

Preparing 21st Century Nurses to Care for Diverse Populations

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Introduction

The specific aim of this project is to build collaborations between education and practice that improve the preparation of entry level students and practicing nurses to provide culturally and linguistically appropriate care to diverse populations. The University of Maryland School of Nursing (UMSON) in partnership with Shady Grove and the University of Maryland Medical Centers proposed a one year planning project to explore the perceptions about cultural competence in a curriculum among senior nursing students and practicing nurses.

Objectives

- Assess the level of comfort and skill with providing culturally competent care of UMSON entry level students enrolled on the Baltimore (UMB) and Shady Grove (USG) campuses and nurses practicing at the University of Maryland Medical Center (UMMC) and Shady Grove Medical Center (SGMC).
- Identify gaps and make recommendations for strengthening the delivery of cultural and linguistic competence content in the respective curricula of UMSON faculty and UMMC and SGMC hospital-based educators.
- Initiate the development of educational resources for nursing faculty and hospital based educators to strengthen the cultural and linguistic competence curriculum for entry level students and practicing nurses.

Materials and Methods

- Project faculty will conduct:
- Face-to-face interviews with entry level course directors at UMB and USG and nurse educators at UMMC and SGMC
 - Face-to-face or phone interviews with practicing RNs at UMMC and SGMC
 - Focus group interviews with graduating seniors in the Practicum and Clinical Emphasis Seminar
- Project faculty will develop a toolkit containing research articles, websites, video clips, case studies, simulation exercises, etc. to augment teaching-learning strategies

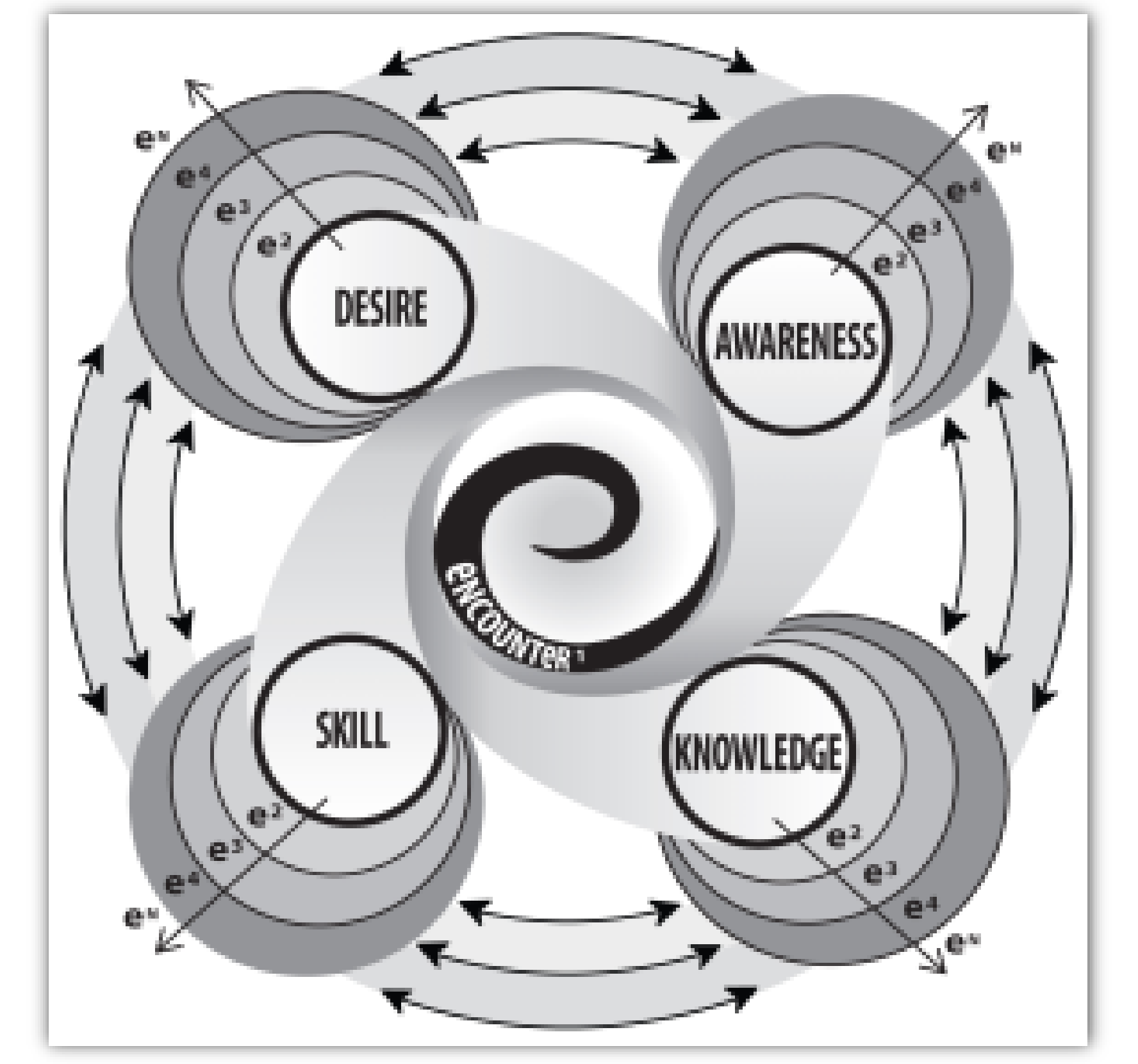
Background and Need

A new entry level curriculum focused on team teaching, sequencing courses based on health status and the application of *The Process of Cultural Competence in the Delivery of Healthcare Services*[®] model developed by Campinha-Bacote was implemented in fall 2014. Barriers to providing education that addresses the delivery of culturally competent care:

- perceptions of an overloaded curriculum (Shattell et al., 2013)
- inconsistencies in the delivery of content across the curriculum;
- faculty comfort in teaching the content (Boyle, 2007; Jeffreys, 2006, Roberts, Warda, Garbutt & Curry, 2014)
- absence of literature on the effectiveness of this education in preparing the new graduates to provide culturally appropriate care for a diverse patient population once in practice.

When health care providers do not engage patients in culturally competent interactions, patients with cultural or language barriers are less satisfied with their care, receive substandard care and perceive being treated with disrespect (Gurman & Becker, 2007; Harari, Davis & Heisler, 2008; and Keller, Silberberg, Hartmann & Michener, 2010). When the nursing workforce mirrors the population it serves in terms of social determinants, significant improvements in health outcomes, quality of care as well as reductions in cost occur. Phillips & Malone, 2010).

Theoretical Framework



The Process of Cultural Competence in the Delivery of Healthcare Services[®] (Campinha-Bacote, 2010c)

Timeline

July	Grant Awarded/Start Up
August	Literature reviewed Identify Measurement Tools
September	Finalized Tools
October	Interview Questions Finalized Informed Consent/IRB Submission Prepared
November	Finalize Dates for Interviews
December	Complete Student Focus Groups Begin Faculty Interviews
January	Interview Hospital Educators Submit NSP II Continuation Grant Proposal
February	Complete Faculty Interviews
March	Interview Practicing Nurses
April	Complete Student Focus Groups Analyze Findings
May June	Present Findings/Recommendations Submit Conference Abstracts



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