Recommendations to the Association of Community/Public Health Nursing Educators Leadership Task Force for Strategic Planning: A consensus paper from the Research Subcommittee for Research Mentoring Group 2

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Abstract

The purpose of this consensus paper is to provide the Association of Community/Public Health Nursing Educators (ACHNE) Task Force for Strategic Planning with recommendations aimed at addressing the following: advance the diversity of members, professional development of members, collaborative scholarship, and DNP opportunities. The rationale for this paper is to direct ACHNE to implement research findings related to membership assessment in order to advance ACHNE and the impact of community/public health nursing education (C/PHNE).

An underlying impetus for this report is proactive preparation for establishing partnerships among the affiliates of the expansion of the former Quad Council Coalition into what is now named, the Council of Public Health Nursing Organizations. The intent is for all ACHNE committees to work in unison to address pertinent issues within ACHNE so as to advance C/PHNE by means of quality research and evidence based practice.

Introduction

In response to the ACHNE's reaffirmation of its mission "to advance population health through quality community/public health nursing (C/PHN) education, research and service" (ACHNE.org, 2018), the ACHNE Research Subcommittee for Research Mentoring Group 2 set out to assess membership via a strengths, weaknesses, opportunities and threats (SWOT) analysis. Using survey research methods, they carried out a research study to assess member demographics, including educational preparation, self-identified novice to expert levels specific to research skills/methods, and experience applying research into practice. A researcher developed survey aligning Benner's (1982) novice to expert theory with independent variables such as age, race, gender, and education was employed. Teaching, scholarship, and service characteristics were also assessed. The sample was comprised of 352 active ACHNE members of which 96 respondents completed surveys across two waves of electronic distribution (27.2% response rate). Data were analyzed using online software tools and statistician advice. Results were placed into SWOT categories and then a gap analysis was performed to align the findings with ACHNE's (2018) strategic plans, addressing next-step solutions.

The Subcommittee shared its findings with the Executive Committee in Spring 2019 and received approval for manuscript submission. Consequently, a manuscript entitled, A SWOT Analysis: A Study of ACHNE Members, has been submitted to *Public Health Nursing* (Kuchler et al., 2020) as a Research Brief. In June 2020, study results were presented to members at the 2020 Annual Institute, Research Plenary session. This consensus paper serves to provide a set of formal recommendations to the organization's task force, based on the findings of the study. This paper is cited in the manuscript.

Recommendations

The findings from the study are presented as a foundation for four recommendations we make to the Task Force for Strategic Planning which address: 1) advance the diversity of members, 2) professional development of members, 3) collaborative scholarship, and 4) DNP opportunities.

Advance Diversity of Members

Findings from the study were that survey respondents were primarily from the Midwest (33%), Caucasian (90%), female (94%), and over 50 years of age (86%). The majority of respondents had over 20 years of C/PHN experience (53%), were employed full-time (83%), and/or worked as nurse educators at four-year institutions (80%). Most respondents reported being doctorally-prepared (70%) with the highest levels being Doctorates in Philosophy (PhDs) (40%) or Doctorates in Nursing Practice (DNP) (24%). Most participants held faculty positions (64%) and were not C/PHN certified (75%). Thirty percent were tenured, while 46% reported they were not tenured nor on track to tenure. These findings were compared to both RN and public health nursing workforce data and were found as not being representative of or consistent with national trends or campaigns to expand diversity. Consistent with the American Nurses Association (n.d) definition that *diversity awareness acknowledges and appreciates differences among people*, in our study we defined diversity as "traits and demographic characteristics that make people unique such as age, race, ethnicity, gender, sexual orientation, regions of residency,

and degrees earned" (Kuchler et al., 2020). The rationale for our using this definition was "to guide respect and appreciation for what makes PNO members different, as well as, valuing member contribution" (Kuchler et al., 2020).

The Subcommittee acknowledges that ACHNE membership assessment is critical for advancing ACHNE and C/PHNE. Therefore, we recommend that it is essential for the ACHNE Task Force for Strategic Planning to advance diversity of members with:

1) Consideration of having the management company establish a membership database inclusive of meaningful information such as, gender, age, race, ethnicity, years of experience, degrees earned, and the like. In organizing this database, consider replacing the member categories themes with ACHNE's 11 committees;
   a. member categories themes are: specialized knowledge, community based participatory research, emergency preparedness, faculty practice, global/international, Healthy policy- Healthcare reform, immunizations, informatics, migrant health, nurse managed centers, specialist education in C/PHN, urban/rural public health nursing, and other.
   b. ACHNE's eleven committees are: archives, awards, bylaws, communication, education, executive, finance, membership, nominating, program and research.
2) Consideration of having all committees, especially the Education Committee as designees on the ACHNE Executive Committee so that all members have both voice and vote, inferring representation of diversity and intending inclusivity.
3) Formation of relationships with minority venues and professional organizations, such as the National Association of Hispanic Nurses and the National Black Nurses Association;
4) Development of marketing materials such as digital graphics and videos, as well as social marketing avenues specific to minority and underserved populations;
5) Assimilation of minority information into the ACHNE website;
6) Entrustment of ACHNE's Membership Committee with recruitment efforts to minority groups, which should include an exploration of ways to sponsor memberships for diverse groups. For example, partner with minority venues and professional organizations, such as the National Association of Hispanic Nurses and the National Black Nurses Association asking them to fund membership dues that provide leadership development opportunities for minority members;
7) Promotion of funding opportunities for scholarship and professional development for minority and underserved populations; and,
8) Offer mentoring for novice members and interested scholars who represent diverse populations.

