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ABSTRACT

In an effort to prepare more baccalaureate level nurses for the rural areas of central Wisconsin and to accommodate the educational needs of geographically bound nontraditional students, a basic baccalaureate nursing program was established at an off-campus site. This University of Wisconsin-Eau Claire program is offered in cooperation with two two-year campuses, a four-year institution, and a hospital. The program incorporates aspects of three traditional outreach program models documented in the literature, the satellite, cooperative and interinstitutional models. The program includes the following components: (1) a curriculum that is equal in quality to the on-campus curriculum; (2) faculty hired for the off-campus site after completion of a year-long on-campus orientation; (3) on-campus faculty who travel to the off-campus site for instruction; (4) use of audiographic telecommunications teaching strategies; (5) off-campus faculty who travel to the main campus for participation in university governance; (6) recruitment and advising of students by all participating educational institutions; (7) partial funding support for the program by the hospital; (8) provision of non-nursing courses by the four-year and two-year campuses; (9) availability of instructional facilities at the cooperating institutions; (10) sharing of financial aid administration; and (11) provision of student scholarship support through the hospital. The program demonstrates unprecedented cooperation between four separate educational institutions and a private nonprofit health care agency. Contains 5 references. (KM)

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Establishment of an Off-Campus Baccalaureate Nursing Program

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AASCU/ERIC Model Programs Inventory Project

The AASCU/ERIC Model Programs Inventory is a two-year project seeking to establish and test a model system for collecting and disseminating information on model programs at AASCU-member institutions--375 of the public four-year colleges and universities in the United States.

The four objectives of the project are:

- o To increase the information on model programs available to all institutions through the ERIC system
- o To encourage the use of the ERIC system by AASCU institutions
- o To improve AASCU's ability to know about, and share information on, activities at member institutions, and
- o To test a model for collaboration with ERIC that other national organizations might adopt.

The AASCU/ERIC Model Programs Inventory Project is funded with a grant from the Fund for the Improvement of Postsecondary Education to the American Association of State Colleges and Universities, in collaboration with the ERIC Clearinghouse on Higher Education at The George Washington University.

ABSTRACT

The University of Wisconsin-Eau Claire School of Nursing embarked in 1986 on one of its most challenging innovations to date. In an effort to prepare more baccalaureate - prepared nurses for the rural areas of central Wisconsin, and to accommodate the educational needs of geographically bound non traditional traditional students, we established a basic baccalaureate nursing program at an off-campus site located 85 miles from the main campus. The program is offered in cooperation with two two-year campuses, another four-year institution, and a hospital that previously administered a three-year diploma school of nursing.

The model that guided the development of the program incorporated aspects of three traditional outreach program models previously documented in the literature. These include the satellite model, the cooperative model, and the interinstitutional model. The design of this "multi-model" outreach nursing program included the following components: a separate-but-equal-in-quality curriculum offered at the off-campus site, faculty hired for the off-campus site after completion of a yearlong on-campus orientation, on-campus faculty travel to the off-campus site for instructional purposes, use of audiographic telecommunications teaching strategies, off-campus faculty travel to the main campus for participation in university governance, and recruitment and advising of students by all participating educational institutions, partial funding support for the program by the hospital, provision of non-nursing courses by the four-year and two-year campuses, availability of instructional facilities at the cooperating institutions, sharing of financial aid administration, and provision of student scholarship support through the hospital.

The program demonstrates unprecedented cooperation between four separate educational institutions and a private nonprofit health care agency. Its establishment facilitated the closing of a diploma school of nursing without disrupting the supply of registered nurses to a rural area and, serendipitously, the initiation of the program offset unanticipated declines in on-campus enrollments.

