

## **Dedicated Educational Units as an Intervention to Decrease the Nursing Shortage**

### **Overview**

Staffing is a pervasive and pressing challenge in the current health care environment. Hospitals need to be adequately staffed with proficient nursing professionals capable of meeting the patient population's increasingly complex acuity. This shortage of competent skilled nursing professionals is a critical challenge for health care systems to provide quality care. Dedicated Educational Units (DEUs) are a valuable strategy to augment educational practices and improve overall patient care delivery, thus increasing nurse retention and decreasing the nursing shortage.

### **Dedicated Educational Units**

The DEU model is a partnership between academia and clinical practice. This model was introduced in 1997 as a solution to the challenges in clinical nursing education (Bonner & Harding, 2020). The DEU model is based on five characteristics and four processes. The characteristics include effective academic-practice partnership, adaptability to diverse contexts, unit culture of educational excellence, responsive and supportive unit leadership, and clarity of roles and responsibilities. The processes involve building nurse and faculty capacity, facilitating student learning, communicating regularly at systems and unit levels, and evaluating and sustaining the model (Marcellus, et al., 2021).

The DEU represents a clinical education model designed to offer tailored learning experiences and enrich the learning aptitude of student nurses (Williams et al., 2021). Through the DEU, students are afforded increased chances to refine their skills, engage in diverse learning

scenarios, reinforce their understanding, and cultivate a robust professional nursing identity. The basic tenets of the DEU model are peer teaching and collaboration between educators and clinical service providers to enhance student learning and improve clinical experiences. The goals of the DEU model are to: enhance collaboration between nursing academia and professional practice, encourage students to apply theory to practice using professional nursing staff as clinical preceptors, increase learning opportunities by immersing students in the nursing role, and expose staff nurses to the educator role to help address the faculty shortage (Hunt, et al., 2015). This collaborative model gives the student nurse a chance to engage in interprofessional interactions which support improved patient outcomes through care consistency.

### **Current Environment**

The current challenge facing nursing professionals is the diverse thoughts and perceptions of the definition, benefits, and use of dedicated educational units within the health care system and in academia. There is a lack of awareness of the benefits of implementing the DEU Model as a strategic approach to the nursing shortage. This knowledge gap prevents the adoption of DEUs as a viable strategy to improve the educational experience for the student, the health outcomes for the patients, and the financial viability of the health care system. Exploration of this strategy will help bring a focus on the need for “research, advocacy, and dissemination of information to bridge the existing knowledge deficit and promote the integration of DEUs into the broader discourse on alleviating the nursing shortage” (Williams, et al., 2021).

In the DEU model, academic institutions and health care organizations collaborate as partners with the goal of providing nursing students with a clinical experience that most closely

relates to professional practice. Implementing the DEU model requires advanced planning. The roles and responsibilities of the faculty, nursing students, clinical staff, and the nurse manager must be clearly identified. The benefits of peer teaching and the collaborative relationship between nurse educators and clinical staff (preceptors) help to enhance the overall quality of the student clinical learning experiences. An additional benefit of a DEU for students is an opportunity to develop an ongoing, trusting working relationship with the preceptor. The preceptor/student relationship can also facilitate concepts of caring and help promote resilience within the working environment. The faculty member, having a consistent presence on the DEU, can serve as a professional role model, collaborator, consultant, and resource to both students and staff.

Several nursing education programs in New York follow the traditional model of a DEU in which one to two students are assigned to the same nurse preceptor on the designated unit over multiple semesters. The same nurse faculty member is also present on the unit to collaborate, coordinate, facilitate, and evaluate the educational experience for the students ensuring that the expected learning outcomes are achieved. This collaborative relationship benefits both the staff, the students, and the nursing faculty providing a consistent, effective, collaborative work relationship.

## **Arguments for Implementing the DEU Model**

### **Financial Benefits**

When the financial benefits are considered for implementing a dedicated educational unit the return on the investment is not immediate. Long-term, indirect benefits of the DEU are the recruitment of new nurses who had a positive clinical experience as a student, retention of clinical staff who had an enriching experience as a preceptor, improved patient care, and improved quality indicators leading to higher reimbursement rates for the health care facility.

### **Quality Indicators**

Faculty embedded in a DEU can impact the quality of care on a clinical unit. They are positioned to deeply understand and appreciate the needs of the unit and the patient population. Student awareness of the importance of the nurse's role in quality improvement can be facilitated by the faculty.

### **Academic Institution**

Implementation of a DEU can positively impact a nursing program. DEU arrangements provide the school with a dedicated unit for clinical placements in a time where clinical locations are difficult to secure. The DEU provides an environment where the faculty member is familiar and has met all mandatory skills training requirements.

### **Registered Nurse**

Academic-practice partnerships have a positive impact on the clinic staff on the DEU. The professional practice environment is enhanced by the consistently high clinical expectations of student clinical practice as well as the professional development and potential clinical advancement of the RNs who act as preceptors.

## **Nursing Student**

There are many potential benefits to the nursing student when using this educational clinical model. One benefit includes consistency of faculty and nursing staff. When using a dedicated educational unit, the student can develop a trusting working relationship with the faculty and nursing staff. This helps with professional development and a sense of comfort in the learning environment. Another benefit is that the student becomes familiar with the policies and procedures for the specific unit and the student can work toward meeting specific measurable goals on the unit.

### **Recommendations**

It is recommended that health care facilities and academia strengthen and enhance their collaborative relationships to implement dedicated educational units as a strategic intervention to address the nursing shortage, improve quality of care, and decrease the overall cost of care to hospitals. It is recommended that both academia and health care institutions embrace, engage, and resource respective partners in moving dedicated educational units forward.

Health care professionals and institutions can support the establishment of DEUs including creating and implementing formalized mentoring programs. This would include using experienced nurse volunteers passionate about cultivating relationships with newer nurses. This relationship would begin as a student/preceptor relationship and then potentially change to a new nurse/mentor relationship. The longevity of the student/preceptor and nursing staff/faculty relationships create the opportunity for building trust. Preceptors have an opportunity to work with students in a unique way to model professional behavior, fostering quality working experiences with the overall goal of building retention on the designated unit.

Academic institutions and nursing educators can seek out and foster collaborative partnerships with health care organizations. A sustained, positive collaboration focused on the benefits for both health care and academics will ensure all goals are achieved when using designated education units. The shared understanding of the curriculum, student learning outcomes, and patient quality indicators will allow for all participants to work toward the common goals of improved patient care outcomes and retention of proficient nurses. Achieving these goals will positively impact the financial resources of the health care organization.

Dissemination of data from the implementation and assessment of the DEU Model is critical as other systems explore innovative strategies to address shortages of health care professionals. Evaluating the effectiveness of a DEU is essential for future decision making by both the academic and service institutions. Outcomes for service providers can include: the increased number of RN (Registered Nurse) preceptors on a unit, the number of RNs who have engaged in preceptor training, the number of RNs who have used student preceptors as evidence in their clinical promotion, staff satisfaction, improvement of care quality indicators, and number of students who have chosen to work on the DEU after graduation. Academic institutions could consider collecting evidence such as: number of students recruited to a DEU for employment, increase in collaboration by faculty on clinical units, the increase in skill development of students, student satisfaction with clinical experiences, number of embedded faculty on DEUs, and faculty satisfaction with clinical staff relationships.

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