

Tools and Strategies for Conceptual Learning in Nursing Education

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After participating in the conference, I came back with a list of 12 steps for revising our program's approach to and documentation of our concept-based teaching approach. I believe that, if implemented, these will present a more clear set of expectations for students; a more cohesive, integrated, and focused educational path for our students to follow; and a strong supportive resource for both experienced and new faculty. I have already shared these with our Department Chair, Program Director, and Nursing Curriculum Committee, and have requested to make a presentation at an upcoming Nursing Program meeting to reach all of our UHMC Nursing faculty. I will also be sharing slides sets and other resources from the conference via our program Lulima site.

Another benefit of attendance is that I was reassured that although no studies have yet been done to provide evidence that concept-based teaching in Nursing is more effective than traditional content-based teaching, it is becoming a widely adopted approach and many prominent figures in Nursing Education are endorsing it. It was reiterated that it presents itself as a solution for the "content overload/saturation" that we are experiencing in our profession. Furthermore, in studies of schools that have transitioned to this approach, there was not a significant impact on NCLEX-RN pass scores (usually an initial few percentage point drop), which is a common fear of those resistant to changing to this teaching modality.

Listening to the presentations also validated that the Concept-Based Learning Activities (CBLAs) and the alternative clinical design approach I implemented for the NURS 220: Health and Illness I course (although no longer being followed) are in line with what is being recommended at national conferences.

I was able to ask a well-respected conference presenter how to approach the situation where some faculty members are not on board with making the agreed upon changes, and the response was that "One can't be a prophet in one's own land," so sometimes hiring a consultant can help. This is something I shared with our Department Chair and will encourage consideration of this approach if needed.

Overall, this was a very timely, informational, and inspirational conference. I will continue to act as a champion for Concept-Based Learning on our campus and within the Hawaii Statewide Nursing Consortium, now fueled with more concrete evidence and examples. I only wish that more of my colleagues had been able to attend, as well.