Dr. Mary Duffy (1987) noted recently that outreach educational programs generally take several forms that can be classified according to one of three models: 1) the satellite or extended campus model, 2) the cooperative model, or 3) the interinstitutional model. The satellite model is defined by Duffy as either one in which faculty from the main campus are reassigned at a remote location or qualified faculty are hired to operate a separate-but-equal-in-quality program of study at an off-campus location. Conversely, in the cooperative model, the main campus provides a qualified traveling faculty who, in collaboration with qualified off-campus clinical preceptors, other regional schools of nursing, universities and health care agencies, deliver high quality education. And in the interinstitutional model, two or more programs join resources and collaborate in the delivery of education or agree to territorial divisions that allow students ease of movement in enrolling in course work at any of the institutions involved.

The off-campus program described in this paper incorporates aspects of all three outreach program models. The details of this "multi-model" approach will be specifically described later in the paper in conjunction with an overview of the development and implementation of the program, which is now known as the University of Wisconsin-Eau Claire School of Nursing's off-campus generic baccalaureate program. The program is being offered in cooperation with St. Joseph's Hospital in Marshfield, Wisconsin, which is located approximately 85 miles east of the main campus in Eau Claire.

HIGHER EDUCATION IN WISCONSIN

To understand the rationale underlying the development and implementation of the program, some orientation to the Wisconsin system of higher education is indicated.

The University of Wisconsin System as a whole is under the leadership and direction of the Board of Regents, the system president and other officers of System Administration. It is comprised of thirteen autonomous universities, each headed by its own chancellor; thirteen University Centers, or two-year campuses, administered by an executive dean; and a statewide University of Wisconsin Extension, also under the direction of its own chancellor.

Among the thirteen universities, all of which offer baccalaureate and master's degrees, there are two institutions that grant doctorates, and they are known as the "doctoral cluster" (Madison and Milwaukee). The other eleven institutions, comprising the "university cluster," include Eau Claire, Green Bay, LaCrosse, Oshkosh, Parkside, Platteville, River Falls, Stevens Point, Stout, Superior and Whitewater. The site of UW-Eau Claire's off-campus nursing program--Marshfield, Wisconsin--is approximately thirty miles from UW-Stevens Point, one of the cluster universities, and is also near two university centers, one in Marshfield itself and one in Marathon, which is also about thirty miles from Marshfield.

EVOLUTION OF THE PROGRAM

A number of events led to the establishment of this unique off-campus program.

In late 1983, a task force at St. Joseph's Hospital Diploma School of Nursing in Marshfield concluded that while a need for a nursing program still existed in central Wisconsin, the area and the hospital would best be served by the establishment of a baccalaureate program. The task force recommended, therefore, that the feasibility of various baccalaureate nursing education models or options be explored.

The first option explored was the establishment of a single-purpose baccalaureate nursing program utilizing St. Joseph's Hospital, with non-nursing courses being taken at UW Center campuses and/or UW-Stevens Point. Following two years of extensive study and consultation, the task force concluded that this option was neither feasible nor advisable, since hospitals are not designed primarily as educational institutions and there likely would be myriad problems associated with establishing and maintaining academic credibility. It seemed more reasonable that a model linking both the educational and health resources of the Marshfield area with an already established baccalaureate program would be preferred and should be explored.

St. Joseph's Hospital is geographically located in what is considered the UW-Stevens Point service area, and therefore it was the logical institution with which to initiate discussions. UW-Stevens Point does not have an entitlement to plan nor the authority to offer nursing programs, however, so the vice chancellor of academic affairs there contacted UW-Eau Claire on behalf of St. Joseph's Hospital to determine if the School of Nursing would be interested in discussing the feasibility of a cooperative baccalaureate nursing program. Finally, at a meeting held at UW-Stevens Point in February of 1986, mechanisms were explored through which UW-Eau Claire, St. Joseph's Hospital, UW-Stevens Point and the Marathon and Marshfield Center campuses might cooperate in offering a baccalaureate nursing program in Marshfield.

NEED FOR THE PROGRAM AS DOCUMENTED IN THE NURSING LITERATURE

Concurrent with the preliminary planning and development meetings, a review of the nursing literature was undertaken to assess the need for and advisability of establishing an off-campus baccalaureate nursing program. Some of the major findings of this review are reported here.

