



A History of Service. A Promise to Lead.

March 3, 2020

TO: Senator Jeanette K. White, Chair

Senate Government Operations Committee

FROM: Paulette Thabault, DNP, ANP-BC, JD, FAANP

Director of the Norwich University School of Nursing

RE: Obstacles to Recruitment and Retention of Qualified Nurse Educators

My name is Paulette Thabault, Director for the School of Nursing at Norwich University. I have been in nursing and nursing education for many decades, and in my current position for five years. Over this recent time period I have experienced increasing challenges in recruiting nursing faculty to teach our students in the clinical setting. One of the chief barriers is identifying nurses with the credentials required by Vermont regulations, which is to have earned a Masters of Science in Nursing or be currently enrolled in a Masters of Science in Nursing program with an anticipated completion date within 3 years.

I believe the Masters of Science in Nursing (MSN) is an important advanced degree where nurses deepen their core nursing knowledge and leadership as well as strengthen clinical reasoning and critical thinking skills. I support the MSN degree requirement in the classroom as per the current regulations, however I do not believe the MSN-prepared nurse is the only qualified nurse to teach in the clinical setting.

In the clinical setting, students are tasked with applying new knowledge to provide safe nursing care. With this as a core objective, a BSN-prepared nurse employed at the facility where the clinical experience is being held, and with experience in that specialty, can often be the best educator. In the clinical setting, with an MSN-prepared nursing instructor who is not from that

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facility, as is often the case, the orientation is brief, and therefore the faculty may be learning the policies and procedures of that facility along with the student nurses they are teaching.

An example of this barrier arose in the current semester when our students are in pediatric and maternal/child health clinical rotations. Our curriculum plan has students covering 7 weeks in each specialty. Because we were unable to recruit an appropriately credentialed nurse for the maternal/child rotation, we left one of our rotation days unfilled and we shortened the rotation to just 5 weeks allowing all students a shortened experience. I am certain we would have been able to recruit an experienced BSN-prepared nurse had we the opportunity, and would have been better able to fulfill the educational expectations of our students.

In another example, in one of our rural hospitals we were unable to recruit an MSN-prepared nurse to teach a medical-surgical rotation. We were able to recruit a BSN-prepared nurse who held a Master's in Education (not nursing). In that case, we went through the cumbersome pre-approval process under the current regulations and gained approval to hire her for the clinical teaching. We had a successful rotation; however, she has since left her position and it is unlikely we will be able to utilize the hospital for future teaching experiences.

I could offer many examples of the challenges of finding qualified faculty to teach our students in the clinical setting and I believe this is a barrier to our educating the workforce we need, particularly in Vermont.

I support the recommendations in the Vermont Secretary of State, Office of Professional Regulation, **Obstacles to Recruitment and Retention of Qualified Nurse Educators.**

Specifically, I support providing a streamlined process for Schools of Nursing to hire BSN-prepared nurses to teach in the clinical setting when the School has not been able to recruit qualified MSN-prepared nurses. Schools of Nursing have an obligation to maintain national accreditation standards including those related to sufficient qualified faculty. Updating VT regulations to align with these National Standards would create needed flexibility without sacrificing quality or safety in education. Clarifying a faculty education standard with a reporting process regarding faculty would be beneficial and allow our Schools of Nursing to better meet the growing need for RNs in our state.