-question closed-ended survey.
Your participation will take approximately 30 minutes.

Potential Risks or Discomforts
There are no foreseeable risks associated with this study. Should a participant become uncomfortable completing the survey they will be informed of their right to immediately end the survey and not revisit the topic. That participant can choose to have data removed from the study that they feel uncomfortable sharing at any time they choose during the study.

Potential Benefits of the Research
You will not benefit from being in this study. However, by being a participant, you may help us learn how this study could be beneficial to nursing students in the future.

Confidentiality and Data Storage
Your information used for this study will be kept confidential as required by law. The results of our participation in this study may be used for publication purposes, but the results will not include any information that could identify you. Your identity will not be disclosed unless you give specific, separate consent by the law.

Any surveys/questionnaires received will be locked in a safe and confidential location at all
times.

**Participation and Withdrawal**
Your participation in this research study is voluntary. You may refuse to participate or stop participation at any time without penalty. To stop, simply stop answering the questions and turn in an incomplete survey.

**Questions about the Research**
If you have any additional questions about the purpose and/or treatment of human subjects in this study, you may call or write to Dr. Linda Amankwaa, Department of Nursing and Health and Human Performance at Albany State University, 504 College Drive, Albany, GA. 31705, telephone 229-430-7000.

I have read the information provided above. I understand that by returning a completed questionnaire/survey, I am agreeing to participate in this research study.

**KEEP THIS INFORMED CONSENT COVER LETTER FOR YOUR RECORDS.**

Subject Name ________________________________   Date: ____________________

Name of person obtaining consent __________________  Date: ____________________

*I have received a copy of this informed consent document.
Initial of participant _________
Appendix B

Invitation

“Registered Nurses’ Beliefs of Nursing Students’ Preparedness to Practice Who Have Completed the DEU Program”

Dear Participant,

My name is Tavithia Heidelburg and I am a Master’s level student working under the supervision of Dr. Linda Amankwaa in the Department of Nursing and Health Human Performance Division at Albany State University. I am contacting you because you recently provided your name and contact details to me personally and indicated you would be interested in being contacted about being a participant in a clinical nursing pilot based study. The reason that I am contacting you is that we are conducting a pilot study that evaluates the readiness of nursing students to practice after completion of a DEU program and you are needed as participants in this study.

Participation in this study involves coming into the public library, after ASU IRB approval has been obtained, to the first-floor conference room to complete a 5-question survey. The date and time requested for your participation in the survey is Saturday, January 21, 2017 from 1 pm to 3 pm at the public library. The address is 329 Hardy Street, Hattiesburg, MS. 39402. If this date or time poses a problem, please notify me at Tavia601@yahoo.com as soon as possible. The survey should take about 5 minutes to complete and includes space for you to comment. We appreciate your honest responses to the questions in the survey. Albany State University’s Institutional Review Board has approved this research for Human Subjects. If you have any additional questions about the purpose and/or treatment of human subjects in this study, you may call or write to Dr. Linda Amankwaa, Department of Nursing and Health and Human
Performance at Albany State University, 504 College Drive, Albany, GA. 31705, telephone 229-430-7000.

Your participation in the survey is voluntary and all of your responses will be kept confidential. No personally identifiable information will be associated with your responses to any reports of these data.

Please email me with the time that best suits your schedule. I will send a confirmation email indicating that you have been signed up at the time provided and supply you with further information concerning the location of the study.

Should you have any questions, feel free to email me at Tavita601@yahoo.com. Thank you very much for your cooperation. Your feedback is very important to us.

Sincerely,

Tavithia Heidelberg, RN, BSN
Research Cover Letter

Research Question: “What are the Registered Nurses’ beliefs regarding the preparedness of nursing students’ who have completed the DEU program?”

Prospective Research Participant:

Dr. Linda Amankwaa and Mrs. Tavithia Heidelburg, in the Department of Nursing at Albany State University are conducting a study entitled “Registered Nurses beliefs’ regarding the preparedness of nursing students’ who have completed the DEU program”. The primary purpose of this research is inform nurse educators about how the Dedicated Education Unit model successfully supports registered nurses’ functioning as Clinical Instructors toward the enhancement of clinical success in nursing. The information in this study will contribute to existing knowledge in the field of nursing by describing Registered Nurses’ beliefs of nursing students’ preparedness to practice upon completion of a DEU program.

You are invited to participate in this study if you are interested. Data is being collected from Registered Nurses’ with prior DEU experience in the southern states. There are no direct benefits to you from your participation, however, the data will be useful toward the clinical education and enhancement in the future of nursing. There are no risks to you for your participation.