The Final Report of the Wisconsin Statewide Study of Nursing and Nursing Education, completed in 1979, recommended that educational preparation for entry level nurses incorporate the strengths of the four current programs (PN, ADN, Diploma, BSN) into two new programs (ADN and BSN).

The report emphasized, however, that the crucial aspect of this recommendation was that the proposed changes in nursing education must take place without decreasing the number of graduates and cited the shortage and maldistribution of nurses throughout the state.

The study further recommended that hospital diploma programs should contemplate moving toward one of the five following options:

1. Development of a new ADN program.
2. Development of a new BSN program.
3. Merger with an existing ADN program.
4. Merger with an existing BSN program.
5. Discontinuation.

This last option was the least preferred, given the previously reported concern over maintaining adequate distribution and supply of registered nurses.

The study also concluded that some new generic BSN programs and/or satellites of existing BSN programs should be developed by colleges and universities to compensate for the loss of diploma graduates.

Although there was an apparent oversupply of registered nurses in the early 1980's, the 1986 literature began to reflect a reversal, and concern was being expressed about possible shortages of registered nurses.

For example, Nancy Higerson, RN, Vice President of Abbott-Northwestern Hospital in Minneapolis and then-President-elect of the American Organization of Nursing Executives, was quoted in a hospital journal as saying, "I'm beginning to hear talk again about shortages. The pool of registered nurses is diminishing. I'm afraid that we will be in a crisis again within two years" (Gallivan, 1986, p. 152).

Connie Curran, PhD, American Hospital Association Vice President of Nursing, expressed similar concern regarding an imminent nurse shortage. She said, "New York and Michigan, which are historically bellwether states, report more vigorous recruiting for RN's by hospitals" (Gallivan, p. 152).

And the head of the Chicago office of Medical Recruiters of America, Inc., reported the Midwest felt a growing shortage of registered nurses beginning in the fall of 1985, even though in the three previous years hospitals had waiting lists of nurses seeking positions (Gallivan, p. 152).

Also, Geraldene Felton, PhD, RN, Dean of the College of Nursing, University of Iowa, wrote in April 1986, ". . . projections show that we are producing too many technical nurses. [Margretta] Styles predicts that by the year 2000 we will have . . . 0.55 baccalaureate graduates for each position needed at that level of preparation She recommends . . . enrollments in generic baccalaureate and BSN completion programs be increased" (Felton, p. 212).

The need to provide an adequate, well distributed supply of registered nurses was also reinforced in the report of the first invitational conference of the National Commission on Nursing Implementation Project (1986). This report stated:

Diploma programs in nursing will open no new programs after 1988. Present programs will determine the best use of their resources. It is recognized that these programs have a proud history of preparing nurses for their communities. The strengths of these programs should be considered when determining the best mode of change. For some, transition to an associate degree or baccalaureate program in cooperation with a junior or senior college may be feasible. For others, use of the clinical resources and faculty by associate or baccalaureate degree programs may be an option. Critical to this or any change in the nursing education programs of this country is the assurance that nurses, particularly professional nurses, will be prepared in sufficient numbers to meet the nation's needs. (p. 20)

The review of the literature supported the idea that establishing an off-campus baccalaureate nursing program in cooperation with a hospital that formerly supported a diploma school of nursing would be consistent with the nursing needs of the state and nation. The proposed model also seemed to be congruent with the recommendations of state and national task forces that had studied and are currently studying issues surrounding nursing education.

NEED FOR THE PROGRAM AS DOCUMENTED BY A FEASIBILITY STUDY

While it was generally accepted that future statewide implementation of two levels of nursing practice would increase the need for baccalaureate-prepared nurses in the state and that the closing of St. Joseph's Hospital's diploma program would create a significant void in the supply of registered nurses to central Wisconsin, it was decided that a formal study should be conducted to assess the magnitude of the projected problem.

The study utilized two approaches: First, counselors in high schools located within a fifty-mile radius of Marshfield were asked to provide data to assist with the assessment of the need for a baccalaureate nursing program in the Marshfield area; and secondly, directors of nursing of acute care and long-term health care facilities were surveyed to assess the projected need for baccalaureate-prepared nurses in their practice settings within the next five years.

