
Kwadwo Awuah-Baffour. Gaps between nursing education – to – nursing practice: The needed change now. Acta Scientiae et Intellectus, 8(2); 2022, 28-34.

GAPS BETWEEN NURSING EDUCATION – TO – NURSING PRACTICE: THE NEEDED CHANGE NOW

Kwadwo Awuah-Baffour

Eastern New Mexico University, New Mexico, USA

Corresponding author: Michael.Shaughnessy@enmu.edu

ABSTRACT

The gap between nursing education and nursing practice keeps widening in the era of online education for nursing students. The current new graduates coming to the floor lack fundamental skills to thrive in this stressful environment. They are equipped with the science of nursing but are deprived of the art of nursing. They do not understand the essential practices of nursing. This is a significant challenge, and to solve this problem, there should be a bridge to reduce this widening gap between nursing education and nursing practice. The solutions are numerous, but competency-based education, rigorous preceptorship, and practice internships can clot this bleeding of unequipped new graduates.

Keywords: *Competency-based education, internship to practice, preceptorship, nursing practice, nursing education, structural, interactionist*

INTRODUCTION

Nursing education is a specialized education program that teaches technical competencies and knowledge for nursing practice. Nursing education aims to equip graduates with the values, skills, and perspectives of nursing practice that nurses should possess to ensure quality patient care and facility outcomes. Nursing practice is the direct or indirect clinical practice of patient care. This is caregiving based on consistent assessment and diagnosis, planning and interventions, and logical, deliberate, and rational evaluations in critical thinking and problem-solving. This includes constant input the society, community, families, and patients in every phase of the nursing practice to attain and ensure optimal health. It is the implementation of strategies to care for patients and society through well-defined

outlines and goals. However, there is much disconnection between nursing education and actual nurse practice. Most instructors focus more on lectures and class activities than nursing practice, which students will need in the real world. New graduates coming to the units currently lack many essential skills to become effective and efficient nurses. This can impact the safety and the quality of care given to patients. The majority of graduate nurses coming into nursing are ill-prepared to meet the current pressure on nurses. As a result, there is an increase in medication error which increases the cost of healthcare and causes adverse patient outcomes.

New graduate nurses struggle a lot as they transition from being a student to nurses. This challenge put enormous pressure on them since they could not meet the profession's expectations, dipping their self-confidence. These struggles of graduate nurses are based on the current style of nursing education under which they are trained. Bennett (2017) explained that research has found that the current structure of education in which nurses are trained underprepared them for the various specialties in healthcare because there are many variations in what students are taught and how these concepts and knowledge are used in an actual clinical setting. Most nursing programs do not allow students to choose their clinical rotation during their training, nor are they allowed to take a full patient load, making them unequipped after school to know the skills and art of dealing with different patients with multiple complex issues simultaneously (Bennett, 2017). Teaching methods used in most nursing programs are too traditional, which dramatically affects graduate nurses' decision-making skills. From this perspective, it is evident that graduate nurses are underprepared to effectively meet the duties of their job description because there is a gap between nursing education and nursing practice. Nursing programs should bridge this gap by adapting to competency-based education, rigorous preceptorship, and internship to practice programs to equip new graduates with the confidence and skills to adapt to the stressful nature of the current healthcare system. This paper will focus on the above interventions to glue the gaps between nursing education and nursing practice.

COMPETENCY-BASED LEARNING ALIGNED

Nursing education has always focused on preparing graduates with a solid foundation in nursing science. The focus has been on the students' ability to memorize content and concepts that promote rote learning where there is difficulty in transferring knowledge to the clinical setting. According to Wolf (2022), this education model is not attainable and effective in this current dispensation with too much information and knowledge. Because of this, most new

graduates are partly prepared for a cause that is a matter of life and death in all situations. The consequences of this are enormous and tragic. The solution to this problem is competency-based teaching and learning that embeds technology as the structural change for effective and efficient teaching and learning.

Competency-based learning is an interconnected and complex set of skills, abilities, and skills that can be utilized flexibly to solve problems and challenges in various clinical settings (Wolf, 2022). This learning and skill-driven curriculum explicitly connect learning outcomes by combining a clear and deliberate approach where competencies are demonstrated, expectations vary, and are held constant (Wolf, 2022). Graduates through competency-based learning acquire and show the science and art of nursing by engaging them in exercises, experiences, and activities that equate to well-defined learning outcomes. Students are energetically guided and supported by faculty, staff, and the nursing program through this process. This equips students with credentials by mastery demonstration of various rigorous assessments based on nursing science and art. The role of the instructor is to guarantee pedagogical fluidity by making the course materials available in a method, form, and manner the students learn (Hossler & James IV, 2021). According to Hossler and James IV (2021), the instructors become content experts who reactively and proactively instruct and guide struggling students. They become mentors who serve as both personal and academic advisors in this manner. Through this structure, the gaps between the rapidly changing landscape in nursing practice and nursing education align.

