



The Clinical Crisis

Obtaining Acute Care Clinical Experience for LPN Students



- 🎬 46 Ohio LPN schools were polled
- 🎬 29 replied
- 🎬 Various areas in Ohio were represented



Where in Ohio are you located, and are you having difficulty obtaining acute care clinical sites? If so, how long?



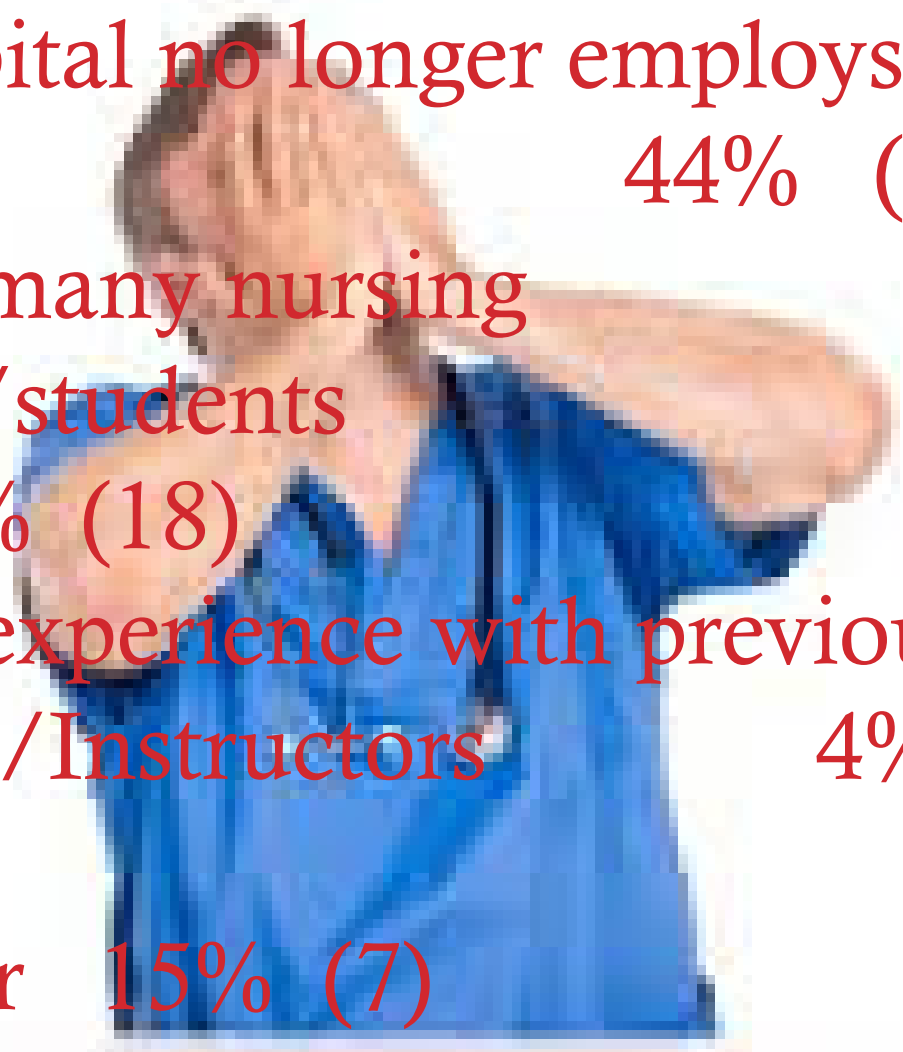
Location in Ohio	YES >2 years	YES 1-2 years	NO
Northeast (n=9, 30%)	3 (33%)	6 (67%)	0
Northwest (n=6, 20%)	1 (17%)	3 (50%)	2 (33%)
Central (n=7, 23%)	1 (14%)	2 (29%)	3 (43%)
Southeast (n=5, 17%)	4 (80%)	0	1 (20%)
Southwest(n= 3, 10%)	0	1 (33%)	2 (67%)

What does this mean



- ❉ North East Ohio 100% answered yes. 67% report this as a problem *within last two years*
- ❉ North West Ohio 50% report problem *within last two years*. One third no problem
- ❉ Central Ohio 43% report *no problem*. However, seems to be *starting*
- ❉ Southeast Ohio 80% report has been a problem over two years. *Long-standing problem*
- ❉ Southwest Ohio *has the least problem* 67% no problem. 33% within the last two years (just starting)

Most common reasons that facilities discontinued LPNs students?

1. Hospital no longer employs LPNs
44% (21)
 2. Too many nursing schools/students
37% (18)
 3. Bad experience with previous students/Instructors
4% (2)
 4. Other
15% (7)
- 

Comments



* Clinical preference is given to MSN then BSN then ADN then LPN programs in that order

*Hospitals magnet status, BSN in 10, 80% BSN in acute care by 2020 (4/7 persons stated this as reason)

* LPNs are in skilled care only in hospitals (transitional care, rehab)

What is the most detrimental effect of less clinical experience?

