A VISION FOR Doctoral Preparation for Nurse Educators
A Living Document from the National League for Nursing

NLN Board of Governors
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Mission

Promote excellence in nursing education to build a strong and diverse nursing workforce to advance the nation’s health.

Core Values

Caring, Integrity, Diversity and Excellence

INTRODUCTION

As the voice of nursing education nationally and internationally, the National League for Nursing is a strong advocate for evidence-based teaching. The League believes in the importance of positioning nurse educator preparation, specifically on the doctoral level, at the forefront of educational reform as a vital way to advance the nation’s health.

The NLN supports doctoral preparation to prepare researchers who can advance the science of nursing education by generating and/or translating educational research that focuses on teaching the practice of nursing. This is achieved through doctoral education that develops the knowledge and skills required to conduct and/or translate research on salient nursing education phenomena. The NLN also believes that doctorally prepared educators are needed to respond to national directives for leading curriculum change, developing models of cost effective education, and preparing a workforce to meet the needs of a reformed health care system, both nationally and globally. However, in spite of the increasingly complex demands in higher education and health care that require the response of doctorally prepared nurses, only 25 percent of full-time nurse faculty at all ranks have doctoral degrees (NLN, 2009).

The nursing profession supports the importance of preparing faculty to be expert practitioners, skilled in knowledge generation or knowledge translation related to advancing the science of nursing practice (AACN, 2006; Benner, Sutphen, Leonard & Day, 2010; IOM, 2011). However, it has been less successful in acknowledging the need to formally prepare nurses to be expert educators in the practice of nursing (Bellack and Tanner, 2010) despite the fact that nurse educators in academic and practice settings serve a critical role in preparing graduates to practice in health care systems of increasing complexity and to deliver safe, fiscally sound, high quality care. The National League for Nursing believes that it is critical that doctoral programs in nursing, including both research and practice doctorates, prepare graduates with the knowledge and skills to teach, to provide leadership for transforming education and health care systems, and to conduct or translate research in nursing education. The NLN’s mission and core values, the organization’s long history of leading the national and international nursing community in building the science of nursing education, and the broad-based intellectual capital embedded in its members and leaders provide the foundation for the NLN to address this challenge and opportunity.
BACKGROUND AND SIGNIFICANCE

According to the Robert Wood Johnson Foundation-funded Institute of Medicine report, *The Future of Nursing: Leading Change, Advancing Health* (2011), there is a critical need for more doctorally prepared nurse educators to advance the science of nursing education, design educational systems that implement efficient and cost-effective programs of learning, and lead in the improvement and redesign of the health care system. Students in the health professions are entering the field at a time when demographic and economic forces have given rise to an urgent national priority to ensure the public’s ability to access safe, high quality, and cost effective care. Concurrent societal concern about the cost and efficacy of higher education accentuates the need to develop a science that addresses the call for interprofessional education, team communication skills, and efficient ways to implement new clinical practice models. We must have research on our learning systems to support these efforts (Frenk, Chen, Bhutta, et al, 2010). For educational innovation to flourish in our nursing programs and address the issues facing the health professions, we must have research on our learning systems to support these efforts (Frenk, Chen, Bhutta, et al, 2010).

In 2008 the Carnegie Foundation endorsed doctoral education’s utility for enhancing the practical as well as intellectual dimensions of professional life by focusing on the interdependence of liberal education and professional development for practice (Sullivan & Rosen, 2008). To be responsible stewards of the nursing profession and to address emerging needs of educational systems, the Carnegie Foundation for the Advancement of Teaching issued a report (Benner, Sutphen, Leonard & Day, 2010) calling for all graduate nursing programs to support the study of pedagogies specifically designed and evaluated for nursing education. The need for doctoral programs to include teacher education courses and experiential learning that better prepares future nursing faculty is integral to the report’s recommendation to transform nursing education to meet the needs of today’s health care system. The report further calls for schools, federal and state governments, and philanthropies to increase funding support for faculty to engage in the scholarship of teaching and learning.