You will be asked to participate in a brief survey consisting of 5 closed-ended questions and one optional narrative. The total time for the study introduction and survey should take no longer than 30 minutes to complete. The survey will take place in an informal field setting.

Your participation is entirely voluntary. If you agree to participate, you may choose not to answer any given questions, and you may withdraw your consent and discontinue your participation at any time. Your identity will be kept confidential. Only the investigators will be aware of your identity. All surveys and forms will be kept in a secure place. If data from this study are presented or published, it will be as grouped data; your identity will not be divulged in any way.

If you have any additional questions about the purpose and/or treatment of human subjects in this study, you may call or write to Dr. Linda Amankwaa, Department of Nursing and Health and Human Performance at Albany State University, 504 College Drive, Albany, GA. 31705, telephone 229-430-7000.

Sincerely,

_______________________
Tavithia Heidelburg, RN, BSN
Appendix D

Registered Nurses’ Beliefs Regarding the Preparedness of Nursing Students’ Who Have Completed the DEU Program Questionnaire

Please fill in the blank or check the appropriate boxes for each of the following questions.

1. What is your age?
   a) ____ 30 - 35  b) ____ 36 - 40  c) ____ 41-50  d) ____ 51 to 60

2. What is your gender?
   a) ______ Female       b) _______ Male       c) _______ Other

3. How many years have you been a Registered Nurse (RN)?
   a) __ 2-5 years   b) __6-10 years   c) __10 to 15 years   d) __Greater than 15 years

4. How long did you practice on a Dedicated Education Unit (DEU)?
   a) __ 2-5 years   b) __6-10 years   c) __10 to 15 years   d) __Greater than 15 years

5. Do you currently work on a DEU unit?
   a)______ Yes   b)______ No

Thank You! You may now proceed to complete the attached survey.
Appendix E

Registered Nurses’ Beliefs Regarding the Preparedness of Nursing Students’ Who Have Completed the DEU Program Survey

*Please check Yes or No to indicate your choice to the questions listed in this survey. DO NOT include your name or any other personally identifiable information. Please return the survey to the researcher upon completion. Thank You.

<table>
<thead>
<tr>
<th>SURVEY QUESTION</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do you believe nursing students are competent to practice upon completion the DEU program?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Do you believe nursing students are confident to practice upon completion of the DEU program?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Do you believe the DEU 6 week program is long enough?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Do you believe the nursing students are prepared to practice upon completing the DEU program?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Do you believe the DEU curriculum adequately prepares nursing students to practice?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

OPTIONAL: Please provide a brief statement that you feel would aid in the success of clinical education and enhancement from a nursing perspective.

______________________________________________________________________________

______________________________________________________________________________
Appendix F

COLLABORATIVE INSTITUTIONAL TRAINING INITIATIVE
(CITI PROGRAM)

COURSEWORK REQUIREMENTS REPORT*

* NOTE: Scores on this Requirements Report reflect quiz completions at the time all
requirements for the course were met. See list below for details. See separate Transcript Report
for more recent quiz scores, including those on optional (supplemental) course elements.

- Name: Tavithia Heidelburg (ID: 5414689)
- Email: theidelb@students.asurams.edu
- Institution Affiliation: Albany State University (ID: 2423)
- Institution Unit: Nursing
- Curriculum Group: Social & Behavioral Research - Basic/Refresher
- Course Learner Group: Same as Curriculum Group
- Stage: Stage 1 - Basic Course
- Description: Choose this group to satisfy CITI training requirements for Investigators
and staff involved primarily in Social/Behavioral Research with human subjects.
**NOTE:** Scores on this Transcript Report reflect the most current quiz completions, including quizzes on optional (supplemental) elements of the course. See list below for details. See separate Requirements Report for the reported scores at the time all requirements for the course were met.