The data from this study clearly demonstrated that a baccalaureate program located in Marshfield would assist in meeting the projected need for baccalaureate-prepared nurses in central Wisconsin and would also provide access to baccalaureate nursing education that would otherwise be unavailable to potential area students who are not mobile due to personal life circumstances.

PARAMETERS FOR PROGRAM IMPLEMENTATION

Having determined the need existed and interinstitutional cooperation was possible, guidelines for program development and implementation were agreed to in contract form by both the University and St. Joseph's Hospital. These guidelines addressed the administrative, curricular, resource allocation, faculty and evaluation aspects of the program. The guidelines were designed to ensure the off-campus program would be of comparable quality to the on-campus program and would also be consistent with National League for Nursing criteria for accreditation. The essence of the agreed-upon guidelines are summarized as follows:

1. The educational philosophy, organizing framework and curriculum of the off-campus program would be the same as that offered at the University. Selected theory-only courses and the theoretical portion of courses that include both theory and clinical laboratory experiences might be taught using nontraditional teaching strategies, such as Educational Interactive Video Television Network and other telecommunications systems.
2. Each instructional staff member at the Marshfield site would hold a University faculty or academic staff (nontenure track) appointment, as jointly agreed to by the individual instructional staff member and the University. Each instructional staff member would be required to meet the same appointment, reappointment, promotion and tenure criteria as main campus University faculty and academic staff in the School of Nursing. Marshfield faculty or academic staff would also have the same rights and responsibilities, including governance rights, as on-campus University Nursing faculty or academic staff.
3. Beginning in the fall of 1986, prenursing students who had expressed an interest in enrolling in the program at Marshfield would be identified and provided academic advisement. These students would be considered for admission to the School of Nursing during the 1987 academic year.

4. A student who wished to be admitted to the program would, as a preprofessional student, normally take his/her preprofessional course work required for admission to the nursing program and other required non-nursing course work either at the University of Wisconsin-Stevens Point, University of Wisconsin Centers or University of Wisconsin-Eau Claire.
5. All University of Wisconsin-Eau Claire and School of Nursing policies for faculty, academic staff and students would be equally applicable to faculty, academic staff and students in the program at Marshfield.
6. All students enrolled in the program at Marshfield would be required to enroll as full time resident students at the University for one summer session following successful completion of prerequisite non-nursing and nursing courses. These students would be required to successfully complete N225 Practice Dimensions of Nursing during that summer session.
7. The program would be administered by a Program Coordinator who would be located at Marshfield and who would report directly to the Dean of the University School of Nursing.
8. Evaluation of the program would be conducted according to the University School of Nursing program evaluation plan.
9. The baccalaureate degree would be awarded by the University.
10. The program would be continued for so long as at least thirty (30) students per year were admitted to the first-year class of the program.
11. Responsibility for administration of the program would rest exclusively with the University.
12. The University would fund all aspects of the program, except those specified as the financial obligation of St. Joseph's Hospital.
13. The Hospital would provide, at no cost to the University, fully equipped and adequate classroom, laboratory, office, faculty and student lounge and other support services space at the Hospital. No charge would be made to the University for space, maintenance, telephone services, utilities, housekeeping or other expenses associated with occupancy and use of this space.
14. The Hospital would provide, at no cost to the University, library services, including library space, materials and staff at the Hospital. The hours of operation of the library services would be adequate to meet the needs of the University and would be determined by mutual agreement between the University and the Hospital. Library holdings would be appropriate to support baccalaureate nursing education, as determined by the University, and would be reviewed annually by appropriate University faculty.
15. The Hospital would provide annual grant support to the University to fund the salary and fringe benefits for two and one-half personnel positions, including one position for the Program Coordinator, one position for clerical support and one-half position for a media specialist, according to an implementation schedule determined by the University.

16. The Hospital would purchase two personal computers for students and faculty in the program at Marshfield, and would purchase telecommunications equipment, as determined by the University, for use at the University. The total cost of this equipment would not exceed \$42,000.

