Dedicated Education Unit Toolkit

Authors: Virginia Shaw, MSN RN; Victoria Dittmar, MSN RN and Cynthia O’Neal, PhD RN
This toolkit is intended for academic and practice partners interested in pursuing the dedicated education unit (DEU) teaching-learning model. The purpose of the toolkit is to provide information about effective planning and implementation strategies for initiating and fostering thriving DEUs.

The formulation of this toolkit has been a joint venture between the University of Texas Health Science Center School of Nursing (UT Health SON), Methodist Healthcare System (MHS), and the South Texas Veteran's Health Care System-Audie L. Murphy Memorial Hospital (STVHCS). The three well-established partners have successfully utilized DEUs for specified clinical courses consistently since 2011, and believe that other academic-practice partnerships may benefit from the successful process that has been developed.
The inception of the DEU model began in 2010 with a strong academic-practice partnership between UT Health SON and Methodist Hospital (MH). After establishing the initial DEU at MH, UT Health SON partnered with the STVHCS to enhance clinical nursing education in that facility using the DEU model.

UT Health SON is fortunate to have been able to leverage its positive partnerships with both MHS and STVHCS for almost a decade to deliver quality clinical nursing education. As of 2018, the partnership has cultivated 13 highly effective DEUs during the past eight years.

The UT Health SON and its partners hope that our experiences can help others to foster successful DEUs within their systems.
The DEU clinical teaching-learning model is based on the existence of a strong academic-practice partnership. DEUs are an optimum education model for units with: (1) effective leadership, (2) stable clinical staff with a majority of baccalaureate prepared RNs, and (3) administration and staff interest in the initiative.

The model fosters the development of staff RNs to serve as clinical instructors under the guidance and supervision of nursing faculty. A key component of the model is the requirement that these RNs are minimally prepared at the baccalaureate level. The clinical instructor role is voluntary and supported by the practice partner. The potential barriers to effective clinical instruction by staff RNs are removed through the presentation of a comprehensive workshop.

The workshop provides the RNs with the fundamental knowledge, skills, and attitudes needed to begin the journey of becoming effective clinical instructors.

Nursing faculty provide guidance and support to both RN clinical instructors and students while remaining on-site during the clinical experience. Students experience their clinical rotation in one specific unit and work with one RN clinical instructor for the entire rotation. A clearly defined planning process is followed and roles are clearly defined (with recommended time frames).

On select clinical days, only DEU students should be present on the designated unit(s). DEU students are welcomed and accepted into the unit which becomes the clinical learning environment with all personnel supporting the students' learning. The success of the model depends on a comprehensive and structured planning process as well as ongoing support from leadership.
**Goals**

- **Strengthen** the academic-practice partnership
- **Enhance** the education of nursing students
- **Align** nursing education with the reality of nursing practice
- **Increase** professional development of staff RNs as clinical instructors
- **Utilize** nursing school faculty effectively
- **Improve** patient care outcomes
• Identify the academic undergraduate nursing program and the practice partner
• Establish an effective academic-practice partnership
  • The following resource provides guiding principles for development of the partnership: http://www.aacnnursing.org/Academic-Practice-Partnerships
• Formalize a memorandum of agreement between the academic and practice partners
• Refer the Texas Board of Nursing and/or other regulatory and accrediting bodies regarding requirements for precepted nursing student experiences
• Consult with professional nursing union, if applicable, for guidance on establishment of DEU
• Identify clear roles and responsibilities for the DEU team determined jointly by the academic and practice partners (see References for Brief Document with Nomenclature and Roles)
**Purpose**

- Determine the benefits for the RN clinical instructors
  - Benefits may include those provided by the academic partner such as certificates of appreciation, library access, discounted tuition for graduate study, etc. as well as benefits available through the practice partner such as clinical ladder opportunities, preferred days off, increased pay, etc.

- Select faculty for the DEU - determined jointly by the academic and practice partners
  - Role of faculty in DEU model is different than the role of faculty in traditional clinical model
  - Qualifications for the DEU faculty:
    - Expertise in clinical teaching
    - Ability to work collaboratively with practice partner team members
    - Strong organizational skills
    - Faculty assigns students to RN clinical instructor
    - Faculty develops and sustains a close working relationship with the unit - before, during, and after the clinical rotation
    - Faculty is committed to long term development of the DEU model for the unit
    - Faculty guides ongoing process improvement in the DEU, over many semesters/years