- **Name:** Tavithia Heidelburg (ID: 5414689)
- **Email:** theidelb@students.asurams.edu
- **Institution Affiliation:** Albany State University (ID: 2423)
- **Institution Unit:** Nursing
- **Curriculum Group:** Social & Behavioral Research - Basic/Refresher
- **Course Learner Group:** Same as Curriculum Group

<table>
<thead>
<tr>
<th>Module Description</th>
<th>Date Completed</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>History and Ethical Principles - SBE (ID: 490)</td>
<td>02/21/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Belmont Report and CITI Course Introduction (ID: 1127)</td>
<td>02/21/16</td>
<td>3/3 (100%)</td>
</tr>
<tr>
<td>Defining Research with Human Subjects - SBE (ID: 491)</td>
<td>02/21/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>The Federal Regulations - SBE (ID: 502)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Assessing Risk - SBE (ID: 503)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Informed Consent - SBE (ID: 504)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Privacy and Confidentiality - SBE (ID: 505)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Research with Prisoners - SBE (ID: 506)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Research with Children - SBE (ID: 507)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Research in Public Elementary and Secondary Schools - SBE (ID: 508)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>International Research - SBE (ID: 509)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Internet-Based Research - SBE (ID: 510)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Research and HIPAA Privacy Protections (ID: 14)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Conflicts of Interest in Research Involving Human Subjects (ID: 488)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Unanticipated Problems and Reporting Requirements in Social and Behavioral Research (ID: 21528)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Albany State University (ID: 15047)</td>
<td>02/22/16</td>
<td>No Quiz</td>
</tr>
</tbody>
</table>
• **Stage:** Stage 1 - Basic Course  
• **Description:** Choose this group to satisfy CITI training requirements for Investigators and staff involved primarily in Social/Behavioral Research with human subjects.

<table>
<thead>
<tr>
<th>Report ID</th>
<th>Report Date</th>
<th>Current Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>18795660</td>
<td>02/22/2016</td>
<td>89</td>
</tr>
</tbody>
</table>

**REQUIRED, ELECTIVE, AND SUPPLEMENTAL**

<table>
<thead>
<tr>
<th>Course Description</th>
<th>Report Date</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>History and Ethical Principles - SBE (ID: 490)</td>
<td>02/21/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Defining Research with Human Subjects - SBE (ID: 491)</td>
<td>02/21/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Belmont Report and CITI Course Introduction (ID: 1127)</td>
<td>02/21/16</td>
<td>3/3 (100%)</td>
</tr>
<tr>
<td>The Federal Regulations - SBE (ID: 502)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Assessing Risk - SBE (ID: 503)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Informed Consent - SBE (ID: 504)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Privacy and Confidentiality - SBE (ID: 505)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Research with Prisoners - SBE (ID: 506)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Research with Children - SBE (ID: 507)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Research in Public Elementary and Secondary Schools - SBE (ID: 508)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>International Research - SBE (ID: 509)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Internet-Based Research - SBE (ID: 510)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Research and HIPAA Privacy Protections (ID: 14)</td>
<td>02/22/16</td>
<td>5/5 (100%)</td>
</tr>
<tr>
<td>Unanticipated Problems and Reporting Requirements in Social and Behavioral Research (ID: 14928)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
<tr>
<td>Conflicts of Interest in Research Involving Human Subjects (ID: 488)</td>
<td>02/22/16</td>
<td>4/5 (80%)</td>
</tr>
</tbody>
</table>

For this Report to be valid, the learner identified above must have had a valid affiliation with the CITI Program subscribing institution identified above or have been a paid Independent Learner.

CITI  
Email: citisupport@miami.edu  
Phone: 305-243-7970  
Web: [https://www.citiprogram.org](https://www.citiprogram.org)
Appendix G

APPLICATION/RESEARCH PROTOCOL REVIEW FORM

For Research Involving Human Participants

Institutional Review Board (IRB)
Contact Information: The Office of Research and Sponsored Programs (Billy C. Black Building, Room 389) 229.430.3690

Part 1: Administrative Information

1.1 Proposed Start and End Dates of the Study (mm/yyyy): 09/2016 to 09/2017

1.2 Title of Protocol: Registered Nurses’ Beliefs Regarding the Preparedness of Nursing Students’ Who Have Completed the DEU Program

1.3 Contact Information: Tavithia Heidelburg
   601-754-6046
   TAVIA601@YAHOO.COM

Principal Investigator (PI): (In regard to student researchers, the Principal Investigator of the project will be the faculty mentor/advisor or thesis committee chair. Student researchers will be considered Co-PIs and listed under key personnel.)