Following endorsement of the agreement by the University of Wisconsin Board of Regents and the St. Joseph's Hospital Board of Trustees in July 1986, the contract was formally signed by the University of Wisconsin-Eau Claire chancellor and the president of St. Joseph's Hospital.

MULTI-MODEL PROGRAM DESIGN

Figure 1 depicts the multi-model approach that resulted from the agreed-upon parameters for program development and implementation. As the figure shows, components of the satellite model, as defined by Duffy, include a separate-but-equal-in-quality curriculum offered at the off-campus site, faculty hired for the off-campus site, and identical on-campus and off-campus faculty and student policies. Faculty hired specifically to teach in the off-campus program are required to complete a yearlong, systematically planned orientation at the School of Nursing on the main campus before teaching at the off-campus location.

Cooperative model components involve on-campus faculty who travel to the off campus site to provide theory-only nursing courses, use of telecommunications systems, on-campus and off-campus faculty collaboration, off-campus faculty travel to the main campus for participation in university governance, and recruitment and advising of students by all participating educational institutions under the direction of the on-campus School of Nursing associate dean for student affairs.

Lastly, the interinstitutional components depicted in the model include partial funding support for the program from St. Joseph's Hospital, provision of non-nursing courses by UW-Stevens Point (four-year campus) and the UW Centers (two-year campuses), availability of instructional facilities at the cooperating institutions, the offering of one clinical nursing course at the main campus, the sharing of financial aid administration by all participating educational institutions, provision of student scholarship support through St. Joseph's Hospital, and, finally, the facilitation of faculty research through the Marshfield Foundation.

PROGRAM BENEFITS

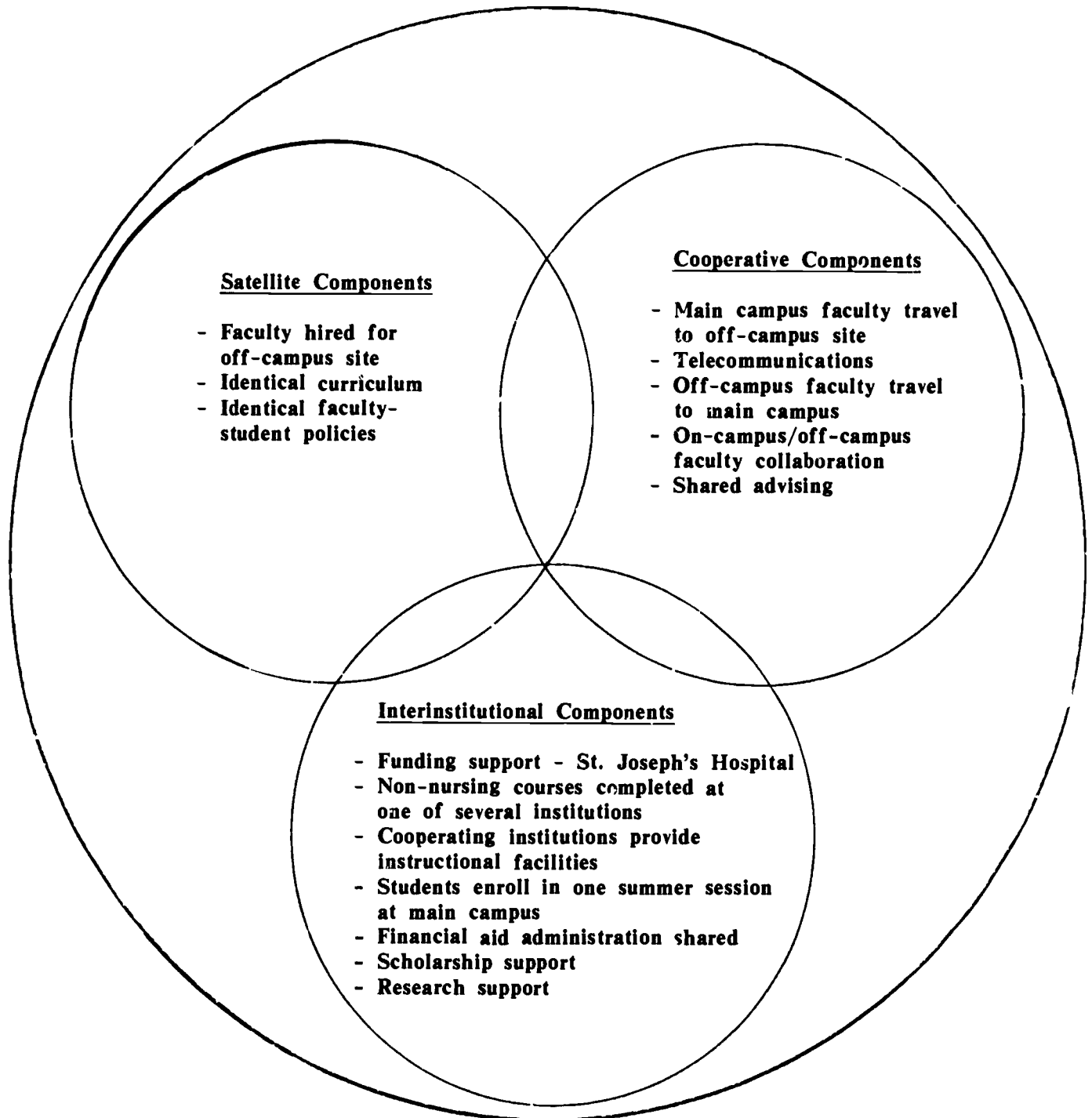
Several benefits of the UW-Eau Claire off-campus nursing program have been identified. The ultimate goal of the program is, of course, to contribute to improved quality of nursing care in health care agencies in and around Marshfield, Wisconsin.

