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Ann Steffanic, Board Administrator
State Board of Nursing
P.O. Box 2649
Harrisburg, PA 17105-2649

INDEPENDENT REGULATORY
REVIEW COMMISSION

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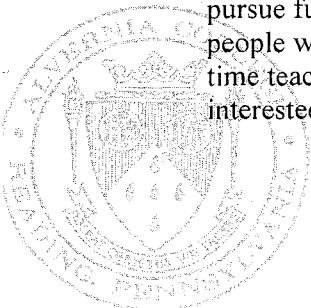
Dear Ms. Steffanic

I would like to express serious concern with Regulation ID #16A-5131 (#2631), specifically the expanded enforcement of the 5 year timeline on faculty assistants. Bachelor's prepared faculty assistants are typically seasoned, highly competent, clinical nurses teaching clinical students in hospitals and other health care facilities. In the Berks county area, many of these individuals hold charge nurse and nurse educator positions. They do a service to nursing programs by teaching. Most are in part-time master's degree study as they teach one or two days a week as a clinical instructor, and continue to actively work in the practice arena. Most are not primarily involved in classroom teaching, rather they provide on-site acute care clinical instruction.

The strict enforcement of the 5-year rule will serve to exacerbate faculty shortages not help them. I was puzzled by the tone of the writing, which indicated that the Board is interested in alleviating the faculty shortage in Pennsylvania. This regulation will adversely affect the development and recruitment of nurse educators in several ways. It will take away opportunities for BSN prepared nurses to initially experience teaching, thus removing an incentive to motivate talented clinical nurses to pursue MSN study. It will prevent nurses with families from continuing to chip away at a Master's degree while teaching and raising children.

To illustrate several points, I will describe a few examples of individuals we have hired as clinical instructors at Alvernia College. Two are BSN prepared nurses with extensive experience who are not sure they want to make a career shift to teaching, but want to give teaching a try on units where they work in a local community hospital. These individuals want to know that teaching suits them prior to enrolling in an MSN program. I am trying to develop and mentor these individuals so that they will want to pursue graduate education and teach. What I have done by hiring them, in light of the new regulation, is to start their time clock ticking before they even know they want a career in nursing education, thus putting them at a disadvantage for future teaching opportunities. I believe we should be encouraging nurses to consider teaching and to allow them to give it a try under full time faculty supervision. I think it is not serving the public well to set up a roadblock that will remove interested nurses from the pool of potential nurse educators.

Three other individuals I have on board at Alvernia College teach clinical sections part time, while studying for their MSN at reputable local universities. Although they are making steady progress as part-time students, it is unlikely that they will be able to complete their degrees within a five year timeline, given their personal situations. The regulation will serve to discourage younger, clinically expert bedside nurses from teaching, since they may not be in a position to pursue full time graduate study while raising young families. It will also discriminate against people who need to maintain hospital employment for insurance benefits, while engaging in part-time teaching and master's study. Another consequence will be to discourage BSN nurses interested in teaching from attending graduate nursing programs based at Pennsylvania



universities, and push them towards selecting the quicker "online" MSN programs. While the traditional programs often take more time, they have some educational advantages over the external degree programs. With the rigid Pennsylvania timeline, people will be motivated to dismiss those advantages in favor of securing their credential in the fastest way possible.

I would suggest it might be useful to make a distinction between faculty who teach classroom content and clinical instructors. In my experience both in Pennsylvania and for 20 years at the University of Maine, full time faculty positions are not as difficult to fill with individuals who have master's and even doctoral degrees. It is more difficult to find part-time clinical instructors, and this is the group that will be most affected by the 5-year deadline.

The nature of nursing education involves much smaller faculty to student ratios in the clinical setting than the classroom. Therefore, unless a nursing program is extremely small, even if the full time faculty workload includes both classroom and clinical teaching, additional clinical instructors are needed. In my experience, some of the best clinical instructors are those who are also currently working in health care facilities. Due to the nature of nursing knowledge, and the rapidity of workplace changes, I find that the MSN and doctorally prepared faculty who are based mostly in the classroom, often consult their BSN prepared clinical colleagues about current nursing practices. I believe Pennsylvania citizens would be served best by having nurses of different educational levels working together, each contributing their strengths to the education of new nurses.

The proposed regulation suggests that BSN prepared nurse educators have evaded the 5-year rule by taking positions out of state and then returning, or moving from program to program. I would argue that these experienced BSN prepared educators are in critically high demand, and have multiple offers to teach in clinical settings. They are providing valuable service wherever they teach, and if the regulations in PA prevent their service as nurse educators, they'll naturally go to NJ and other bordering states to work. Furthermore, most registered nurse master's degree students are pursuing part-time, not full time study, while they are still working. A 5-year time window is often not realistic for a person taking a course at a time while maintaining full time employment. Yet, I would argue that the life pattern of current clinical nursing practice plus engagement in graduate study makes a great clinical instructor.

We are in a shortage situation. I do not dispute that MSN preparation is optimal for nursing faculty. I would suggest it would be better to provide incentives for people to try teaching and persist in Master's education, versus focusing on the letter of the law with the MSN 5-year time window. I believe that the people of Pennsylvania will be best served by competent clinical nurses who are lifelong learners entering into the arena of nursing education. I strongly urge reconsideration of the proposed regulation.

Sincerely,



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