CHANGING THE CULTURE OF UNDERGRADUATE RESEARCH

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WHERE WE STARTED

 Six years ago the Division of Nursing was in difficulty with the Board of Nursing

- Problems with NCLEX test scores
- Interpersonal issues with faculty and students
- Dissatisfaction with program and its outcomes
- Outdated curriculum
- No emphasis on conceptual threads or student learning outcomes
- Courses were outdated and research course was a methods focused course with the outcome being a research proposal

OBJECTIVES TO BE ACHIEVED

- Improve outcome performance
- Improve inter-personal relationships
- Revise curriculum, including the addition of a conceptual framework and student learning outcomes
- Improve community perception and overall satisfaction with the program with internal and external customers

IMMEDIATE STEPS

- Changes in faculty
- Changes in admission standards
- Inclusion of remediation, NCLEX preparation work and an emphasis on student success
- Establish a curriculum task force and receive approval for a new curriculum
- Conduct focus groups with internal and external customers and act on feedback
- Establish an open communication structure, insist on a new faculty commitment and provide immediate feedback to faculty and students
- Change research process to focus on research utilization and evidence based practice

IMMEDIATE OUTCOMES

- Conditional approval removed within 5 months and re-approval received two years later
- Changes in faculty
- Curriculum revised and approved with the addition of concepts that are in line with current nursing practice—complementary therapies, evidence based practice, leadership,
- Feedback from focus groups acted on immediately
- NCLEX results—above national average within two years, 100% pass for three years
- Customer satisfaction with graduates and their outcomes
- Successful NLNAC accreditation visit

CONCEPTUAL FRAMEWORK



STRESS IN THE WORKPLACE

- Occupational stress is listed as a "global epidemic"
- Physical and economic consequences
- Over \$200 billion dollars a year lost in productivity due to absenteeism, less productivity when at work, staff turnover, workers' compensation, medical insurances and other stress related expenses.
- Holmes-Rahe Life Stress Scale—work related stresses rank high along with the usual life stresses

- It can stimulate productivity and creativity if at a manageable level and is not overwhelming and constant
- Occupational stress from three factors
 - Life situations
 - Work
 - Self

Balance between stress causes and available support systems

COPING WITH STRESS

- Support systems
- Things that will offset stress
- Anything that assists with relaxation—Bio-Touch

COMPLEMENTARY THERAPY/HOLISTIC CARE THREAD

- Since the majority of illnesses have their etiology in the client's stress level
- Stress manifests itself in somative symptoms, such as headaches, anxiety, elevated blood pressure, elevated pulse, gastro-intestinal complaints, sleep disorders, etc
- Conservative medical therapy does not always work
- Complementary therapies can enhance the regular medical regime
- Illness and stress lead to lost work time and decreased productivity
- Anything that can enhance quality of life is a win for the client and their family

EVIDENCE BASED PRACTICE THREAD

- Began introducing students to PICOT -"burning" clinical questions—in first nursing courses.
- Revised focus of research course to research utilization and evidence based practice
- Had Dr. Fineout-Overholt come to keynote a research day for faculty, students and service
- Integrated Bio-Touch certification into a research project completed on the last day of advanced certification training.
- Data collected from a convenience sample who were on campus in the Student Center on data collection day

EBP (CONTINUED)

- In the beginning, the research course faculty developed the proposal with Bio-Touch administration and submitted it for IRB approval.
- After the first year with a small sample and less enthusiasm from the students, we moved to the main campus which has more subject availability on the data collection day.
- We required the students to present the findings at our annual honor society research day. Assignments were made by the faculty as to what students would present.,

EBP (CONTINUED)

- After two years, as the study subject pool grew, students were involved in developing the proposal; presenting it; and chose to send an abstract for this conference.
- Have presented the data 11 times since last November to diverse groups such as an international business educators' group, focusing on Bio-Touch to improve productivity to Kiwanis and the Farm Bureau Women's groups.
- Student recommendations have been included in the continued study in August, 2012:

EBP (CONTINUED)

- A Bio-Touch research coordinator was named from the junior class and she has worked with me to get the IRB proposal in and approved.
- Vital stations will be set up to take measurements before and after Bio-Touch
- Additional subject recruitment strategies have been developed
- The project now is a % of the research grade for the Fall course and the presentation at Research Day in November is required.