Name: Dr. Linda Amankwa
Email Address: Linda.Amankwa@asurams.edu
College/Division: Albany State University College of Nursing
Department/Unit: Nursing
Role in Research: Research Chair
Human Subjects Training Certificate: ☒CITI ☐NIH ☐Other (please list) 

Key Personnel/ Co-PIs:

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
<th>Phone/Ext:</th>
<th>Human Subjects Training Certificate:</th>
<th>Role in Research:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tavithia Heidelburg</td>
<td><a href="mailto:Tavia601@yahoo.com">Tavia601@yahoo.com</a></td>
<td>601-754-6046</td>
<td>CITI</td>
<td>Researcher</td>
</tr>
</tbody>
</table>

1.4 Source of Funding: Choose an item.

Name of External Funding Agency: N/A
Sponsor’s Project ID Number: N/A

Part 2: Proposed Review Category
Please select the proposed review category. If an exempt review is chosen, please complete the Exemption Self-Assessment section. If full board or expedited review is chosen, please move on to Part 3: Study Design, Methods, and Procedures.

☐ Full Board Review: For research that has potentially more than minimal risks and/or the use of vulnerable populations.
☒ Expedited Review: For certain kinds of research that involves no more than minimal risks to human research subjects.
☐ Exempt Review: For research activities that fall under one or more of the exemption categories specified by the federal regulations. Ultimately the ASU IRB is responsible for deciding if research qualifies for exemption; however, use the following self-assessment to see if your project qualifies as exempt:

Exemption Self-Assessment

Please select all the categories that apply to your research protocol from the list below.

1) ☐Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as: regular and special education instructional strategies, or effectiveness or comparison of instructional techniques, curricula, or classroom management methods.

2) ☒Research involving one or more of the following:
   i. Educational tests (cognitive, diagnostic, aptitude, achievement):
      a. If the information is recorded in a manner that individuals cannot be identified (directly or through identifiers linked to the individual), OR
      b. If the information may be recorded in a manner that individuals can be identified (directly or through identifiers linked to the individual), but disclosure of the information could NOT reasonably place the participants at risk of criminal or civil liability or be damaging to their financial standing, employability, or reputation.*
   
   ii. Survey or interview procedures (this exemption category does not apply to research activities with minors/children):
      a. If the information is recorded in a manner that individuals cannot be identified (directly or through identifiers linked to the individual), OR
      b. If the information may be recorded in a manner that individuals can be identified (directly or through identifiers linked to the individual), but disclosure of the information could NOT reasonably place the participants at risk of criminal or civil liability or be damaging to their financial standing, employability, or reputation.*

   i. Observation of public behavior:
      For minors/children: Observation of public behavior of minors is eligible for exemption only if the researcher does not participate in the activities being observed.
      For non-minors: Generally considered exempt from IRB review as follows:
      a. If the information is recorded in a manner that individuals cannot be identified (directly or through identifiers linked to the individual), OR
       b. If the information may be recorded in a manner that individuals can be identified (directly or through identifiers linked to the individual), but disclosure of the information could NOT reasonably place the participants at risk of criminal or civil liability or be damaging to their financial standing, employability, or reputation.*

*Risks of criminal or civil liability or of damage to financial standing, employability, or reputation can be dependent on the context of the research and are determined by the IRB staff based on experience, past precedent and benchmarked best practices. The IRB staff welcomes the input of investigators in determining the possibility of such risks, but if there is reasonable doubt about whether or not criteria b. applies, the research is not exempt.

Note: Exemption category #2 does not apply to research with children, unless the research is exclusively limited to activities described in 2.i (educational tests) and/or 2.iii (observation of public behavior and the investigators do not participate in or manipulate the activities being observed).
3) ☐ Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior, but is not eligible for the above exemption (2), can be exempted if the research participants are elected or appointed public officials or candidates for public office, or federal statute requires that the confidentiality of the personally identifiable information will be maintained throughout the research and thereafter.

4) ☑ Research involving the collection or study of existing (i.e., existing before the request for exemption is submitted to ORIA to determine whether the research is exempt) data, documents, records, pathological specimens, or diagnostic specimens:
   i. If these sources are publicly available; OR
   ii. If the sources are not publicly available, but the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

5) ☑ Research and demonstration projects that are conducted by or subject to the approval of federal department or agency heads, and are designed to study, evaluate, or otherwise examine public benefit or service programs, procedures for obtaining benefits or services under those programs, possible changes in or alternatives to those programs or procedures, or possible changes in methods or levels of payment for benefits or services under those programs.

6) ☐ Taste and food quality evaluation and consumer acceptance studies:
   i. If wholesome foods without additives are consumed, OR
   ii. If a food is consumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.

