

Scholarship of Teaching and Learning Grant (2015-2016)

**Title: Title of Project: Experiences of Masters Entry to Nursing Practice Program Students  
In a Curriculum using a Community-based Service Learning Pedagogy  
Final Report**

Karen Larimer PhD, ACNP-BC, Jaclyn Houston-Kolnik, PhD, Alita Yoder BA, MS,  
Brittany Knipp, BS, Crystal Steltenpohl, MA, Kathleen Rylance, DNP

**Introduction:**

We believe that preparing nursing students for the future of healthcare requires an educational model that goes beyond lectures, textbooks, practica, and labs. It requires that students have a holistic view of health and, specifically, the social determinants of health. The University's Vincentian Mission and the future of healthcare education are consistent in the emphasis of service and learning. We believe the best way to enable this learning is through Community-based Service Learning (CbSL). Just as more and more universities are requiring their students to participate in service learning courses, in the not too distant future we anticipate that a majority of nursing schools will involve students in community engagement through CbSL and DePaul will be a leader in this work.

Community-based service learning is a pedagogy employed at DePaul University's School of Nursing Masters Entry to Nursing Practice Program curriculum. In this model, community-based organizations partner to link student learning with service to the community. In turn, intentional learning objectives and structured reflection align with these objectives and are used in this pedagogical model.

The purpose of this project was to examine if the difference in student scores on six dimensions of learning outcomes. A search of the literature revealed no instrument presumed to directly answer this question. Therefore, in order to do this an instrument was developed. We believed that by evaluating students in these dimensions it would allow us (and others) to understand what learning is occurring while using this pedagogy. We also believed that the results might become recommendations directed at improving CbSL as a pedagogical tool. We felt it was important to understand if CbSL is facilitating learning in the MENP Program.

**Objectives:**

In order to examine if there was a difference in student scores on six dimensions of learning outcomes a tool was developed and administered. Our plan included:

1. Develop a survey based on six dimensions of learning outcomes believed specific to graduate nurse education.
2. Analyze data to determine what learning objectives of the six dimensions were met.
3. Analyze data from the survey so that through exploratory and confirmatory factor analysis, a refined survey measuring learning outcomes would immerge.

## Activities of Grant

**Objective 1:** Develop a survey based on six dimensions of learning outcomes believed specific to graduate nurse education.

An instrument was developed with questions derived from the six dimensions of learning outcomes from the literature: 1) critical thinking, 2) cultural awareness/sensitivity, 3) professional communication and leadership skills, 4) exposure to diverse groups/fostering respect, 5) change agent, and 6) modeling professional conduct. Each dimension was represented by several questions assessing the knowledge and skills gained within each of the domains (See Attachment A).

**Objective 2:** Analyze data to determine what learning objectives of the six dimensions were met.

A quantitative approach was used with multiple points of data collection to examine if there was a difference in student scores on the six dimensions of learning outcomes. The sample consisted of students in the MENP Program at both the Lincoln Park Campus as well as the Rosalind Franklin Campus. Specifically, all students participating in the MENP Program at DePaul University, that were enrolled in Winter 2016 and Spring 2016 courses (see table 1). We estimated that 240 students would participate.

Table 1 Planned and Actual Surveys

	WINTER 2016	SPRING 2016	Projected Completed Surveys (pre + post)	Actual Completed Surveys (pre + post)
Cohort 1	NSG442		64	46
Cohort 2	NSG540	NSG442	128	47
Cohort 3	NSG400	NSG302	128	132
Cohort 4	NSG431	NSG400	112	131
Cohort 5		NSG431	48	38
Students	240	240	480	394

After receiving approval from the Institutional Review Board Review (see Attachment B), students completed paper surveys at the beginning and end of each quarter in courses where CbSL was incorporated. A pre-test/post-test technique where students are surveyed with the same instrument was used. ID numbers that preserved anonymity were used for tracking of changes in responses of the individual student as service-learning progressed. A staff person not involved in teaching or scoring the surveys was the only person who knew which student was associated with the particular ID number. The ID numbers were only used to link survey responses from pre-test to post-test.