Professional Development of Members

Our study assessed member characteristics related to teaching, scholarship and service. Findings from the study were that most respondents reported they taught *Baccalaureate* (36%) or *Baccalaureate & Master's* courses (24%), were responsible for *classroom* and *clinical instruction* (78%) and used *face-to-face* and *online instruction methods* (77%). Twenty-one percent reported they use academic-clinical partnerships to converge C/PHN theory and

experiences. In terms of scholarship, a majority of respondents were interested in the topics of *Population health* (77%) and *Health inequities* (58%). Topics of equal interest were *Healthcare policy* (30%), and *EBP* (30%). A commonly reported means of disseminating scholarship was *Podium* and *Poster presentations* (52%), however, 22% of respondents reported that they did not disseminate their work through ACHNE. In reference to service, the three primary findings were *Establishing/maintaining community partnerships* (75%), *Functioning as change agents to create a preferred future for nursing education/practice* (55%), and *Establishing/maintaining clinical affiliations* (54%). Most respondents reported serving in *Local/Regional* (53%) and *State* (33%) affiliations, but provided less service in *National (17%) and International* (7%) agencies. Some respondents reported providing *No service (15%)* at any level. Approximately 1/3 reported not serving on ACHNE committees (34%). Those respondents (66%) who participated in ACHNE committees served on committees as follows: *Research* (26%), *Education* (14%), *Communications* (9%), and/or *Program* (9%).

Whereas the function of a professional nursing organization is to offer professional development for its members (Gaines, 2019), professional nursing organizations should advance nurses' skills and education related to current trends affecting care (Sipes, 2019). In the book, *Educating nurses: A call for radical transformation*, Benner et al. (2009) recommended that professional nursing organizations serve as an intermediary for mentoring and directing the educational pursuits of nurses across all levels of nursing. Based on this evidence, we recommend that ACHNE advance professional development by continuing to advance scholarship by supporting presenting scientific work, promoting educators to advance their skills in teaching and encouraging cross-committee efforts. Specifically, by:

1. Suggesting that the Education Committee collaborate with the Research Committee to survey members on their specific teaching needs as related to knowledge and methods known for having a positive impact on C/PHN education and population health.

2. Suggesting that the Education Committee organize survey questions using Benner's (1982) levels of nursing in order to identify how members might be able to mentor one another with teaching, scholarship and service pertinent to professional development. Consequently, consider having the Education, Membership and Research Committees collaborate to develop a **formal mentoring program** using protégé and tutelage led dyads.

3. Continuing to have the Education Committee work with interested members to develop Innovative Teaching Strategies (ITS) that enhance teaching-learning repositories. Hence, charging that a study be performed to test the effectiveness and/or impact of the ITSs on C/PHNE and/or population health by collaborating with the Research Committee to establish psychometrically sound instruments.

4. Facilitating teamwork between Policy, Education, and Research committees in order that policies pertaining to any social change initiatives, statements, or the like that they elect to advance are informed by data and translated into practice by means of evidence-based and relevant andragogy.

Collaborative Scholarship

Benner's (1982) Novice to Expert theory was used to guide how members perceived their levels of competence with research skills, experience using research methods and application into practice. Findings from the study regarding perceived level of competence with research skills, respondents felt most competent with research skills pertaining to *Interprofessional collaborations* (80%). Respondents felt least competent with research skills pertaining to *Meta-analyses* (67%).

Findings from the study regarding perceived levels of competence with experience using research methods, ½ of respondents reported they were less-than-competent using all research method options provided on the survey. Options were evaluation studies, community-based participatory research (CBPR), epidemiological designs, psychometrics, database development, longitudinal designs, complex sampling strategies, multi-site studies, large dataset analyses, multilevel analysis techniques (MLATs) and randomized control trials. (RCTs). Respondents felt most experienced using *Evaluation studies* (50% *competent*) and *CBPR* (48% *competent*). Respondents felt the least experienced using *RCTs* (84% < *competent*) and *MLATs* (82% < *competent*).

Findings from the study were that regarding perceived levels of competence with application of research into practice, three areas of competence with research application into practice were identified: *Quality improvement (QI) projects*, *Evidence based practice* (*EBP*) and *Translation of original research into practice*. Respondents with DNPs felt *proficient* with *EBP* (80%) and *QI* (72%). A logistic regression was performed revealing that respondents with PhDs or DNPs were most likely to report experience using *Longitudinal designs* (p= .05). Respondents with PhDs were most likely to report experience using *Psychometrics* and *Evaluation studies* (p= .05).

