



EDUCATION NEWS

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SHARE YOUR SECRETS—TEACH! A PROPOSAL TO INCREASE THE NUMBER OF NURSE ANESTHESIA EDUCATORS

In order to combat the growing shortage of Certified Registered Nurse Anesthetists (CRNAs), it is imperative to increase the number of nurse anesthesia educators. “Share your secrets—Teach!” is a proposed program to discover barriers encountered by potential educators, alleviate the barriers, and encourage, support, and reward nurse anesthesia educators. Additionally, programs will continuously improve educational content and experiences for students by evaluating the new courses and instructors and incorporating suggestions.

Themes inherent to the proposal are discussed and linked to current literature, the future of the proposed program is discussed, and topics for future research are identified. The program will increase the healthcare community’s awareness of the needs for nurse anesthesia educators, improve existing didactic and clinical instruction, and ultimately increase the numbers of nurse anesthesia educators.

Key words: Barriers, CRNA instructor shortage, nurse anesthesia education.

The rapid growth of the aging population in the United States plus the increasing healthcare needs of the nation are significant contributing factors to the nursing shortage. This shortage affects the profession in all areas and particularly in the advanced practice areas such as nurse anesthesia. In past decades, many attempts to define the scope of the shortage and offer suggestions to ameliorate the growing crisis have been undertaken. In many instances and aside from other factors, a lack of faculty to teach in nursing and nurse anesthesia programs in particular has been identified as a concern for the continued expansion of the profession.

In March 2006, the American Association of Nurse Anesthetists (AANA) Education Committee requested nurse anesthesia students submit proposals to increase the numbers of nurse anesthesia educators. The proposal entitled “Share your secrets—Teach!” was selected as the 2006 Student Excellence in Education Award recipient. The proposed program involves assessing

and alleviating the barriers to teaching in nurse anesthesia programs. It includes encouraging potential educators to develop a lecture on a topic of interest to them, providing support and resources for new educators, providing constant evaluation and improvements to the new programs offered, and public recognition for the efforts of the educators. By providing an ongoing focus on the need, value, and importance of nurse anesthesia providers, the advancement of nurse anesthesia education as a profession will occur.

History and value

In 2005, the US Department of Health and Human Services Administration on Aging reported a projected 40 million people will be over the age of 65 in 2010, representing a 15% increase in the 2004 population.¹ As the general population of the United States continues to age and retire, so do the numbers of nurse educators. The country faces a projected shortage of 1 million nurses by the year 2020, and the projected supply of

nurses that year will fall short of the need by 36%.²

Decreasing numbers of nurses translates to decreasing numbers of nurse educators and further compounds the nursing shortage because applicants to nursing programs are often denied admission because of a lack of faculty. In 2001, the Northwest Health Foundation reported by 2010, 46% of baccalaureate and higher degree nursing faculty in Oregon are expected to retire, which mirrors a national trend.³ Similarly, the American Association of Colleges of Nursing (AACN) projected from 2004 to 2012, an estimated 200 to 300 doctorally prepared nursing faculty will be eligible to retire annually.⁴ The specialty of nurse anesthesia is not immune to these growing problems. A comprehensive report published in 1990 by the National Center for Nursing Research of the National Institutes of Health indicated nurse anesthesia programs need 1,500 to 1,800 graduates annually to meet the nationwide demands for CRNAs by

the year 2010, and a shortage of faculty was cited as an impediment to increasing the numbers of CRNAs.⁵

Additionally, as a result of disturbing nurse anesthesia program closures between the mid-1970s and 1980s, the National Commission on Nurse Anesthesia Education (NCNAE, 1989-1994) worked to discover the barriers to increasing the numbers of Certified Registered Nurse Anesthetists (CRNAs), set goals, and implemented specific projects to assist in combating the shortage including marketing nurse anesthesia and nurse anesthesia education as a career; recruiting, developing and supporting faculty; encouraging collaboration between CRNAs and anesthesiologists to improve anesthesia education opportunities; and increase awareness within the community regarding education and research issues.⁶