BIO-TOUCH

- Why chosen?
- Type of therapy
- What it is
- Students are required to be certified in this complementary therapy because
 - It is easy to learn and do
 - Can be easily taught to lay persons, such as family, employers, children, etc.
 - Has no negative side effects
 - Requires no special equipment or mindset
 - Can be done anywhere
 - Evidence suggests that it works

PROCESS AT NWOSU

- Students began being certified
- Divisional requirement for both faculty and students, including adjunct faculty
 - Great deal of skepticism at first
 - Other invited. Little response
 - IFBM sent consultant to teach the therapy
 - Juniors had a two day training
 - Seniors received three day advanced training
 - Faculty received both

PROCESS (CONTINUED)

- Training held at the campus where the majority of students were located—not main campus
- Began research there on a Friday—few subjects available
- Students still expressing mixed feelings about the class and the need

PROCESS (CONTINUED)

- Two years ago made the decision to move the class and the research to the main campus and collect data in the student center
- 2011; N=193
- 2012; N=247
- Now have repeat customers, asking when we are having the Bio-Touch day
 - Administrators, community members, faculty, students and staff participating
 - Classes and sports teams are given credit for attending
 - Community members and other schools asking about it when students use it at health fairs and during the research

CULTURAL CHANGE FOR UNIVERSITY COMMUNITY

- Now have subjects asking when the Bio-Touch day will occur.
- Faculty are giving participation points if students attend.
- Construction workers, families, children and community members are now attending along with university faculty, staff and students.
- Students utilize Bio-Touch in patient care and have stations set up at health fairs. Teach families to do Bio-Touch.
- Clients call asking for Bio-Touch and students do Bio-Touch on their respective campuses.
- A local dental office is sending staff to be trained as is the ADN program and the massage therapy program in the region.
- Presented to statewide ADN and BSN Deans and Directors in February, 2012 and a great deal of interest was expressed.
- Bio-Touch is not only a part of our nursing program holistic thread, it is part of our regional community.

CULTURAL CHANGE AND TRANSFORMATION

• Keys: (Senzon, 2011)

- Harnessing Wisdom and Passion
- Optimizing Structures
- Developing the Evidence Base
- Timely Self-Transformation
 - Social and Cultural Changes
 - Self-Identity and Development
- An Integral Map

RESEARCH CLASS RESULTS

- Made an extra credit assignment in research two years ago
- In 2011, made an integral part of the research course with the presentation at the annual research day part of the grade
- For 2012, the participation and presentation of the research is worth 20% of the grade. Only the evidence based project at 35% is worth more.
- Grades in the research course and understanding of the process increased 22%; evaluated through mid-term essay exams
- Only 1 C this semester; rest A's and B's
- Student evaluations indicated a clearer understanding of research
- Faculty Evaluation scores increased 5% or 49 points from 2010-2011.
- Presenting at local, regional, state, national and international conferences

PLANS FOR UPCOMING RESEARCH

- Continue to integrate into research course with a percentage of the grade going to the Bio-Touch research participation—20% this coming term
- Continue presenting results at annual research day and other appropriate venues; Bio-Touch at health fairs and integrated into clinical experiences
- Add vital signs and include student recommendations in the changes related to methodology—already implemented for this next academic term
- IRB already approved study for August, 2012
- Continue quantitative comparisons of results from year to year of study data

BIG TAKEAWAYS FOR OUR PROGRAM

- Students are utilizing research effectively and have an appreciation for the research process
- Bio-Touch is standard care practice for our program and is integrated into our university and regional communities
- Students understand the research process by having done it—no surprise there.
- They write PICOT questions spontaneously in clinical situations and use the library resources to review evidence effectively

CONTACT INFORMATION:

- Dr. Carole A. McKenzie, RN, CNM
- Bio-Touch information
- www.justtouch.com