Calling for doubling the number of nurses with doctorates by 2020 to add to the number of nurse faculty, the report notes that at no time has there been a greater need for research on nursing education. The current changes in nursing, health care, and education are creating an urgent need to prepare nurse educators to create innovative learning environments that develop the clinical reasoning skills required for practice in changing health care delivery systems. To achieve better care, better health, and lower costs, doctorally prepared nurse educators are needed more than ever in academic and practice settings to develop and incorporate evidence-based approaches to coordinated care within programs of learning and to expand graduates’ views of patient-centered care, population-based care, and team-centered coordination during care transitions.

A more diverse faculty workforce is critical as well. The NLN’s commitment to champion diversity in the nurse educator workforce resonates with the national call to diversify the next generation of health care professionals and nurse educators to support high-quality health care for all population groups, specifically in primary care and community health care settings (IOM, 2011). Currently only about 12 percent of students enrolled in doctoral programs in nursing are from racial and ethnic minority groups (AACN, 2011). Although this demographic has shown a steady incremental increase over the past decade, the number of graduate nurses from minority backgrounds lags behind current population estimates. As the nursing profession strategizes to double the number of doctorally prepared nurses over the next decade, it is critical to enhance efforts to recruit and retain students from minority backgrounds so that they can significantly affect the development of systems, in both practice and education environments, in which all nurses work towards reducing health disparities and promoting culturally sensitive patient-care.

Additionally, current reports (NLN, 2009 & 2010) indicate that the faculty shortage still exists, and there remains insufficient numbers of doctorally prepared faculty. Broome (2009) notes that if more of the 50 percent of teaching
faculty who are already prepared with master’s degrees were to obtain doctoral degrees they would bring new insights to research questions and be able to develop substantial education-focused research careers. Minnick, Norman, Donaghey, Fisher & McKingan (2010) report that despite program descriptions indicating that doctoral research programs were preparing graduates for faculty positions, only 20 percent of the schools in their study required a teaching practicum. In subsequent work describing capacity issues in doctor of nursing practice programs (DNP), Minnick, Norman & Donaghey (2013) note that DNP programs, which propose to respond to the faculty shortage (AACN, 2006), in fact offer few educator or faculty role preparation courses in their programs. The authors urge that attention be given to programs of study that would better meet the need for more and better prepared nurse faculty. These findings are confirmed by Udlis & Mancuso (2012) who found that only 11.75 percent of DNP programs offer any form of nursing education courses that would help graduates develop educator skills.

Without doctorally prepared nurse educators to address these priorities and lead educational reform, the nursing profession risks producing a workforce that is not ready to provide accessible and affordable care to diverse populations in multiple settings. Nurse educators who understand and implement discipline-specific pedagogy are the vital link to a future workforce that will lead health care reform. While different doctoral programs (e.g., DNP, DNS, EdD, PhD, etc.) will emphasize practice, research, and education to varying extents, it is imperative that all doctoral programs prepare nurse educators to teach in both academic and practice environments.

THE NLN’S RESPONSE

The National League for Nursing has actively given voice to the need for nursing scholars with discipline-specific pedagogical knowledge and skills (2002, 2005, 2007, 2012). The NLN:

- Was the first national nursing organization to assert that the nurse educator role requires specialized preparation (NLN, 2002) and develop core competencies for the nurse educator (NLN, 2005; NLN, 2012).
- Extends its support for nursing education research by committing operational funds to support scholarships specifically for doctoral students to encourage program completion in a timely manner and offers awards for students who focus their dissertation or DNP project on research in nursing education.
- Consistently advocates for faculty loan programs for tuition support for doctoral students who will assume faculty roles.
- Disseminated new “Priorities for Research in Nursing Education” (2012) to provide direction for doctoral students and others to continue to build the science of nursing education.

All of these endeavors designed and implemented by the NLN over the last two decades have focused on a core belief that the role of the nurse educator is complex. For both the faculty role in an academic setting or a professional nurse development role in a practice setting, we expect the successful educator to be an expert practitioner, possess the pedagogical knowledge of a skilled educator, and be engaged in either knowledge generation or knowledge translation. Additionally, it is essential that educators are able to evaluate outcomes of the educational models they design and implement. In practice disciplines like nursing, it is especially important that educators and practitioners alike be able to evaluate and demonstrate links between educational outcomes and patient care quality. This is a particularly challenging task in a health care system that is experiencing multiple stressors and undergoing rapid change.