Participation was as expected. However, there was at least one class that did not complete the post-survey. There was a total of 394 surveys completed (see table 1). A repeated-measures ANOVA found significant differences across four time points for critical thinking,  $F(3, 273) = 6.96, p < 0.001$ ) and change agency,  $F(3, 273) = 5.25, p = 0.002$ , though we found small effect sizes ( $\eta^2 = 0.071$  and  $\eta^2 = 0.055$ , respectively). No significant differences were found for the other four learning objectives, cultural awareness/sensitivity, professional communication and leadership skills, exposure to diverse groups/fostering respect, and modeling professional conduct.

With the exploratory factor analysis we were able to collaborate with Miranda Standberry-Wallace in the College of Digital Media to co-present our work in this area at the DePaul Faculty Teaching and Learning Conference (see Attachments C and D). We described some of the basic findings but also went deeper into the challenges of collecting this type of data. We began to explore a modular delivery system to course content and CbSL that would facilitate adoption by faculty. This was an unintended but beneficial outcome.

**Objective 3:** Analyze data from the survey so that through exploratory and confirmatory factor analysis, a refined survey measuring learning outcomes would immerge.

Data was utilized from two quarters to perform exploratory and confirmatory factor analyses. We randomly split the data set to complete each analysis separately. Exploratory factor analysis (EFA) was be used to evaluate the factor structure of the measure and to determine which items to include in each subscale, with the hope that our six dimensions would form six subscales. We then performed confirmatory factor analysis to examine the viability of the factor structure from the EFA.

Unfortunately, our results did not reflect these desires. The EFA resulted in a two-factor structure, planning and strategic thinking (20 questions) and cultural understanding (4 questions). Furthermore, the first factor had excellent reliability ( $\alpha = 0.915$ ), while the second factor's reliability was much lower ( $\alpha = 0.667$ ). The results of this factor analysis may help to explain in part why the analyses from Objective 2 were less than ideal.

## Conclusion

While these results are less than ideal, it highlights the importance of utilizing qualitative exploration in order to better understand a phenomenon before creating a quantitative measure. As such, we are currently planning a textual analysis of in-class assignments to explore what features of students' service learning experiences are most important to them, and where they say they have seen the most growth. From these analyses, we will create another quantitative survey that should be more grounded in what the students experience as they go through their service learning requirements.

## Dissemination of Results

- DePaul University Annual Faculty Teaching and Learning Conference, Spring 2016 (see Attachments C and D)
- Community Campus Partnerships in Health Conference, Spring 2016 (see Attachment E)

**Grant Spending:**

TOTAL requested amount: \$2,500

- Graduate Assistant:
  - Created and conducted student surveys  
= \$1,720
- Conference:
  - Campus Community Partners in Health conference, May 2016
    - i. 555200 \$375.40 Campus Community Partnership in Health Annual Meeting
    - ii. 555200 \$317.24 Hotel Conference in New Orleans

Total spent: 2,412.64

**Attachments**

- A. CbSL Impact Questionnaire Version 1.1
- B. IRB approval
- C. DePaul Faculty Teaching and Learning presentation 2016
- D. DePaul Faculty Teaching and Learning presentation 2016 Evaluation
- E. CCPH presentation

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## CbSL Impact Questionnaire

Version 1.1

### Directions:

Please respond to the following survey statements regarding your experiences and skills both professional and personal. Please answer honestly and know that your responses will not be used to identify you.

### Directions:

For the following questions, please indicate your agreement with the statements. There is no right or wrong answer and even if you are not sure please indicate your level of agreement.