Part 3: Project Overview:

3.1 Type of project/study: Please select ALL of the categories of work that apply to this proposed project.
   ☑ Active Collection of New Data
   ☐ Active Collection and Use of Human Biological Materials or Physiological Data
   ☐ Use of Physiological or Biomedical Devices, or Drugs, Biologics, or Chemicals
   ☐ Use of Existing Data
   ☐ Use of Existing Human Biological Materials

3.2 Data collection will involve the use of (check all that apply):
   ☑ Surveys/Questionnaires
   ☐ Internet/ Electronic
   ☐ Audio/Video/Photos
   ☑ Interview/Observation
   ☐ Private Records or Files
   ☐ Educational Tests (cognitive diagnostic, aptitude, etc.)
   ☐ Physical/Physiological Measures or Specimens
   ☐ Other (Specify):

3.3 Please provide an abstract of the study in lay terminology, including the purpose, research questions, hypothesis to be evaluated, and expected/possible outcomes. (400 word maximum)

The purpose of this research is to describe the beliefs of Registered Nurses’ regarding the preparedness of nursing students upon completion of a Dedicated Education Unit (DEU) program. In response to nursing shortages in the U.S., nursing education programs are expanding to keep up with demands. A critical aspect of nursing education is the clinical experience. The DEU program offers a clinical teaching environment that promotes evidenced-based practice and high quality clinical education. Dedicated Education Units were modeled to increase collaboration within healthcare institutions and student clinical experiences. In contrast to traditional clinical models, DEU offers hope for a more positive clinical learning experience with greater
opportunities and outcomes for clinical enhancement. DEU Model of Clinical Instruction will serve as the theoretical framework for this study. This quantitative pilot study using descriptive statistics will provide necessary information from surveys to evaluate nursing students’ preparedness to practice upon completion of the DEU program from the beliefs of the RN’s. Survey data obtained regarding RN’s beliefs of nursing students’ preparedness to practice upon completion of a DEU will be explored for this Pilot Study.

3.4 Please describe briefly how this study will contribute to existing knowledge in the field.

This study will contribute to existing knowledge in the field of nursing clinical education by describing nurses' beliefs of nursing students’ preparedness to practice upon completion of a DEU.

3.5 Clearly state all of the objectives, goals, or aims of this project.

The objective of this project is to describe nursing students’ preparedness to practice upon completion of a DEU from the belief of the RN.

3.6 How will the results of this project be used? (check all that apply):

☒ Presentation
☒ Publication
☒ Thesis
☐ Dissertation
☐ Other (Specify): 

3.7 List all locations where data collection will take place. (School systems, organizations, businesses, buildings, and room numbers, servers for web surveys, etc.) Be as specific as possible. Upload permission documentation in IRBNet, if applicable.

Data collection will take place in field research at the local public library.

Part 4: Participants, Recruitment, and Compensation

4.1 Please select all the categories of participants that will be included in your study.

☐ ASU Employees
☐ ASU Students
☐ Children Under 18
☐ Cognitively Impaired Persons
☒ Healthy Adult Volunteers
☐ Pregnant or Nursing Women
☐ Prisoners or Individuals under Detention
☐ Persons Unable to Read, Speak, or Understand English
☐ Persons with Limited Literacy
☐ Persons with Specific Health Conditions
☐ Persons in Foreign Countries
☐ Other Category of Participants Not Listed (Specify): 

4.2 Provide details concerning the participant population you have chosen for this project (e.g., age, gender, race, etc.).

Male and Female gender aged 30-60 with at least 2 years of previous nursing experience as a Registered Nurse (RN) on a Dedicated Education Unit.

4.3 Describe why this participant population is appropriate for inclusion in this research.

This participant population is appropriate for inclusion in this research because these nurses have experience in nursing clinical education within the DEU.

4.4 What is the minimum number of participants you will need to validate this study? ____20
4.5 Is there a limit on the number of participants you will recruit?  ☐ No  ☒ Yes – the number is ____ 40

4.6 Is there a limit on the number of participants you will include in the study?  ☐ No  ☒ Yes – the number is ____ 20

4.7 Please select all of the tools that you plan to use to recruit your participants (a copy must be uploaded in IRBNet):
- ☒ Email
- ☒ Face to face communication
- ☐ Flyers
- ☐ Notices
- ☐ Mailers (U.S. Postal)
- ☐ Online advertisements
- ☐ Presentation at meetings
- ☐ TV, radio, print advertisements
- ☐ Use of internet social media or online networking sites
- ☒ Other (specify): _____ Telephone

4.8 Describe, step-by-step, all procedures you will use to recruit participants.

After ASU IRB approval and prior to data collection, an email will be sent to contacts listed from my personal cell phone directory list. Through email, participants will be asked to participate in a face to face pen and paper survey at the Public Library at the first-floor conference room. After participants have read and given informed consent to voluntarily participate, I will then ask participants with previous nursing experience as Clinical Instructors’ on a DEU in which I am familiar with to consent to a survey. Participants will be provided with cover letter, demographic and informed consent for participation in this voluntary pilot study. A 5-question survey will then be conducted by willing participants without providing any personally identifiable data.