- 45% agree that decreased student experience is the biggest problem
- IV experience (is rated as slightly more important than OBN reg)
- Third: OBN regulations

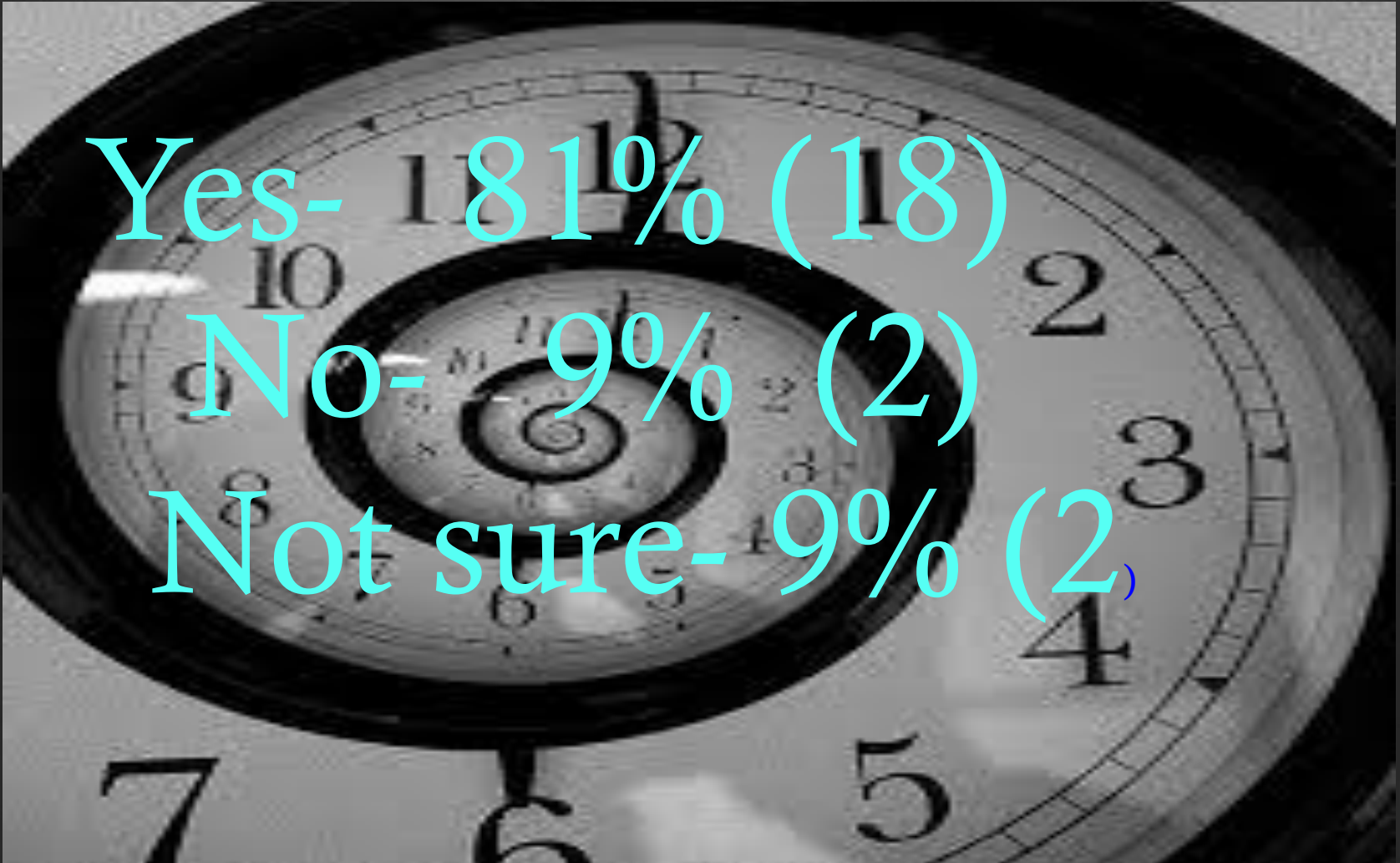


**Will this problem last for a
long period of time?**

Yes- 81% (18)

No- 9% (2)

Not sure- 9% (2)





Comments/Suggestions

- ⊗ OOPNE Should hire an attorney to address OBNs outdated rules for LPN requirements
- ⊗ NCLEX preparation should be aligned to address lack of acute-care if hospitals are not hiring LPNs
- ⊗ I wish OBN would reconsider OB/Pediatrics and IV requirements for LPN students
- ⊗ We often get bumped for the RN schools
- ⊗ The value of acute-care experience for the LPN is not looked favorably upon
- ⊗ There are too many nursing schools in our area. Perhaps OBN should limit number of nursing schools in specific areas.