**Background**

- Select the clinical unit - determined jointly by the academic and practice partners
  - Unit must support student attainment of course clinical objectives
  - Unit must have adequate number of BSN-prepared nurses to support the model (majority BSN staff is optimum)
  - Unit must have stable staffing
  - All staff in the unit must be motivated to teach nursing students
  - All unit staff must welcome students and demonstrate professionalism
  - Unit acuity and staffing patterns are factors in determining the number of RN clinical instructors and students on the unit
  - Staffing pattern may need to be adjusted to support the model. The RN clinical instructors may be assigned fewer patients than RNs not serving in this capacity which may result in budgetary and staffing changes
  - RN clinical instructors must not float to other floors during the clinical rotation or serve in the charge nurse capacity
  - Determine ratio of student to RN clinical instructor (in medical-surgical units two students to one RN clinical instructor)
  - Naming the unit, for example, “5West- Transforming Nursing Education” may foster unit engagement

**Description**

**Goals**

- Plan
- Implement
- Evaluate

**Steps**

<table>
<thead>
<tr>
<th>Initial Steps</th>
<th>3 Months Prior to Implementation</th>
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**3 Months Prior to Implementation**

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**4-6 weeks Prior to Implementation**

[Click tabs for information]

- **Selection of staff RNs to become clinical instructors - determined jointly by nurse manager and faculty:**
  - RNs volunteer to be considered for this role
  - BSN prepared
  - At least two years of clinical experience
  - Clinical expert who provides quality, comprehensive nursing care
  - Experience in working with students in the clinical setting
  - Agrees to work each clinical day during the rotation
  - Understands and is motivated to teach undergraduate students (determined through interview with faculty)
  - Shares the vision, mission, and values of the academic partner

- **Designation of resource area in clinical unit**
  - A small area in the clinical setting may contain reference books, information for students and RN clinical instructors
  - Serves as a confidential place for students/RN clinical instructors/faculty to meet as needed
RN clinical instructors attend all day Clinical Teaching Workshop developed by School of Nursing faculty

Curriculum includes:
- Key concepts (mission, vision, values, etc.) and documents (accreditation, curriculum, etc.) fundamental to the academic partner
- The DEU Model as utilized by the academic-practice partnership (and how it differs from the traditional clinical model)
- Roles and responsibilities of all involved in the model
- Objectives, content, calendar, etc. of the specific course in which the RN clinical instructor will be teaching
- Concepts of clinical teaching (legal, ethics etc. of working with nursing students)
- Working with diverse learners
- Effective Clinical teaching strategies
- Active learning strategies (role play, simulation, etc.)
- Effective formative and summative evaluation
- Reflection/putting it all together
### Purpose

- A welcome ceremony may be part of the first clinical day. Nurse managers, staff, administration, and faculty welcome students to the DEU.

- Time should be allotted for students and RN clinical instructors to get acquainted.

- Unit/Hospital orientation may be provided by RN clinical instructors, faculty, nursing education department, and unit leadership.

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- **Plan**
  - Daily or weekly lesson plans are based on clinical course objectives and are distributed to RN clinical instructors and students prior to the clinical day (see References for Sample Lesson Plan Document).

- **Implement**
  - Daily or weekly plans include appropriate teaching/learning strategies to meet the clinical objectives.

- **Evaluate**
  - Daily or weekly plans include a feedback tool (see References for Sample Feedback Document). This tool guides the RN clinical instructor in providing feedback to the student and to faculty.

**References**
Faculty are present in the clinical agency at all times - providing ongoing guidance/supervision/feedback to the RN clinical instructors and to the students (see References for Sample Feedback Document)

Remediation of students is performed by faculty in collaboration with RN clinical instructor as appropriate

Faculty maintain responsibility for organization and structure of the clinical day
• Reflection/debriefing by the RN clinical instructors and the students. In the debriefing session RNs and students verbalize their DEU experiences to nurse managers, hospital administrators, academic leaders and faculty.

• Both RN clinical instructors and students complete a written Reflection Tool - describing their experiences in the DEU.

• Students complete an evaluation of their RN clinical instructor.

• RN clinical instructors complete an evaluation of their students:
  o Additional evaluations may include:
    - RN clinical instructors complete an evaluation of the faculty
    - Faculty completes an evaluation of each RN clinical instructor
    - Faculty completes an evaluation of each student

• Faculty and nurse managers utilize this data to guide ongoing process improvement – subsequent debriefing and process improvement meetings may be needed.
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<td>• Increased job satisfaction</td>
<td>• Increased recruitment of BSN prepared nurses</td>
<td>• Improved staff satisfaction</td>
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<td>• Increased focus on 'best' practices and Evidence Based Practice</td>
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<td>• Enhanced clinical practice</td>
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References:

1. Brief Document with Nomenclature and Roles
2. Sample Lesson Plan Document
3. Sample Feedback Document

Click here to download references from our website.

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