CRITICAL THINKING		Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1.	In order to analyze a situation, I break the whole situation into parts.	1	2	3	4	5	6
2.	I make decisions by using judgement based on established personal, professional or social criteria.	1	2	3	4	5	6
3.	I am confident in my ability to reason.	1	2	3	4	5	6
4.	When making a decision, I consider the whole situation, including relationships, background and environment.	1	2	3	4	5	6
5.	I use inventiveness to generate, discover, or restructure ideas.	1	2	3	4	5	6
6.	I often find myself imagining alternative solutions.	1	2	3	4	5	6
7.	I can recognize differences and similarities among things or situations and categorize or rank them.	1	2	3	4	5	6
8.	I have the capacity to adapt and accommodate to new situations or challenges.	1	2	3	4	5	6
9.	When solving problems, I search for information by gathering a variety of data from relevant sources.	1	2	3	4	5	6
10.	In order to seek a better understanding, I use observation and thoughtful questioning to explore new ideas.	1	2	3	4	5	6
11.	Even if the results are contrary to my assumptions and beliefs, I seek the truth.	1	2	3	4	5	6
12.	I am insightful and have a sense of knowing without conscious use of reason.	1	2	3	4	5	6

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13.	I make conclusions that are supported by evidence.	1	2	3	4	5	6
14.	Others see me as receptive to different views points.	1	2	3	4	5	6
15.	I pursue a course of action with determination to overcome obstacles.	1	2	3	4	5	6
16.	I envision a plan and its consequences.	1	2	3	4	5	6
17.	I adapt concepts to fit what is needed in different contexts.	1	2	3	4	5	6

**Directions:**

For the following questions, please indicate your agreement with the statements. There is no right or wrong answer and even if you are not sure please indicate your level of agreement.

CULTURAL AWARENESS/ SENSITIVITY		Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1.	Even if I know about a person's culture, I assess their personal preferences for care.	1	2	3	4	5	6
2.	Language barriers are not the only difficulties for recent immigrants to the U.S.	1	2	3	4	5	6
3.	Spirituality and religious beliefs are important aspects of many cultural groups.	1	2	3	4	5	6
4.	People with a common cultural background often have individual differences.	1	2	3	4	5	6
5.	I think that knowing about different cultural groups helps direct my work with individual clients and families.	1	2	3	4	5	6
6.	Clients and families may identify with more than one cultural group.	1	2	3	4	5	6
7.	I believe that everyone should be treated with respect no matter what their cultural heritage.	1	2	3	4	5	6
8.	I understand that people from different cultures may define the concept of care in different ways.	1	2	3	4	5	6

UNIQUE ID: \_\_\_\_\_

**Directions:**

For the following questions think of how you interact in professional settings and indicate your agreement with the statements. There is no right or wrong answer and even if you are not sure please indicate your level of agreement.

PROFESSIONAL COMMUNICATION and LEADERSHIP SKILLS		Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1.	I clearly communicate to my supervisors when I need to adjust my schedule.	1	2	3	4	5	6
2.	In a professional setting, I am aware of when to listen and when I should speak up.	1	2	3	4	5	6
3.	I feel comfortable in my ability to raise concerns to my supervisors.	1	2	3	4	5	6
4.	I am aware of how my non-verbal communication comes across.	1	2	3	4	5	6
5.	I have the skills I need to communicate clearly and professionally with others.	1	2	3	4	5	6
6.	When running late to a commitment, I contact those I am meeting to let them know.	1	2	3	4	5	6
7.	I am confident in my professional communication skills.	1	2	3	4	5	6
8.	If my contact person does not return my email, I will wait until I hear from them.	1	2	3	4	5	6
9.	When provided with feedback, I am able to adjust my performance accordingly.	1	2	3	4	5	6
10.	I consider myself able to help build interdependence among a community or group of people.	1	2	3	4	5	6
11.	When I am at work, I can be a model for others.	1	2	3	4	5	6
12.	I enable others to act on trust and honesty.	1	2	3	4	5	6
13.	In a professional setting, I feel increased confidence to share inspirations, ideas, or dreams.	1	2	3	4	5	6
14.	In a work situation, I feel comfortable challenging processes and ideas.	1	2	3	4	5	6
15.	I am able to learn from my mistakes and use them to benefit others.	1	2	3	4	5	6
16.	I am able to motivate and encourage other persons.	1	2	3	4	5	6