From this perspective, Kavanagh and Sharpnack (2021) explained that the demands from the public and rapidly changing in healthcare for new nurses to meet the expectations of nursing all enforce the necessity of competency-based education. All the domains in competency-based learning propel accountability in nurses through the exploration and design, which challenge and prepare new graduates for practice. The domains explain responsibilities and tasks that can be entrusted unsupervised and enhance students' experiences through active and interactive learning (Kavanagh & Sharpnack, 2021). Such development embedded in competency-based learning fosters application-based learning that increases practice and enhances learning outcomes. This is effective when competency-based education is combined with rigorous preceptorship.

PRECEPTORSHIP

Preceptors play a role in bridging the gap between nursing education and nursing practice. They are the light that throws the rays on the opaque subject to display the item's shadow. Although it is a shadow, but it displays the shape of the object for everyone to see. Preceptors give perspective to nursing practice to graduate

nurses by aligning nursing education to nursing practice. According to Loughran and Koharchik (2019), nursing preceptors are essential to bridging the gap between nursing education and nursing practice by becoming a transition for graduates to the practice environment and nursing culture. They describe preceptorship as a path for continuous professional development and facilitate nursing practice by developing competencies and independent nurses through education and practice alignment (Loughran & Koharchik, 2019). Ulrich (2012) stated that

“Preceptors live at the junctions of education and practice and of the present and the future. They practice at the point where theoretical learning meets reality and where the gap between current and needed knowledge and expertise gets filled. Preceptors are the essential link between what nurses are taught, what they do, and what they know and need to know. Competent preceptors are critical to educating nursing students, transitioning new graduate nurses to the professional nursing role, and transitioning experienced nurses to new roles and specialties” (pp. xxv).

This can be achieved through the structural and interactionist model of preceptorship. These two focus on the collaboration between nursing programs and preceptors to aid in the progression of clinical nursing practice. The structural aspect is where the preceptor sets up an environment to bring clinical nursing practice objectives into perspective that ensure that new graduates get the appropriate experience and exposure (Omer et al., 2016). Through this measure, the preceptor defines the traditional and current roles and expectations glued to the new graduates through concepts and content in nursing school. The interactionist aspect is where preceptors do the training by employing important essential content to clarify the new graduate’s job description and institutional policies and procedures, model professional behaviors, support developing skills to adhere to the standard of practice, advocate and connect new graduates to the interdisciplinary team and teach and guide therapeutic communications (Omer et al., 2016). Through these interventions, the new nurse adopts and acts as a nurse who knows the sciences and art of nursing. According to Omer et al. (2016), adopting the interactionist and structural model equips graduates with professional knowledge, skills, and attitudes in all clinical settings through an interactive and structural process that facilitates new nurses to integrate into their role in clinical settings. With these two models, preceptors facilitate learning through numerous form of mentoring and coaching that identifies the new nurse learning needs to facilitate techniques that equip assessment skills to foster the implementation of evidence-based practice guidelines. This builds the confidence in the new nurse and equips the new nurse to use the knowledge and skills in

every setting in such developed outlines. The outlines are knowledge and integration skills, communications, management skills, assessment and intervention skills, critical thinking skills, problem-solving skills, leadership skills, and patient care skills (Nash et al., 2018). Such outlines are brought into perspective through preceptorship and internship to practice program.

INTERNSHIP TO PRACTICE PROGRAM

Internships are projected to be the way out to bridge the gap between nursing education and nursing practice. The majority of healthcare administrators have confidence that internship to practice programs for nursing students equip new graduates with the confidence to provide effective, efficient, and safe patient care (Bennett, 2017). According to Bennett (2017), nursing programs should include internships in their curriculum where nursing students must work in a clinical setting with a full load of patients alongside a preceptor. This will help their clinical knowledge and experience, making them competent through the familiarization with the clinical setting. The rigorous process of the outlines stated earlier under which the new nurse will be trained ensures that they are nurtured, supported, and structured to grow professionally. There should be a marriage between nursing programs in various colleges and universities and healthcare facilities to promote a strong relationship between the two stakeholders. Such a relationship will trickle down to the new nurse since getting an internship will be easy to ensure that they will get enough preparation to handle the complex and demanding nursing task.

