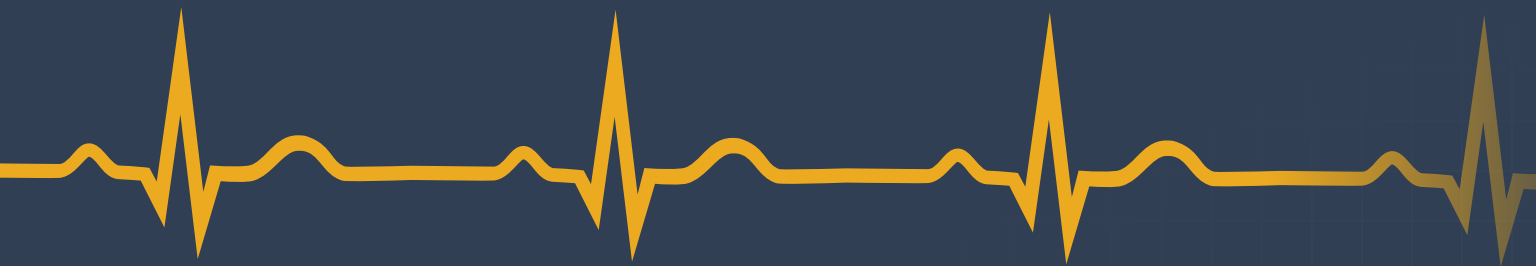


NurseThink™ for Nurse Educators Success Manual

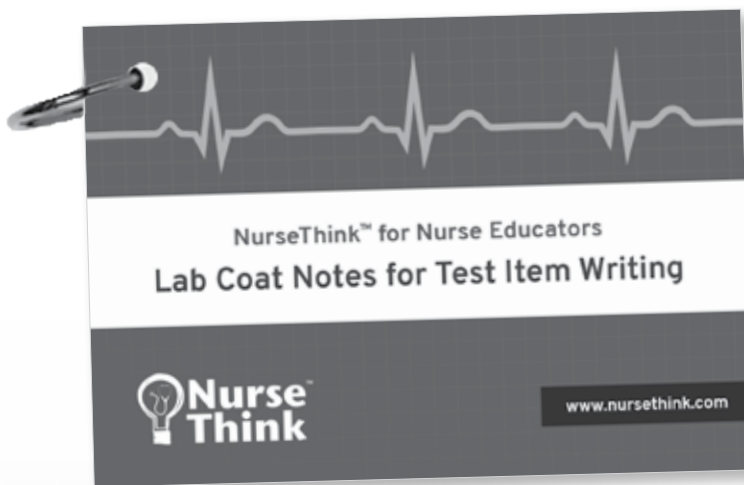


Tim J. Bristol
PhD, RN, CNE, ANEF, FAADN

Karin J. Sherrill
RN, MSN, CNE, CHSE, ANEF, FAADN

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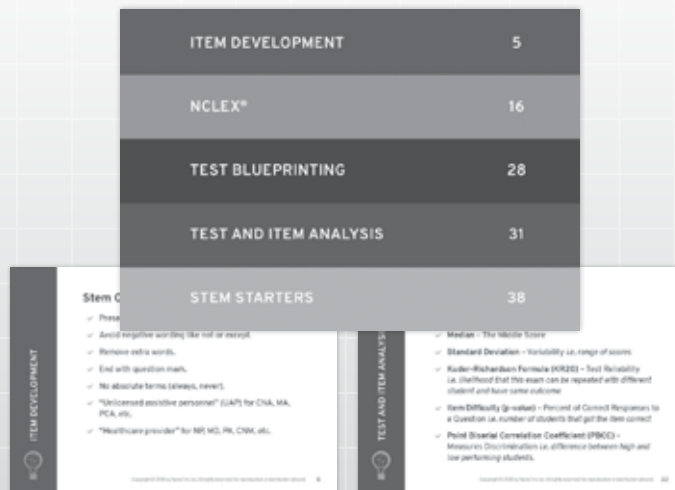


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Tim J. Bristol

PhD, RN, CNE, ANEF, FAADN

Karin J. Sherrill

RN, MSN, CNE, CHSE, ANEF, FAADN



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Introduction

Letter from the Writers

Think a minute about that nursing instructor you've met in your career who seems to be a natural. He/she knows how to write the perfect test item, is always prepared with the ideal active-class lesson, and can force critical thinking out of any student's brain. Although it appears that this person was born a nurse educator, we assure you that is not the case. Like the nursing profession, the transition from novice to expert can only be achieved with a lot of hard work. An expert bedside caregiver does not equal an expert nurse educator. The evolution takes time, practice, and patience, one semester at a time.