The most obvious and important benefit of the off-campus program is that it will increase the number of baccalaureate-prepared nurses available to the central region of Wisconsin. This seems a likely result for several reasons, one being that a high percentage (91%) of Wisconsin college students attend institutions in their home state (*Chronicle of Higher Education*, January 14, 1987), and most of the potential students for this program live in the central region of the state.

That most students recruited for this program will, upon graduation, remain in the region--and likely at St. Joseph's Hospital--to provide professional nursing care is even more likely given the projected need for baccalaureate-prepared nurses and the fact that many of the

FIGURE 1

**ESTABLISHMENT OF AN OFF-CAMPUS NURSING PROGRAM
USING A MULTI-MODEL APPROACH**



students who already have been admitted to the program are nontraditional students whose families and homes are in the region.

Another benefit of the program is one that will be enjoyed by students. The centralized location of the off-campus site allows many students to live at home, thus reducing room and board expenses. It is believed this will also benefit the profession, as it will attract students who otherwise might not be able to afford a baccalaureate education.

It is not an insignificant benefit that this project demonstrates a positive venture and cooperative endeavor between the public and private sectors of American society. We hope this approach may provide a model to be emulated by others. It also provides, it seems, an attractive alternative for hospital diploma schools that might wish to close their programs and yet retain a significant role in nursing education.

In addition, offering a generic baccalaureate program in central Wisconsin provides another opportunity for additional education for licensed practical nurses whose continued employment in hospitals in west and north-central Wisconsin may be in jeopardy. The Marshfield location should be particularly attractive to these individuals, who, like other nontraditional students, frequently lack mobility because of family responsibilities.

Finally, this program is especially needed at this time when the Wisconsin Nurses Association is working toward introducing legislation in support of two levels of nursing and legislators are questioning whether or not baccalaureate programs can educate an adequate supply of professional nurses.

In summary, implementation of this multi-model approach to an off-campus baccalaureate nursing program has required and will continue to require unprecedented cooperation, commitment and communication among the faculty and administration of several educational and health care institutions. To date, however, it is believed the potential benefits of the off-campus program far outweigh the real and opportunity costs of implementing this innovative outreach endeavor.

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