4.9 Will participants be compensated for their participation?
- ☒ No compensation will be given
- ☐ Yes, compensation will be given (specify) ____

Part 5: Consent and Project Methodology

5.1 Will you document written informed consent?
- ☒ Yes
- ☐ No, I am seeking a waiver of documentation of written informed consent.

5.2 Will you obtain written assent for children and individual under 18?
- ☒ Not applicable to this project
- ☐ Yes
- ☐ No, I am seeking a waiver of documentation of written assent.

5.3 Will you obtain written parental or guardian permission for children and individuals under 18?
- ☒ Not applicable to this project
- ☐ Yes
- ☐ No, I am seeking a waiver of documentation of parental or guardian permission.
5.4 Describe, step-by-step, all procedures and methods that will be used to consent participants. If seeking a waiver of consent, please describe the conditions under which the waiver will be used and how participant consent will be determined.

Written consent will be issued prior to participation in this study.

5.5 Describe the procedures you will use in order to address your research purpose. Provide a step-by-step description of how you will carry out this research project.

Step-by-step procedures I will use in order to address the research purpose include:

1. Obtain ASU IRB approval,
2. After approval, send email to personal contacts which fit the demographics,
3. Await participant positive response to participate in the study,
4. Once participant positive response received, plan meeting/appointment at the local library,
5. Formal introduction of self and research study,
6. Obtain informed consent,
7. Allow participants time to ask questions,
8. Provide instructions regarding completion of survey,
9. Allow participants to complete survey,
10. Collect survey data and thank participants.

5.6 Please provide an estimate of the time commitment from each participant of the study.

20 to 30 minutes to complete the survey.

Part 6: Risk and Benefits

6.1 From the list below, please select ALL of the potential risks that are involved in your study.

☐ Use of deceptive techniques (be sure to upload a debriefing form/script)
☐ Use of private records (such as educational or medical records)
☐ Manipulation of psychological or social state such as sensory deprivation, social isolation, psychological stress
☐ Probing for personal or sensitive information in surveys or interviews (e.g.: private behaviors, employer assessments)
☐ Presentation of materials which some participants may consider sensitive, offensive, threatening or degrading
☐ Possible invasion of privacy of subject or subject’s family
☐ Social or economic risk (reputational, cultural, employability, etc.)
☐ Identification of child, spousal, or elder abuse
☐ Identification of illegal activity
☐ Risk of injury or bodily harm
☐ Breach of confidentiality
☐ Other risks (specify) _____

6.2 List and describe the nature and degree of the risks or harms selected above. All of the risks/harms must be disclosed in the consent form. If you are using deception in this study, please justify the use of deception and be sure to upload a copy of the debriefing form you plan to use.

No are no anticipated harms to participation in this study.

6.3 Identify and describe all precautions that will be taken to minimize or reduce the risks or harms list in 6.2 above in order to protect the welfare of participants. Include a description of how you will handle an adverse or unexpected outcome that could be potentially harmful (e.g., suicidal ideation). If the study will include protected populations, identify each group and provide an
explanatory paragraph for each group. Please upload a copy of any emergency plans/procedures and medical referral lists, as needed.

There are no anticipated harms associated with participation in this study.

6.4 If using the internet to collect data, what confidentiality or security precautions are in place to protect (or not collect) identifiable data? Include precautions used during both the collection and transfer of data. (These are likely on the server’s website.)

I will not be using the internet to collect data for this study.

6.5 List all realistic direct benefits participants can expect by participating in this specific study. (Do not include “compensation” listed in #4.10)

The are no direct benefits associated with participation in this study.

6.6 List all realistic benefits for the general population that may be generated from this study.

Realistic benefits for the general population that may be generated from this study may include an increased awareness of nursing students’ preparedness to practice upon completion of a DEU.

### Part 7: Privacy, Confidentiality and Protection of the Data

7.1 Will data be collected as anonymous? (“Anonymous” means that you will not collect any identifiable data.)

☒ Yes
☐ No

7.2 Will data be collected as confidential? (“Confidential” means that you will collect and protect identifiable data)

☐ Yes
☒ No

7.3 Which identifiers listed below will you or any member of your research team collect or have access to? Select all that apply.

