From Coach to Colleague: Adjusting Pedagogical Approaches and Attitudes in Accelerated Nursing Programs

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Accelerated nursing programs are an innovative approach to training nurses and advanced practice nurses that are growing steadily in number and popularity. Although there is ample evidence to show that these programs have good outcomes, acceptance by both faculty and nurses in the community remains low. This article gives a description of the accelerated nursing student, which provides some insight as to why this student is both a challenge and a joy to mentor. In addition, an overview of pedagogical approaches that may be helpful in teaching this bright group of accelerated nursing students is provided. Accelerated nursing students enrich the nursing profession with the myriad of skills and varied backgrounds they bring to nursing. As professionals, mentors, and educators, we need to not only embrace accelerated students but also be advocates and mentors for them as they assimilate into our profession. (Index words: Accelerated nursing program; Pedagogical approach; Professional formation) J Prof Nurs 0:1–7, 2013.© 2013 Elsevier Inc. All rights reserved.

A S HAS BEEN noted in many publications over the past decade, 55% of registered nurses (RNs) will reach retirement age by 2020 while the demand for nurses will increase, thus predicting a shortfall of approximately 260,000 RNs by 2025 (Beurhaus, Auerbach, & Staioder, 2009). In addition to the a0.3the1ot

high expectations for the teaching/learning environment and expect it to be infused with instructional technology and delivered in an efﬁcient, comprehensive manner.

The purpose of this article is to review the literature on pedagogical approaches speciﬁc to accelerated students, identifying best practices, challenges, and areas in need of additional research. Prior to summarizing this literature, a brief history of accelerated nursing programs and a portrait of the typical accelerated student will be provided, drawing from both the literature and the authors' own institutional demographics. Faculty experiences with accelerated students, as reported in the literature, will also be summarized to motivate a further examination of the unique needs of this growing population of students.

The Accelerated Nursing Degree Student Characteristics

On their accelerated programs fact sheet, the AACN (2011) depicts the accelerated nursing student as

• motivated, older and with higher academic expectations than traditional entry-level nursing students. At our own college of nursing, we have certainly found this characterization to be true. Table 1 provides an overview of the demographics of Seattle University's accelerated nursing applicant pool and accepted student cohorts for the academic years 2009 through 2011. A robust and ethnically diverse applicant pool has consistently yielded an extremely bright cohort of accelerated nursing

students with an average undergraduate grade point average (GPA) of 3.4 on a 4.0 scale, high graduate record examination (GRE) analytical scores, and above average GRE quantitative scores. Accelerated students are young with an average age of 27-28 years (range = 22-53), making cohorts largely composed of generation X and millenials or digital natives (Prensky, 2001). The mean age of accelerated students over the past 3 years is 29 years, and approximately 28% hold post baccalaureate degrees in areas such as business, public health, public administration, or the physical sciences.

Most of the students come into the program after successfully pursuing careers in areas such as health education, strategic planning, laboratory science, grant writing, community advocacy, or teaching. Very few students enter the program with 2 or less years of working experience after achieving their baccalaureate degrees. The presence of such rich and varied experience during classroom discussions can be both exhilarating and overwhelming for the nursing professor.

The following proﬁles of three students are representative of the type of students who typically enter Seattle University's accelerated nursing program. Each brings a very different type of experiential and educational background to his or her embarkment on a career in nursing. Most are truly exceptional.

Amy is 31 years old and holds a bachelor of arts degree in medical anthropology with a minor in women's studies. Amy was homeless for a few years and, then,

Table 1. Demographics of Applicant Pool and Accepted Cohorts 2009–2011

Applicant Pool	2009	2010	2011
No. of applications received and reviewed	231	312	352
Average GPA of applicants	3.417	3.431	3.419
Average GRE analytical	4.48	4.37	4.38
Average GRE verbal	516	515	517
Average GRE quantitative	595	586	589
Average age	27.4	28	28.3
Age range	20–54	18–55	19–54
Ethnicity			
African American/Black	11	13	13
Asian American	25	42	49
Hispanic/Latino	5	11	17

began her undergraduate studies at age 24 when she could legally ll out her own Free Application for Federal Student Aid papers. She started her undergraduate degree at a community college and, then, transferred to a public university after completing her Associate of Arts degree. She has been nancially independent since she was 18 and nanced her entire education via grants and scholarships. Amy states that she came to the accelerated nursing program understanding what it means to be vulnerable with the hope of helping other women who have been through similar hardships.

Tim holds a bachelor's degree in psychology and a master's in behavioral neuropsychology. At 39 years old, Tim has held a variety of positions, including research technician, teacher, and massage therapist. His master's thesis title was Dopamine Dynamics Associated With and Resulting From Schedule-Induced Alcohol Self-Administration: Analysis in Mice Lacking the Dopamine Transporter. Tim also participated in a religious mission as a part of his faith journey for 2 years.

At 27 years old, Susan has served 2 years in the Peace Corps in Mozambique and speaks Spanish, Portuguese, French, and some American sign language. She has a

be more demanding of faculty time, particularly one-on-one evaluation of written assignments and examinations.

Both of these articles emphasize that the teaching of accelerated students is not for everyone. Similar to our experience, Cangelosi and Moss (2010) interviewed faculty who were uncomfortable teaching accelerated students. Other faculty•held

As several authors have suggested, employing adult learning principles with accelerated students is both helpful and necessary if we are to assist these students to assimilate quickly into the community of nursing (Rico et al., 2009; Cangelosi & Moss, 2010). However, as noted earlier, accelerated students tend to be high achievers with a proven track record both academically and professionally. In our own program, the application process is competitive with over 300 applicants for 50 slots, yielding a class of exceptionally bright students. Therefore, we feel it is not enough to simply streamline redundant curriculum and insert case studies as needed. Rather, we recommend partnering with students more as a mentor and applying approaches such as Collins, Brown, and Newman's (1989) cognitive apprenticeship model, where teachers:

€ identify the processes of the task and make them visible to students,

€ situate abstract tasks in authentic contexts so that students understand the relevance of the work, and

€ vary the diversity of situations and articulate the common aspects so that students can transfer what they learn (Collins, Brown, & Holum, 1991).

A cognitive apprenticeship approach is a fundamentally different method of teaching in that material is introduced to students in order to provide them with the tools to apply knowledge in strategic ways rather than simply attaining a knowledge base (Stahmeijer, Dohmans, Wolfhagen, & Scherphier, 2009). Students are introduced to material as a means of launching them on an inquiry process. Students are then introduced to increasingly complex problems and encouraged to take control over their own learning.

The instructor acts as a coach by modeling how he or she might approach the problem, inviting students to compare and contrast different approaches. The method is suited to second-degree accelerated students in that it validates the skills and knowledge they bring to the problem-solving process. The method also demonstrates the complexity of problem-solving approaches in nursing, encompassing more and more variables and layers as the student progresses.

Use of the unfolding case is an example of a teaching strategy that can be used with a cognitive apprenticeship approach. The unfolding case, a situational learning strategy, helps students think like a nurse or advanced practice nurse by combining the frequently used case study method of teaching with opportunities for group and individual interactive learning as the ever-changing clinical situation unfolds (Glendon & Ulrich, 1997, 2001). Faculty provide the initial stem of the case or

complex by introducing a second scene, building on the first, with a change in time, patient condition, laboratory results, or procedure.

Perhaps, most importantly, when faculty adopt a coaching role, students feel supported and are pulled into the community of nursing as partners in the learning process, albeit in a novice role, but partners nonetheless. The cognitive apprentice model in general and the use of situated learning in particular also aid in the socialization to the role and the profession. When

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