Certified Nurse Educator

by

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A glimpse into the history of nursing and nursing education

• 1873 - first organized schools of professional nursing education in the United States
  • The New York Training School
  • The Connecticut Training School
  • The Boston Training School

• Professional Organizations
  • 1893 - American Society of Superintendents of Training Schools for Nurses
    • 1912 - name changed to National League for Nursing Education (NLNE)
  • 1896 - Nurses Associated Alumnae of the United States and Canada established to maintain a code of ethics and to elevate the standards of nursing education.
    • 1912 - name changed to the American Nurses Association
  • 1952 - National League for Nursing Education merged with the National Organization for Public Health Nursing and the Association of Nursing to form the National League for Nursing (NLN)
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history of nursing and nursing education continue

- 1913 - Standards to become a registered nurse
  - Diploma from an approved accredited school
  - Pass a standard examination (State Boards)

- New York State became the first state to use title RN (Registered Nurse)

- 2005

  - National League for Nursing (NLN) publishes Scope of Practice for Academic Nurse Educators (ANE) and identifies them as Advanced Practice Nurses (APN)

  - NLN initiates certification exam for ANE and designates Certified Nurse Educator (CNE) as credential
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Description

- Registered Nurses that possess both the clinical expertise and the passion for teaching
- Responsible for designing, implementing, evaluating, and revising academic and continuing education nursing programs
- Leaders who monitor and document the progress and outcome of educational programs
- Master’s or Doctoral prepared individuals who practice as faculty in universities, colleges, technical schools, or hospital-based nursing programs
- Role models for current and future nurse educators
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Core Competency

- National League for Nurses Core Competencies
- Competency I - Facilitate Learning
- Competency II - Facilitate Learning Development & Socialization
- Competency III - Use Assessment & Evaluation Strategies
- Competency IV - Participate in Curriculum Design & Evaluation of Program Outcomes
- Competency V - Function as a Change Agent & Leader
- Competency VI - Pursue Continuous Quality Improvements in the Nurse Educator Role
- Competency VII - Engage in Scholarship
- Competency VIII - Function Within the Educational Environment
Clinical exemplification

Prior to education the nurse practiced poor hand hygiene and set up when completing dressing change on a patient with a chronic pressure ulcer. Nurse educator provided nurse with altered skin integrity policy and dressing change procedure. During the education review the CNE provided visual demonstration and allowed the nurse to practice in a simulation lab. CNE completed a dressing change competency to ensure the nurse not only understood the policy and procedure, but also able to satisfactorily perform the techniques. After education and validation, nurse gathered all equipment needed, created a clean field, and completed dressing change with aseptic technique. Gloves were removed, hands were cleansed and new gloves were donned after removing the dirty dressing and prior to applying the clean dressing.
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Interaction with patient/family

• Provide evidence based education to patient and family to ensure they able to make an informed educated decision regarding their course of treatment

• Provide education on resources that will assist with maintaining a healthy lifestyle, positive health behaviors and disease prevention
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Interaction with physician

- Establish a positive professional relationship with physician and colleagues
- Assist physician in developing an individualized plan of care for each patient
- Develop a relationship with the physician that will result in a positive outcome for the patient
- Provide education as needed on latest evidence based practices that will benefit the patient
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Influences on current work system

• Lead by example by maintaining a positive attitude and outlook
• Provide education on the latest evidence based practices as needed
• Educate the staff on the importance of education and maintaining competency if their area of practice
• Advocate for policy and procedure changes that are culturally sensitive and will reduce environmental health risk
• Educate the leaders and management team on the different styles of leadership and how an ineffective leadership style can result in a negative outcome for the staff and entire organization
• Provide education on the tools required to maintain a successful professional relationship
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Measuring the effectiveness

• Positive improvement of patient outcome
• Improvement in therapeutic communication amongst staff and families
• Improvement in staff and physician collaboration
• Improvement in staff clinical competency
• Improvement in student’s knowledge
• Improvement in student’s test scores
• Improvement in student’s pass rate on certification exams
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References