☐ Name
☐ Date of birth
☐ Mailing or email address
☐ Phone or fax numbers
☐ Social Security number
☐ Medical records
☐ License, certificate or Vehicle ID
☐ IP address
☐ Biometric identifiers
☐ Photos/images/audio recording
☐ Signatures, handwriting samples
☐ Any unique identifier not mentioned above (specify): _____

7.4 If data are collected as confidential, will the participants’ data be coded or linked to identifying information?

☒ No
☐ Yes, describe how the data will be linked: ______

7.5 Justify your need to code participants’ data or link the data with identifying information.
   N/A

7.6 Where will the code list be stored? (Building, room number, location, etc...)
   N/A

7.7 Will data collected as “confidential” be recorded and analyzed as “anonymous”? N/A
   (If you will maintain identifiable data, protections should have been described in #15.)
   ☐ Yes
   ☐ No

7.8 Describe how and where the data will be stored (e.g., hard copy, audio cassette, electronic data, etc.), and how the
   location where data are stored will be secured in your absence. For electronic data, describe security. If applicable, state
   specifically where any IRB-approved and participant-signed consent documents will be kept [on campus] for 3 years after
   the study ends.
   The confidential and anonymous surveys will be kept in a secure and locked cabinet at all times in my office in my home.

7.9 Who will have access to participants’ data? (The faculty advisor should have full access and be able to produce the data in the case of federal or institutional audit.)
   Myself and faculty advisor.

7.10 What is the latest date that confidential data will be retained? _____ N/A
   ☑ Check here if only anonymous data will be retained.

7.11 How will the confidential data be destroyed? (NOTE: Data recorded and analyzed as “anonymous” may be retained indefinitely.)
   N/A

Part 7: Financial Conflict of Interest

Albany State University policy on Financial Conflicts of Interest Related to Research requires that personnel conducting funded research involving human participants at ASU to disclose known significant financial interests that would reasonably appear to be affected by the research project and that if the interest is deemed to constitute a conflict of interest with the proposed research, the conflict be managed prior to their engagement in the research with human participants.

7.1 Do any members of the research team or any of their immediate family members have any financial interest in the sponsor of this research and/or in the results of this research?
   ☐ Yes (complete a complete and upload a financial conflict of interest form)
   ☑ No

Part 8: Assurances

8.1 Principal Investigator(s) Assurances:
NOTE: In regards to student researchers, the Principal Investigator of the project will be the faculty advisor. The student will input the advisor’s name in IRBNet as the Principal Investigator and will share the project with named person in IRBNet by giving them full access.

1. I certify that all information provided in this application is complete and correct.
2. I understand that, as Principal Investigator, I have ultimate responsibility for the conduct of this study, the ethical performance of this project, the protection of the rights and welfare of human subjects, and strict adherence to any stipulations imposed by ASU IRB.
3. I certify that all individuals involved with the conduct of this project are qualified to carry out their specified roles and responsibilities and are in compliance with ASU policies regarding the collection and analysis of research data.
4. I agree to comply with all ASU policies and procedures, as well as with all applicable federal, state, and local laws regarding the protection of human subjects, including, but not limited to the following:
   a. Conducting the project by qualified personnel according to the approved protocol
   b. Implementing no changes in the approval protocol or consent form without prior approval from the ASU IRB
   c. Obtaining the legally effective informed consent from each participant or their legally responsible representative prior to their participation in the project using only the currently approved consent form
   d. Promptly reporting significant adverse events and/or effects to the ASU IRB in writing within 5 working days of the occurrence.
5. If I will be unavailable to direct this research personally, I will arrange for a co-investigator to assume responsibility in my absence. This person has been named as co-investigator in this application, or I will advise the ASU IRB, in writing, in advance of such arrangements.
6. I agree to conduct this study only during the period approved the ASU IRB. (one year of approval date)
7. I will prepare and submit a renewal request and supply all supporting documents to the ASU IRB before the approval period has expired if it is necessary to continue the research project beyond the time period approved by ASU IRB.
8. I will prepare and submit a final report upon completion of this research project.

☒ By checking this box I indicate that I have read, understand, and agree to conduct this research project in accordance with the assurances listed above.