NurseThink® for Nurse Educators: Success Manual was built with the knowledge and expertise of seasoned nurse educators with decades of teaching experience. This manual is intended to address the needs of the neophyte as well as the experienced nursing faculty. It is packed with evidenced-based information, personal experiences, and take-and-go tools to make your job easier.

This manual is broken in to two sections: Facilitate Learning and Assessment and Evaluation. These two topics are the most commonly-requested topics of nurse educators across the nation. Within the chapters, you will find material related to student success, diversity, active learning, testing, clinical (in lab, simulation, and an agency), and so much more. We encourage you to mark the pages, fold the corners, and highlight your favorite sections. Use your manual as it was intended - as a working guide of instructions on how to become a more amazing nurse educator.

We hope you enjoy!

Blessings,
Tim and Karin

tim@nursetim.com
ksherrill@nursetim.com

For inquires about other NurseThink products, contact us at help@nursethink.com.



Facilitate Learning



Lesson Planning and Instructional Design

“By failing to prepare, you are preparing to fail.”

BENJAMIN FRANKLIN

The Lived Experience...

I knew that I lectured too long and still didn't cover everything. Some of the learning objectives were not covered very well and the students were anxious about the upcoming exam. I spent so much time preparing my PowerPoint and now it seemed like a waste. I was trained as a nurse practitioner and was quite frustrated when I had no idea how to cram all this content into the allotted time. I began working with a friend in the education department and mentioned my dilemma. He offered to help me explore the idea of a lesson plan. He readily admitted that he knew nothing about nursing, but felt that a lesson plan could help in my journey. He was right! The lesson plan gave me time-limited goals throughout the class and didn't let me lose track of the most important concepts and helped me track the most important concepts and objectives.

~ TIM BRISTOL



The Big Picture...

Instructional design is a process whereby the learning experience is developed to attain desired outcomes. There is usually a methodology that facilitates coordinated development, implementation, and revision of the course (Purdue University Online, 2016).

One common instructional design process is known as ADDIE (analysis, design, development, implementation, and evaluation). It is a systematic process that is well-respected by most in education as a methodology for addressing all aspects of the learning experience (Shibley, Amaral, Shank, & Shibley, 2011). Here are some examples of each part of ADDIE (Table 1).

Table 1: ADDIE Description and Examples

ADDIE PHASES	EXAMPLE
Analysis Clarify goals, objectives, learner needs, and parameters for the learning experience.	The concept of oxygenation is taught in lab during fundamentals, again in second-level medical surgical, and in a capstone simulation experience. There are static mannequins available in the six-bed nursing resource lab.
Design Strategies are planned that are specific to the goals of the learning experience.	Oxygenation is addressed in the corresponding lectures at the appropriate times in the curriculum. The patients are introduced in class and then engaged in the lab experience. Storyboards, supply lists, case studies etc... are shared amongst the teams at each level.
Development The process is analyzed and piloted before implementation.	A group of senior nursing students were given the case studies for all three levels of the program to address oxygenation. They were then run through each lab experience. Afterwards, their feedback was used to revise and enhance the learning experiences.
Implementation The learning experience is now underway.	Oxygenation is now being addressed in the lectures at the three levels. The students all participate in the corresponding laboratory experiences.
Evaluation Students are assessed at formative and summative levels for competency.	Learners are assessed based on standards and related rubrics. Evaluation of the learning experience is conducted at all three levels and the development team meets to discuss the outcomes and recommend revisions for the next term.

Analysis is the first part of the ADDIE process and focuses on understanding the learner, the environment, and identifying the prescribed learning objectives for the teaching session. During this phase time-lines are projected and delivery options are considered. Design, the second phase, identifies the overall structure of the course. For example, the instructor may identify that the students are in class three hours a week for a 3-credit course. If the course is a blended, hybrid model, the students may only be in class for 90 minutes per week and the rest of the learning happens online. The design phase is important for applying instructional strategies to a storyboard design, meeting learning domains (cognitive, affective, and psychomotor), lesson plans, learning objectives, and assessments. Implementation refers to initiating the course that has been created. Finally, the evaluation phase is where this process is analyzed and enhanced.