CONCLUSION

The NLN supports multiple ways (both master’s, post-masters’ certificates, and doctorate) for attaining nurse educator competencies. At the same time, to ensure that future nurses can practice competently in environments that demand the delivery of safe and cost effective systems-oriented, team-driven care, the NLN asserts that nurse educators prepared at the doctoral level need a deep understanding of the nursing discipline’s practice foundations and an equally deep understanding of educational and evaluation theories and strategies. The future calls for new
ways to value the complex role of the nurse educator and to promote the practice of expert clinicians who can translate their knowledge and skills for students at all levels through evidenced-based teaching.

RECOMMENDATIONS

For the Nursing Profession

- By 2020, double the number of faculty with doctoral preparation in nursing education.
- Support the inclusion of formal academic preparation for the nurse educator and/or faculty role in doctoral program curricula.
- Advocate for research funding to investigate links between educational innovations and patient care outcomes.
- Affirm the need for educational models that foster greater diversity in doctoral programs.
- Design new clinical models of education that strengthen links between education, practice, and research and draw upon the expertise of doctorally prepared nurses skilled in knowledge generation and translation of nursing education research.
- Minimize degree completion time between BSN and MSN degrees and doctoral degrees, to more rapidly increase the number of nurse educators who are doctorally prepared with faculty role preparation.

For All Doctoral Programs

- Maximize program capacity by establishing partnerships or consortia between schools of nursing with doctoral programs offering nurse educator preparation courses and/or faculty role preparation courses, and those lacking such programs.
- Facilitate doctoral student progression with effective curriculum sequencing and support (e.g., learning activities designed to contribute to the final scholarly product; structured faculty and peer mentoring; use of student cohorts; flexible pre-requisite requirements).
- Intensify efforts to recruit and retain students from minority backgrounds.
- Increase the number of distance accessible doctoral nursing programs with nurse educator and/or faculty role preparation courses.

For Doctoral Programs Preparing Nurse Educators

- Develop doctoral program courses to prepare graduates to:
  - Design curricula that prepare students for patient-centered, population-based care in interdisciplinary teams.
  - Evaluate the impact of large scale educational innovations.
  - Translate and implement findings from nursing education research.
  - Manage learning environments with increasing student diversity.
  - Use information technology-empowered learning strategies.
- Design opportunities for students to work on interdisciplinary research teams, contributing their educator expertise.
- Collaborate with schools of education to offer courses on program (vs curriculum) evaluation, student services support, innovative curriculum design, and grand scale use of information technologies.

For Deans, Directors, Chairs of Nursing Programs

- Support faculty who are pursuing doctoral degrees with release time and/or financial assistance.
Establish orientation and mentoring programs to facilitate the transition of novice faculty into the faculty role and increase retention.

For doctoral program preparing nurse educators as researchers, establish post-doctoral research centers at schools with faculty that have active programs of research in nursing education.

Seek funding for post-doctoral research fellowships.

For the National League for Nursing

- Establish post-doctoral nursing education research fellowships.
- Continue to obtain funding for scholarships and grants to support nurses whose doctoral studies focus on advancing the science of nursing education.
- Continue to advocate for a diverse body of doctoral students and obtain scholarship funding for underrepresented students who will seek nurse educator positions in academic and practice settings.
- Advocate for doctoral program funding support at state and federal levels.
- Offer faculty development programs that prepare faculty to teach in research or practice doctoral programs, including how to teach advanced research and scholarship skills.
- Design model curricula for graduate programs that prepare nurse educators, with special attention to differentiating between the competencies expected of the master's-prepared nurse educator and those expected of the doctorally prepared nurse educator.
- Support doctoral student publication efforts by expanding the NLN Scholarly Writing Retreat model.
- Contribute to nurse educator workforce development by maintaining data on: doctoral programs offering educator and faculty role preparation, faculty with doctoral preparation, and masters’ programs/post-master’s certificate programs with educator preparation concentrations and majors.

REFERENCES


