

CACN

California Association of Colleges of Nursing



POSITION STATEMENT

**IN SUPPORT OF AUTHENTIC ACADEMIC-PRACTICE PARTNERSHIPS AS
ESSENTIAL FOR PREPARING THE WELL-QUALIFIED NURSE**

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Position:

The California Association of Colleges of Nursing (CACN) is committed to establishing strong academic-practice partnerships that are designed to prepare a nursing workforce that promotes safe, high quality, accessible, evidence-based, patient-centered care and effectively works as part of an inter-professional team. In order to accomplish this goal, academe and practice must collaborate in identifying and implementing the best practice models for clinical nursing education.

CACN supports the mandate that clinical practice must be an essential component of the nursing education process and that practice partners work with their academic counter-parts such that clinical experiences are made available to students in accord with the student's level of preparation. Supervised clinical experience should be incorporated with the didactic component so that nurses are adequately prepared to manage the high acuity of patients, complex technology, and diverse settings in which care is provided (ACNL, 2010). This also aligns with Article 2729 of the California Nursing Practice Act (2015):

“Nursing services may be rendered by a student when these services are incidental

to the course of study of one of the following:

- (a) A student enrolled in a board-approved prelicensure program or school of nursing.
- (b) A nurse licensed in another state or country taking a board-approved continuing education course or a postlicensure course.”

Rationale:

There are substantive clinical and/or practice components across all levels of nursing education. In order to develop competence in the nursing role, there must be an opportunity to gain knowledge through reading, instruction, study, and simulation, but there must also be organized experiences in which students apply and use their emerging knowledge, attitudes, and skills in the actual patient care setting. The California Board of Registered Nursing requires that in a nursing curriculum, “Theory and clinical practice shall be concurrent...” A supervised clinical component of any nursing education program is integral to linking content to nursing practice

and this must go beyond mere observational activities. In order for a graduate to be able to perform safe and competent nursing care as a nurse, s/he must have the opportunity to practice it, with supervision, as a student.

Effective partnerships are expected to result in a better educated nurse, a graduate who is able to enter the workforce with a focus on quality and safety and beginning competence in the areas of decision making, quality improvement, systems thinking, and team leadership (IOM, 2010). In addition, if successfully implemented, partnerships will result in an increase in staff, patient, student, and faculty satisfaction; greater collaborative scholarly output; enhanced professional development; better continuity and coordination of care; more reliance on evidence-based practice; and enhanced interprofessional learning (ANCC, 2011).

In order to accomplish these goals the following must exist:

- Solid structures and processes must be in place to provide environments where strong professional practice flourishes and where the mission, vision and values of the health care facility and nursing program are able to complement one another.
- Mutually agreed upon processes for staff to work with faculty and students must be articulated.
- Faculty must be prepared for the clinical environment.
- Students should have access to the range of activities and resources that make up the clinical environment, including, but not limited to: EMR, Papyrus, opportunities for interprofessional interaction, participation in regulatory and accrediting work (Joint Commission & CMS visits), and unit meetings.
- Formal goals and expected outcomes for the partnerships need to be documented and metrics for evaluation must be in place.
- Staff should be involved in the evaluation process, both of student performance and the partnership processes.
- Students should be involved in developing and evaluating clinical experiences.
- Nursing program faculty should partner with health care organizations to develop and prioritize competencies so curricula can be updated to ensure that graduates are prepared to meet the current and future health needs of the population.

References:

ACNL (2010) Position Statement <http://acnl.org/displaycommon.cfm?an=1&subarticlenbr=95>, accessed September 28, 2011.

ANCC <http://www.nursecredentialing.org/Magnet/ProgramOverview/New---Magnet---Model.aspx>, accessed September 28, 2011.

California Nursing Practice Act with Regulations and Related Strategies (2015). Board of Registered Nursing, p.12.

Institute of Medicine. (2011). *The future of nursing: Leading change, advancing health*. Washington, DC: The National Academies Press. Available from: <http://www.nap.edu/catalog/12956.html>