There are many other instructional design structures. Faculty will do well to consult instructional design professionals to help build a classroom experience using the latest evidence base. However, many nurse educators do not have ready access to these experts. When this is the case, the best strategy to ensure a solid instructional design is to find a partner and together consult the evidence base.

As the instructional design is developed, faculty create a lesson plan for each learning experience. The lesson plan helps nurse educators create learning opportunities that focus on the main concepts and allow for the students to maximize their time for optimal outcomes. When a lesson plan is not being used, there is a risk of inefficiency and learners may leave confused or frustrated.

The research and literature describing and supporting lesson plans in nursing education is sparse. Many authors have an opinion, idea or suggestion, but little empirical data supports one process or another. Another concern is that so few faculty use a lesson plan. Faculty often create a slide deck of PowerPoint to “talk through” and then do the best they can to motor through each slide. This format is not structured or recommended, nor is it a lesson plan. Many feel that creating a lesson plan is another draw on time and energy, so it remains a low priority.

Milkova (2016) says it well, “A lesson plan is the instructor’s road map of what students need to learn and how it will be done effectively during the class time.” (p.37). The objectives are identified for the learning experience. Learning activities are chosen to help address the desired objectives in the allotted time. Finally, the learner is assessed for understanding and growth. While there are many variations of lesson plans, these three components tend to be central to most strategies and tools.

This discussion gives the basics of lesson plan development and provides a few examples that can be easily implemented in most settings.

Lesson Planning

The lesson plan can take on many forms (Colorado State University, 2016). Some are based on time ([Appendix A](#)). They direct the educator in meeting certain instructional design and competency goals in an allotted amount of time. These are beneficial in that they help the faculty utilize the clock to ensure all important concepts are adequately addressed. Often, the time-based lesson plan helps faculty with classroom management in general. Some lesson plans are based on learning objectives ([Appendix B](#)). They simply list the learning objective and align learning and assessment activities with each objective.

Anticipatory (Pre-Class) Planning

The first part of any lesson plan is referred to as the anticipatory set and helps to activate prior knowledge (Humber College, 2015). This is when students prepare for the learning activity. It can be a review of the learning objective or a reading assignment with pre-class quiz. The anticipatory plan may include a quick video clip at the beginning of class to pique the curiosity of the students. Table 2 offers some additional examples of pre-class preparation activities.

Table 2: Pre-Class Preparation Activities

- › Students write a test item about a case study at the end of a chapter in the textbook and bring that as a ticket to class.
- › Students find an online video about a concept in the reading and share it in an online class discussion forum. Each student then gives feedback on the videos of two other students.
- › Students complete clinical paperwork (e.g. brain sheet or assessment form) on a case study at the end of a chapter.
- › Students highlight the top 3 concepts in their text from the reading. At the beginning of class, they compare their highlights with another student.

Processing (In-Class) Planning

The next part of most lesson plans includes processing activities. This step requires that the learner explores new information and can associate it with prior learning. Ideally, it is provided in a format that allows for collaboration in an active, supportive environment.

The lesson plan should ensure the inclusion of realism and that the student can appreciate application of the competencies learned. One way to accomplish this is to ensure that patients “come to class” often. Faculty are challenged to “bring” one patient to class per hour of lecture. These patients are often provided within a case study format. Consider having a list of suggested patients, case studies, standardized patients, online videos and the like that the entire nursing program can use as a guide to provide some consistency across the curriculum. A patient in a case study that students have met before can be repeated with a different emphasis on the care.

Diversity of activities is good, to a certain extent. The learning should not feel overwhelmed by too many new experiences or the students’ central focus can shift from the learning objective to the chaotic strategy. It helps if the students can engage in a couple of the same activities weekly with the occasional new strategy introduced.

Instructors will do well to be conservative in their expectations of what they can accomplish in the allotted class time. However, it is always a good idea to have backup plans and extra activities just in case they are needed to fill class time.