This relationship should be based on the concept of nursing programs educating and preparing students while the facilities recruit and retain the new graduate nurses (Roush et al., 2021). The nursing programs shape the gifts and talents of the students in the science of nursing, while the facilities provide positive nursing practice environments that ensure the natural transition for the new nurse. According to Roush et al. (2021), this relationship is an academic-practice partnership that bridges the gap between nursing academic and nursing practice by strengthening the new graduate's entire nursing practice and guiding them to lead their practice in a transformational way.

The nursing programs and the facilities should well structure internships. According to Boyer (2011), an internship should be structured to support the new graduates in their professional growth by having weekly conferences, didactic lectures, instructions, and project and support group meetings. The weekly conferences should be a meeting between the preceptor, the instructor, the facility educator, and the intern to evaluate the established goals and expectations based on the learning objectives (Boyer, 2011). The support group meetings are

seminars between fellow interns to discuss their weekly experiences. The support group will be like post conferences after every clinical rotation. The project will require the student to find something that needs to change in the facility. They will work with the preceptor and the facility educator to find the topic, research, and develop and present it through a PowerPoint and a research paper. The project is like a dissertation. Such a comprehensive program put together by the two stakeholders combines the science and art of nursing in the same arena, bringing nursing education and nursing practice into perspective.

CONCLUSION

Bridging the gap between nursing education and nursing practice is challenging for all healthcare system stakeholders globally. It does not have a quick fix, but a comprehensive plan should gradually solve it. Every stakeholder in the healthcare system needs to understand the pathway to bridge the gap since it is a major factor in reducing the turnover rate and loss of revenue, crumpling the system's scarce resources. Some of the solutions have been stated; however, more research needs to be done for more solutions to this problem. Competency-based education is one of the solutions to this challenge. This form of education requires students to finish various competencies under areas that shape their practice. This makes the students experts in the various areas they need to demonstrate their competencies. Preceptors guide these competencies, and internship programs bring them under perspective. The preceptors highlight these competencies, while the internship programs provide the environment to develop and utilize these competencies. This is how to bridge the gap between nursing education and nursing practice.

REFERENCES

- 1) Bennett, L.L. (2017). The gap between nursing education and clinical skills. *ABNF Journal*, 28(4), 96–102.
- 2) Boyer, S.A. (2011). Vermont Nurses in Partnership Model. *The Rural Nurse: Transition to Practice*, 147.
- 3) Hossler, C., & James IV, A. (2021). Competency-based nursing: Reducing cost while maintaining or improving quality. *The Journal of Competency-Based Education*, 6(2), e1247.
<https://doi.org/10.1002/cbe2.1247>
- 4) Kavanagh, J.M., & Sharpnack, P.A. (2021). Crisis in competency: A defining moment in nursing education. *Online J Issues Nurs*, 26(1).
<https://doi.org/10.3912/OJIN.Vol26No01Man02>

- 5) Loughran, M.C., & Koharchik, L. (2019). Ensuring a successful preceptorship. *The American Journal of Nursing*, 119(5), 61-65. <https://doi.org/10.1097/01.NAJ.0000557917.73516.00>
- 6) Nash, J., Kamel, T.C., Sherer, J., & Nauer, K. (2018). Implementing a perioperative nursing student summer internship. *AORN Journal*, 107(1), 83-90. <https://doi.org/10.1002/aorn.12003>
- 7) Omer, T.A., Suliman, W.A., & Moola, S. (2016). Roles and responsibilities of nurse preceptors: Perception of preceptors and preceptees. *Nurse Education in Practice*, 16(1), 54-59. <https://doi.org/10.1016/j.nepr.2015.07.005>
- 8) Roush, K., Opsahl, A., & Ferren, M. (2021). Developing an internship program to support nursing student transition to clinical setting. *Journal of Professional Nursing: Official Journal of the American Association of Colleges of Nursing*, 37(4), 696-701. <https://doi.org/10.1016/j.profnurs.2021.04.001>
- 9) Ulrich, B. (2012). *Mastering precepting: A nurse's handbook for success*. Indianapolis, IN: Sigma Theta Tau International.
- 10) Wolf A. (2022). Adapting nursing programs to competency-based education. *Nursing*, 52(2), 12-13. <https://doi.org/10.1097/01.NURSE.0000806200.13094.90>