The aging American society also presents increased needs for and utilization of healthcare services. Anticipated increases in the need for surgical services, as well as the need for CRNAs in activities outside of the operating room (ie, interventional radiology, pain management, and gastrointestinal services) further underscore the need for the specialty.⁷⁻⁹ In the healthcare market, CRNAs provide valuable and cost-effective services. Additionally, national health and well-being are increased by the production of CRNAs who participate in activities (ie, surgeries and treatments) that hopefully, improve the healthcare consumer's quality of life.¹⁰⁻¹¹

The specialty has seen recent growth, with the number of accredited programs reaching 102,¹² and 1,938 student nurse anesthetists projected to graduate this year (K. Sutkus, Administrative Associate, AANA Education Department, oral

communication, October 2006). However, in light of the shortage and the projected needs for CRNAs, recruitment of nurse anesthesia educators is imperative. Also, recruitment and support of enthusiastic didactic and clinical instructors are important in the socialization of students into the specialty. A lack of role models to assist with socialization has been identified as a causative factor in student alienation and attrition.^{13,14} The proposed program, "Share your secrets—Teach!" aims to inform CRNAs and other professionals about the needs of nurse anesthesia programs for educators and to encourage these practicing professionals to share their time, knowledge, and expertise with student nurse anesthetists. The ultimate goal is to increase the numbers of didactic and clinical instructors in nurse anesthesia education.

The proposal

Because nurse anesthesia is the "best kept secret in nursing," the title and theme of the program is "Share your secrets—Teach!" The chosen title and theme are highly recognizable within the profession and serve to increase the marketability of the program to prospective participants, which is in line with the NCNAE's initial goals and other literature related to the topic.^{6,9} Additionally, the program's broad scope will target not only practicing CRNAs but also other professionals such as anesthesiologists, pharmacists, and physiologists as potential nurse anesthesia educators. By attracting individuals from different specialties, the quality of nurse anesthesia education will be enhanced. Literature reveals educators recruited from a multitude of backgrounds bring vast experience, foster men-

torship, increase networking, open avenues for experiences previously unavailable to students, and provide a multispecialty collaboration that improves patient care.¹⁵⁻¹⁸ Furthermore, the project is easily implemented, replicated, and can be utilized by programs nationally.

The project will be implemented in 2 phases. The initial phase will involve assessing the barriers encountered by potential educators to teaching in nurse anesthesia programs. During this phase, the identified prospective educators will be invited to attend a dinner presentation at which they will, via CRNA and student PowerPoint presentations, learn about the needs of the profession for educators. The presentations will detail the status and age distribution of practicing CRNAs, the projected number of retirees, and the projected future national needs for CRNAs.⁹ Local teaching needs will be highlighted and discussed. Participants will be encouraged to develop a teaching plan for a topic of interest to them that could be developed into a didactic or clinical educational program.

In order to assess perceived barriers encountered by prospective educators, a question and answer period will follow the presentations. Program organizers will record and analyze reported problems and develop ways to overcome them.

At the conclusion of the dinner, presentations, and question and answer session, prospective educators will be given take-home information, providing contact information for local anesthesia programs and listing resources for developing a lecture and continuing their own education as educators. This initial offering of supportive materials is important in developing a foundation for mentorship between the

nurse anesthesia programs and the new instructors. Mentorship and continual faculty development were 2 recommendations of the NCNAE.¹⁹ Likewise, the AACN suggested presentations focusing on academic careers and advocated the formation of partnerships and mentoring programs between junior and senior faculty as an important strategy to recruit, support and retain nurse educators.⁴ Additionally, mentorship relationships provide the impetus for new innovations in education strategies by creating a challenging, thought-provoking environment for new educators.²⁰ Program directors and their designees will then keep in contact with program participants and will help new educators reach their teaching goals by working with cooperating entities in providing opportunities and support for teaching, such as in the scenarios described above.

