Comments for NDASH
Wright State University-Miami Valley College of Nursing & Health, March 5, 2014, Ohio Statehouse

Good morning. My name is Devon Berry. I am the Executive Director for Operations and Strategic Initiatives at Wright State University’s College of Nursing and Health. On behalf of the College I’d like to share with you today a brief description of a new initiative we’ve undertaken that we believe is important to both higher education and nursing in Ohio.

Even if you are only an infrequent consumer of news and media, you will have been confronted with the steady stream of headlines, news stories, testimonies, talks, speeches, blogs, and documentaries decrying the brokenness of higher education. Whether it is the high cost of a college degree, the analysis of return on investment, the readiness of graduates for the workforce, or the impenetrable resistance to change fostered by academia, higher education has been roundly criticized by virtually all of its stakeholders. In many cases, perhaps even most, the critiques have at least some justification. The calls for reform in Ohio have come from the governor, lawmakers, and public and private watchdogs as the empirical reality of the success of higher education in Ohio tends to rank toward the bottom.

Nursing education is not immune to or free from the claims that have been laid at the feet of colleges and universities. We have seen recent reports and books from some of our best minds and best institutions calling for “radical transformation” in nursing education. Those calls are clear and compelling affirmations that all is not well in nursing education.

At our College of Nursing we are deeply convinced that our approach to educating nurses needs to be overhauled. We are not talking about new wall paper, drapery and accent pillows but rather a full-scale renovation – floors, ceilings, walls, right down to the studs. In fact, when we say “renovation” we really mean “revitalization” – to make healthy again. To this end, we have thought together, faculty, staff, and administration, long and hard over the past 18 months seeking to identify, at the principle level, what it is nursing education should be shaped by in the future. Our deliberations have resulted in a major multi-year initiative we are calling the Wright Nurse Project.

In brief, the Wright Nurse Project is a strategic effort to fully reform our approach to nursing education at the undergraduate level in accord with three guiding principles:

First, evidence-driven pedagogy. We are all familiar with evidence-based practice, evidence-based nursing, evidence-based medicine, etc. As it turns out, there is a parallel universe in education where we actually have quite a bit of evidence about what works best for achieving learning outcomes. If you know anything about K-12 education, you will know that they have become avid consumers of this evidence and it is transforming classrooms all over the country. We in higher ed, for all of our training, have been much slower to reckon with what the evidence says about how we are presently doing things and how we ought to be doing things. There are
pockets of excellence no doubt, but by and large, we continue with pedagogies that the evidence clearly states are suboptimal. In the Wright Nurse Project, we are committing to rebuilding course and curriculum according to best practice – wherever that may take us.

Second, community-informed and supported outcomes. Even in nursing education, where we maintain such a close relationship with our practice settings, we can be subject to becoming out of touch. In many cases, those on the front lines of nursing care don’t sit on our curriculum committees, in our classrooms, or even our boardrooms. As complaints from employers about the product coming off the assembly line pile up, we must consider whether or not the nurse we are building is the nurse the workplace is demanding. In the Wright Nurse Project, we are committing to systematically hardwire the voice of the workplace into our most closely guarded academic activities. We are planning to give that voice the formalized power of influence. In exchange, we will be asking our community partners for much more in terms of commitment to providing the real-world supports that will be necessary to create this “ready-for-work” product.

And third, competency-based evaluation. We’ve talked for much more than a decade about the need to embrace a competency-based approach to evaluation. To date, most students are still assessed and progressed based on paper and pencil traditional-style testing in preparation for the ever-looming NCLEX. Yes, we do clinical evaluation – but we likely kid ourselves if we believe that the rigor and reliability of our usual methods stand up to any level of serious scrutiny. In the Wright Nurse Project we will make our primary means of assessing and progressing students competency-based. Will we stop preparing our students for a high-stakes test necessary for licensure? Certainly not, but we will no longer make that our primary indicator of student achievement. As we like to say, “How do you know when a nurse is a nurse? A nurse is a nurse when a nurse can nurse... not when she can pass a test.”

We believe that if we will courageously and rigorously apply these three principles, commit to strive against convention when called for, and persevere in the task amidst the demands of the academic life, that we will be among the pioneers who help to usher in nursing education 2.0. We urge lawmakers in Ohio to continue to work creatively to foster the educational innovation that is badly needed in this State. Please continue responsible reform in Ohio – create intelligent and informed incentives and drivers that move us toward excellence. We at Wright State want to partner with you in those efforts by showing a path forward.

You can find more information at our website, nursing.wright.edu. We’d love to make this journey with the benefit of your wisdom, please feel free to contact us at any time. We look forward to updating you as this initiative gains momentum.

Thank you.