More Comments/suggestions

- ⦿ A really good coordinator is helpful, as well as good instructors, reputation, and students who follow rules.
- ⦿ We have been able to get sites based on our reputation and high standards
- ⦿ No hospitals have 100% BSN's yet they state they don't hire ADN's.
- ⦿ If we had a shortage they would be hiring ADN's and LPN's and would be willing to educate them
- ⦿ 95% percent of our graduates continue on to be RN's
- ⦿ We have decreased our clinical hours

Additional Information



What the Hospitals say



- ⊗ Most Hire BSNs ONLY. Refer to Magnet/Pathways status
- ⊗ Patient care “team” consists of RN and STNA
- ⊗ Studies show better patient outcomes with higher *percentage* of RNs
- ⊗ Note: Many area hospitals are decreasing staff, eliminating “weekend programs”. All RN staff is more expensive

What the literature says



- ⊗ Improved patient satisfaction with a patient care team (need a skill MIX)
- ⊗ Improved employee satisfaction with a patient care team
- ⊗ Lecture, skills lab, and simulation alone are not sufficient
- ⊗ There is no substitute for hands on clinical experience
- ⊗ Without acute care experience students will not know how to recognize, monitor, and treat a deteriorating patient
- ⊗ Patient acuity is increasing

Possible Solutions?

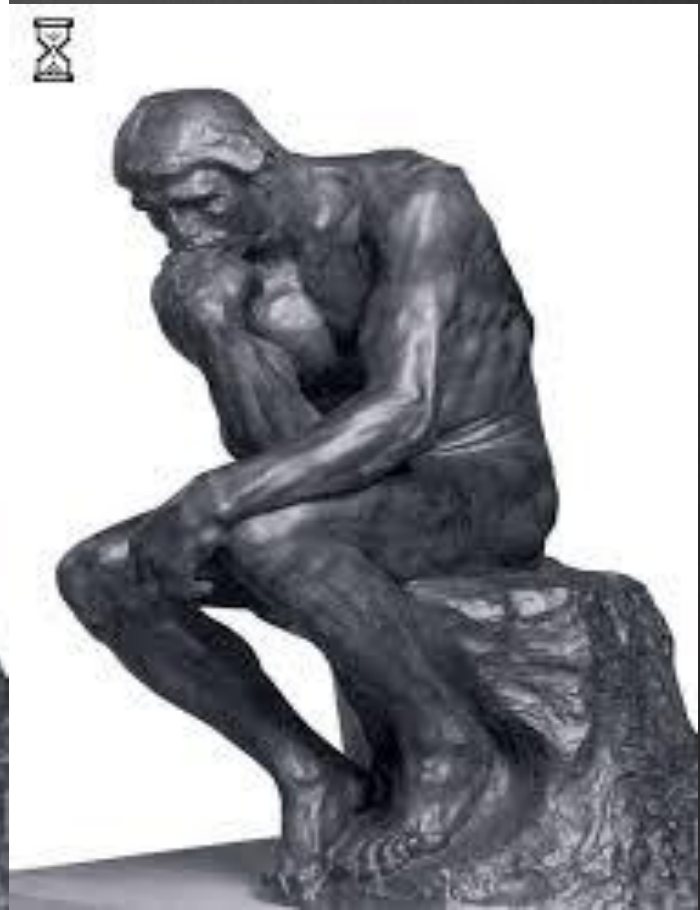


- ⊗ Make the most of “teachable moments”. Use actual patient experiences as case studies. Present in post conference. Have students present in post conference? Some acute experiences are few and far between, focus on them.
- ⊗ Healthcare is moving from inpatient to outpatient. Explore community health: outpatient clinics, surgery centers, home health, school health, camps, nurse practitioner practice. Health coaches?

Irony

- ⊗ The same IOM “Future of Nursing” report that calls for 80% BSN by 2020 also addresses the importance of *seamless academic progression* and the importance of nursing students *demonstrating clinical competence*.
 - ⊗ Most LPN students go on to become RNs (quicker pathway than traditional route due to “wait lists”)
 - ⊗ How can LPN students demonstrate clinical competence without the opportunity?
 - ⊗ Did the powers that be forget that LPNs are nurses?
 - ⊗ Hospitals focused on the “end” did not consider the “means”
- ⊗ A hospital nursing educator commented that new grad BSN students need a great deal of orientation (training) and have *little clinical knowledge*.
 - ⊗ Supports IOMs nurse residency recommendation but shouldn't we be teaching them clinical competence in nursing school?
 - ⊗ Regardless of degree, are nurses adequately prepared?
 - ⊗ Should the diploma (hospital) model of nurse education be considered or somehow incorporated?

What are YOUR Thoughts?



Please feel free to contact me
with questions or comments or
for a copy of this

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