The Subcommittee acknowledges that professional development is critical for advancing ACHNE and C/PHNE. In addition, we recognize that:

- the purpose of the Research Committee is to "to promote the development and use of research and EBP for community/public health nursing to improve the health of communities and populations" (ACHNE Bylaws and Operational Manual, 2020, p. 28);
- the Research Committee has demonstrated leadership in funding and producing evidence related to C/PHN and C/PHNE amongst the other organizations or associations in the Council of Public Health Organizations (formerly the Quad Council Coalition); and,
- the 2020 ACHNE Research Priorities (McElroy, Stalter & Smith, 2020, in review) highlight that in order to continue to move the science of C/PHNE forward, priorities for future research must focus on five basic areas:
    1. the highest priority is a need for rigorous scientific studies highlighting the impact and effectiveness of C/PHNE;
    2. Research/evaluation on faculty-centered interventions;
    3. Evidence on the impact of C/PHNE on communities and populations;
    4. Evidence on the impact of C/PHNE strategies on long-term student knowledge, attitudes or behaviors (competencies);
    5. Evidence on C/PHN education about ethics, advocacy and informatics.

Further, we consider how collaborative scholarship opportunities can open the door for long lasting academic-clinical partnerships which could help diversify and progress the direction of ACHNE to impact population health. We assert that collaborative scholarship offers an opportunity to invite graduate students into ACHNE, providing them with mentoring opportunities which will guide future generations of C/PHNEs. Yoder-wise (2018) asserted that a benefit of professional nursing organizations is the fostering of lifelong learning and contributing to the education of future generations of nurses.

Therefore, we recommend:

1. It is crucial for ACHNE to offer both professional development and mentoring in the areas of research skills pertaining to meta-analyses and expanding knowledge in the areas of evaluation studies, CBPR and on reinforcing understanding of interprofessional collaborations, especially with regard to collaborative scholarship.
2. ACHNE leaders should adopt collaborative scholarship as a strategy for formal mentoring so as to increase member competence with research skills, providing experience with research methods, and transforming research into practice.
3. ACHNE Program and Planning Committee should offer PhD-prepared members with educational opportunities that address research skills and methods specific to managing large datasets and completing MLATs. Such education could unify scholarly collaboration between PhD and DNP members.

DNP Opportunities

Whereas the results of our study revealed a difference between the PhD and DNP in that DNPs had perceived *proficiency* with *EBP* (80%) and *QI* (72%) and PhDs reported competence using *Psychometrics* and *Evaluation studies* (p= .05). This is consistent with the American Association of Colleges of Nursing's (AACN) (2004) purpose for the DNP, to translate evidence into practice through EBP and QI methods. Further, we acknowledge the growth trend in DNP programs has sustained momentum increasing in enrollment and graduations over the past decade (AACN, March 2019). Herein, we recognize that over the past three years, the Research Committee SubCommittee for EBP Project Priorities has:

- developed EBP Project funding guidelines and scoring criteria;
- established a formal set of EBP Project Priorities with direction to address public health nursing's most pervasive challenges (Smith, Stalter & McElroy, 2020); and,
- aligned EBP Project Priorities with ACHNE Research Priorities fostering improved outcomes by means of collaborative efforts between DNP and PhD colleagues with hopes of advancing the science of C/PHNE.

Consequently, we recommend that ACHNE Task force provide DNPs with opportunities specific to recruiting, mentoring, serving, and advancing C/PHN and C/PHNE. Explicitly, ACHNE is encouraged to:

1) Have the Membership Committee recruit and solicit all AACN approved DNP programs for members;
2) Have the Membership Committee recruit and solicit social media platforms to solicit DNPs and students;

3) Advertise funding and mentorship opportunities for EBP Projects;
4) Continue to employ EBP Project Award criteria and scoring guidelines;
5) Continue to promote funding opportunities for scholarship and professional development for DNPs, increasing it as budget allows;
6) Encourage new members to actively serve on committees by participating in ACHNE's professional development and scholarship opportunities; and,
7) Offer a **formal mentoring program** for novice members and interested scholars.

Conclusion

In conclusion, this consensus paper has provided the ACHNE Task Force for Strategic Planning with data regarding the demographics and education of its members, information about professional development for its members, along with where the membership is with collaborative scholarship. This paper also addresses the role of the DNP in relation to both the discipline and the organization. Recommendations were presented to the Task Force which address these pertinent issues regarding membership. We emphasize collaborative scholarship and the development of a formal mentoring program for all members, especially those who are DNPs and/or those who represent diverse populations. In order to sustain, grow and make this a viable organization, it is critical that these recommendations be explored in order to leverage ACHNE's mission of advancing C/PHNE. This is especially true as ACHNE continues its collaboration with other members of the Council for Public Health Nursing Organizations.

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