The value of continuing support for educators cannot be overstated. An Educational Development Institute employed at the University of Nebraska Medical Center, Omaha, Nebraska, in 1997 yielded an increase in problem-based learning sessions, a 37% increase in the number of instructors over a 2-year period, and a reported increase in instructor comfort levels with presentation technology and presentations in general.¹⁶ While this report was not supported by predetermined objective outcomes data, the information indicates a positive relationship between educator support programs and increasing the numbers of educators and subsequent educational presentations. In 1999, the University of Iowa Carver College of Medicine, Iowa City, Iowa, instituted a Teaching Scholars Program offering topics in teaching skills, curriculum design, and professional skills with the goal

of promoting faculty development and leadership.²¹ The results of the Teaching Scholars Program indicated an increase in faculty development activities, such as workshop offerings, an increase in the numbers of individual departments participating in faculty development at departmental and college-wide levels, and a postprogram increase in teaching scholars' educational leadership and publications.²¹ While the authors stated further research into the continuing effects of the program needs to be investigated, Rosenbaum et al²¹ concluded the program enhanced the educational environment for both the individual participants and the entire college community.

The subsequent phase of the proposed program will involve overcoming the barriers identified by the prospective educators and implementing and accommodating new didactic and clinical instruction. By actively engaging new instructors in the development of new educational programs, measurable and attainable objectives for the courses can be met, strengths of the educators and proposed programs can be assessed and promoted, and programs that meet identified needs of the student body can be implemented.^{20,22}

After the program is implemented, ongoing assessment of courses needed and evaluations of new courses will guide future presentations. Furthermore, new courses and instructors will be evaluated by students and senior faculty to continuously offer suggestions for improvement. By polling both nurse anesthesia students for topics of interest and clinical nurse anesthesia instructors for potential didactic areas of weakness noted within the student body, an ongoing needs assessment and program improvement will occur.

Local anesthesia programs will

hold annual award dinners, similar to the annual AANA awards, recognizing the best clinical instructor, best didactic instructor, and anesthesiologist recognition for the support of student nurse anesthetists. The effect of the program will increase awareness in the health-care community about the need for nurse anesthesia educators, and, ultimately, will increase the numbers of nurse anesthesia educators. Additionally, considering the popularity of nationally and state-organized nurse anesthetist awards dinner programs, the continuity of the program via the annual dinner and awards program will be a well-attended and enjoyable event for the students and educators, one that will continually illuminate the importance of nurse anesthesia educators, thereby advancing nurse anesthesia education as a profession.

Looking ahead

While "Share your secrets—Teach!" is currently a proposal, plans exist to secure grant funding to assist with its implementation. Themes explored within the program, such as barriers to teaching in nurse anesthesia programs and the importance of educator support and faculty development, provide topics for further research. Preliminary informal inquiries regarding barriers for prospective educators produced thought-provoking results. For example, at certain clinical sites, practicing CRNAs could be given 1 hour of scheduled operating room time to teach a module of their desired subject (K. Roach, CRNA, Crozer Chester Medical Center, oral communication, April 2006). By initiating such an arrangement, the anesthetists do not have to come in to teach on scheduled days off, which accommodates their lifestyle. Increasing

workloads associated with faculty positions interferes with the recruitment and retention of nurse educators.²³ By combining clinical hours with small, prescheduled increments of didactic instruction time, nurse anesthesia programs and CRNAs can achieve a mutually beneficial situation whereby programs recruit quality instructors and CRNAs can teach in a flexible framework.²⁰

An anesthesiologist suggested technical support for instructors in formatting existing lectures into the seemingly requisite PowerPoint program (D. Heyman, DO, Mercy Suburban Hospital, oral communication, June 2006). By offering technological support services, nurse anesthesia programs could tap into an unrecognized sector of instructors—the technologically challenged. Also, by offering specific instruction for these instructors in various electronic information-sharing technologies, programs will add value and efficiency to their infrastructures.²⁴ To ensure the continued proud tradition of CRNA practice and to continue to produce excellent practitioners, it is imperative that programs such as “Share your secrets—Teach!” be supported, implemented, evaluated, and discussed.

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ACKNOWLEDGMENTS

I thank Bette Wildgust, CRNA, MS, MSN, director, Crozer Chester Medical Center/Villanova University Nurse Anesthesia Program; Patricia Haynor, RN, DNSc, NHA, associate professor, Villanova University College of Nursing, Villanova, Pennsylvania; Kathy Roach, CRNA, Crozer Chester Medical Center; and David Heyman, DO, anesthesiologist, Mercy Suburban Hospital, Norristown, Pennsylvania, for their enthusiasm, encouragement, and support in the development of this proposal and column. I also thank the AANA Education Committee for their time, consideration, and support of “Share your secrets—Teach!”