Assessment Planning

The final part of the lesson plan is assessment of the learner competency. It is important to determine if the learner was able to grow in knowledge, skill and attitude related to the competencies. Assessments and evaluation of learning can take place in many ways and does not have to be measured with a unit exam. Consider a peer assessment that engages students

and provides immediate feedback. For example, after a 20-minute lecture, have students create an SBAR (situation, background, assessment, recommendation) communication sheet for the patient in the case study in the back of the textbook's related chapter. The student then finds a peer in class and "gives report" to their colleague. The recipient of the report offers feedback on the efficacy of the SBAR communication, offering a 2 + 2 (2 praises and 2 suggestions, recommendations or revisions.)

When it comes to the assessment as a part of the lesson plan, consider allowing the students the opportunity for self-assessment. One of the best ways to learn is to identify one's own gaps in understanding. Giving students multiple options per class period to identify these gaps is important, as it builds essential habits that will help them as professionals in practice. Self-assessment can be a simple self-check quiz (although pop quizzes are effective as well) or a think-pair-share activity. Students can vote on NCLEX®-style questions or create a quiz question themselves to share with peers.

Faculty can also implement other types of assessment that help to identify if the students are meeting the desired outcomes. These can be as simple as asking the students to write down a question on a note card and handing it in as they leave class.



NurseThink™ Time

Top 3 Tips For Faculty Success

1. **Collaborate with a peer.** Try out a certain lesson plan format with another instructor and commit to using it for four weeks. Weekly, meet with your peer and briefly discuss success and challenges with the lesson plan format. After four weeks, consider a revision in the lesson plan. Report to the entire faculty team the findings from this trial and request ideas for improvement.
2. **Collaborate with students.** Include them in discussions about the new lesson plan format. After using the lesson plan format for a couple of weeks, faculty can begin making a commitment to send the lesson plan to the class a week in advance. For many faculty, promising this to the students a week in advance provides an impetus for pre-planning and allows an entire week to contemplate how best to implement the lesson plan. When no lesson plan is used, many faculty procrastinate until the night before (or even a few hours before) and don't have ample time to think about or revisit the learning goals for that experience.

Prioritize items to be included in the lesson plan. Overload is a key reason students miss the most important concepts/content. Overload in the lesson plan can frustrate faculty and cause them to abandon this strategy.

3 Quick Implementations

1. If creating a lesson plan for the first time, utilize [Appendix A](#) or [Appendix B](#) at the end of this book. As mentioned before, don't overload the course and be flexible in the beginning. Commit to trying it at least four weeks in a row to get a true feel for how the plan can affect the learning experience.
2. When looking for activities to include in the lesson plan, start by using the free tools that come with the students' textbooks. Often there are multiple tools that go with each chapter in the book. They are usually found in an online ancillary resource tool. The tools include games, videos, graphics, quizzes and more. These learning objects can be used as pre-class or in-class activities. One benefit to using these in-class is that the students will see the value the instructor puts in the resources and they are more likely to access these effective resources as well.
3. To help students see the value in the activities found in the lesson plan, ensure that they know these activities point towards the upcoming exam. For instance, if the instructor pauses lecture for a patient assignment, then make sure there are two to three questions on the next exam that are clearly connected to that patient. While instructors should not use patients' names or initials or even sex and age, they can ensure that test items are addressing key learning that was a part of the case study. This strategy promotes buy-in from the students and helps faculty ensure that the learning activities focus on essential learning.

Review



Conclusion

Using a lesson plan helps faculty coordinate learning in such a way that allows for successful classroom experiences. When faculty can organize the learning experience in this way, they save time and have better outcomes. This is not only beneficial to the students' grades but also to work-satisfaction for instructors. Lesson planning is a great way for faculty to ensure that the essential concepts are prioritized, and student-centered learning is maintained. The benefits can be numerous to include overall program management and even accreditation.



Case Study

Faculty in the department have chosen to provide a lesson plan to students by 5:00 pm the Friday before the next week's class. This decision applies to all faculty in all classes. The lesson plans will include at least one graded assignment before each learning experience. Faculty also decided that the lesson plan will include at least three learning activities to be used in lecture, 3 learning activities to be used in the clinical setting, and 3 activities to be used in the lab setting.

Each faculty member is randomly assigned a success partner (another faculty member) to work with for the first 60 days of this initiative.

Case Study Questions

1. What would be a recommended plan for the success partners to promote effective implementation of this new initiative?
2. What should the faculty do if the students complain that the new lesson plans are causing faculty to not spend enough time explaining difficult concepts?
3. What are the benefits and challenges of having the classroom, lab, and clinical learning experiences on the same lesson plan?

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