Tavithia Heidelburg
Printed Name of Student Investigator

Printed Name of Principal Investigator

8.2 Faculty Advisor/Sponsor’s Assurances
1. I certify that the project will be performed by qualified personnel according to the approved protocol using conventional or experimental methodology.
2. I agree to meet with the investigator on a regular basis to monitor study progress.
3. Should problems arise during the course of the study, I agree to be available, personally to supervise the investigator in solving them.
4. I assure that the investigator will promptly report significant adverse events and/or effects to the ASU IRB in writing within 5 working days of the occurrence. If I will be unavailable, I will arrange for an alternate faculty/sponsor to assume responsibility during my absence, and I will advise the ASU IRB in writing of such arrangements. If the investigator is unable to fulfill requirements for submission of renewal, modifications or the final report, I will assume that responsibility.
5. I have read the protocol submitted for this project for content, clarity, and methodology.

By providing my electronic signature IRBNet.org concerning this protocol, I certify that the student or guest investigator is knowledgeable about the regulations and policies governing research with human subject and has sufficient training and experience to conduct this particular study in accord with the approved protocol.

Printed Name of Faculty Advisor/Sponsor
8.3 Department Chair’s or Dean’s Assurance

By my signature electronic signature within IRBBet.org concerning this protocol, I certify that this research promotes compliance with Federal and State regulations, sponsor, and Institutional policies and procedures regarding the safety and welfare of human participants involved in research studies within the department. I have reviewed and approve this IRB application. I also assure the soundness of the research design, scientific and scholarly merit in relation to the department capacities and adequate staff and resources to conduct the study. I will cooperate with the administration in the application and enforcement of all ASU policies and procedures, as well as all applicable federal, state, and local laws regarding the protection and ethical treatment of human participants by researchers in my department/college. I also attest that the Principal Investigator will be allowed the time required to complete the research as described.

________________________
Printed Name of Chair or Dean

Reminder Check List
All IRB protocols must include the following items (these items must be uploaded in IRBNet as separate documents):

☒ Research Protocol Review/ Application Form (All sections completed)
☒ Consent Form or Informational letter and any Releases (audio, video, or photo) that the participant will sign
☐ Reference List
☒ Copy of Human Subjects Training Certification(s)
☐ If data is collected either from sites other than Albany State University or in cooperation with other academic institutions, hospitals or private research organizations, either a permission letter from the site(s)/ program director(s) or a letter of IRB approval from each entity is required prior to initiating the project.
☒ If e-mails, flyers, advertisements, generalized announcements or scripts, etc., are used to recruit participants.
☒ If data collection sheets, surveys, tests, other recording instruments, interview scripts, etc. will be used for data collection. Be sure to upload them in the order in which they are listed in #13c.
☐ If you will be using a debriefing form or include emergency plans/procedures and medical referral lists. (A referral list may be attached to the consent document).
☐ Written evidence of approval from either an academic chair/supervisor or IRB of the foreign institution if data is collected at or in collaboration with an institution outside the United States.
Appendix H

Survey Results

<table>
<thead>
<tr>
<th>SURVEY QUESTIONS</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Q5</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>100%</td>
<td>90%</td>
<td>73%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>NO</td>
<td>0%</td>
<td>10%</td>
<td>27%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>
Survey Results by Age

<table>
<thead>
<tr>
<th>AGE</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-35</td>
<td>24%</td>
</tr>
<tr>
<td>36-40</td>
<td>40%</td>
</tr>
<tr>
<td>41-50</td>
<td>35%</td>
</tr>
<tr>
<td>51-60</td>
<td>1%</td>
</tr>
</tbody>
</table>
Survey Results By Gender
Survey Results by Years as RN

How many years as a Registered Nurse

<table>
<thead>
<tr>
<th>Years</th>
<th>2-5 years</th>
<th>6-10 years</th>
<th>10-15 years</th>
<th>over 15 years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>33%</td>
<td>36%</td>
<td>15%</td>
<td>15%</td>
</tr>
</tbody>
</table>
Survey Results by Years on DEU

How long did you practice on Dedicated Education Unit (Deu)

<table>
<thead>
<tr>
<th>Years</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-5 years</td>
<td>33%</td>
</tr>
<tr>
<td>6-10 years</td>
<td>36%</td>
</tr>
<tr>
<td>10-15 years</td>
<td>15%</td>
</tr>
<tr>
<td>More than 15 years</td>
<td>15%</td>
</tr>
</tbody>
</table>
Survey Results of RN’s Currently on a DEU

Do you Currently Work on a DEU unit?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>94%</td>
<td>4%</td>
</tr>
</tbody>
</table>