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17.	It is natural for me to listen intently and guide discussion.	1	2	3	4	5	6
18.	I feel confident in my ability to care for myself and others.	1	2	3	4	5	6
19.	I am able to conceptualize the big picture.	1	2	3	4	5	6

**Directions:**

For the following questions think about your *interactions with diverse populations as you pursue a nursing career and indicate your agreement with the statements*. There is no right or wrong answer and even if you are not sure please indicate your level of agreement.

EXPOSURE TO DIVERSE GROUPS/FOSTERING RESPECT		Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1.	I recognize that a person's socio-economic background is a factor in their current health status.	1	2	3	4	5	6
2.	I recognize potential barriers to health care delivery that might be encountered by different people.	1	2	3	4	5	6
3.	I have a growing understanding of people with different cultural heritages.	1	2	3	4	5	6
4.	I avoid making generalizations about groups of people.	1	2	3	4	5	6
5.	I feel that finding ways to adapt my services to client and family cultural preferences is necessary.	1	2	3	4	5	6
6.	Even if I know about a person's culture, I assess their personal preference for care.	1	2	3	4	5	6
7.	I understand that people from different populations may define the concept of "healthcare" in different ways.	1	2	3	4	5	6
8.	I think knowing about diverse cultural groups helps direct my work with individual clients and families.	1	2	3	4	5	6
9.	I welcome feedback from clients about how I relate to others from different cultures.	1	2	3	4	5	6
10.	People with a common cultural background often have individual differences.	1	2	3	4	5	6

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11.	I feel more well-rounded as a nurse and person because of my exposure to diverse populations.	1	2	3	4	5	6
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**Directions:**

For the following questions *indicate your agreement with the statements*. There is no right or wrong answer and even if you are not sure please indicate your level of agreement.

CHANGE AGENT		Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1.	I feel I am able to enact change in my work environment and the people around me.	1	2	3	4	5	6
2.	I can manage to solve difficult problems if I apply myself.	1	2	3	4	5	6
3.	If someone opposes me, I can find ways to work with that person effectively.	1	2	3	4	5	6
4.	If I am in trouble, I can usually think of a solution.	1	2	3	4	5	6
5.	I am able to see opportunities that others can't.	1	2	3	4	5	6
6.	I feel as though I don't have the persistence to stand up for my beliefs when opposed by a majority.	1	2	3	4	5	6
7.	I feel unable to operate in times of instability and uncertainty.	1	2	3	4	5	6
8.	I am flexible enough to work around roadblocks and handle evolving priorities.	1	2	3	4	5	6

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Office of Research Services  
Institutional Review Board  
1 East Jackson Boulevard  
Chicago, Illinois 60604-2201  
312-362-7593  
Fax: 312-362-7574

## Research Involving Human Subjects

### NOTICE OF INSTITUTIONAL REVIEW BOARD ACTION

**To:** Karen Larimer, Ph.D., Faculty, School of Nursing

**Date:** December 17, 2015

**Re:** Research Protocol #KL091015NUR

"Experiences of Masters Entry to Nursing Practice Program Students in a Curriculum using a Community-based Service Learning Pedagogy."

Please review the following important information about the review of your proposed research activity.

#### Review Details

This submission is an initial submission.

Your research project meets the criteria for Exempt review under 45 CFR 46.101 under the following category:

*(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless:*  
*(i) information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.*

#### Approval Details

Your research was originally reviewed on September 22, 2015 and revisions were requested. The revisions you submitted on December 7, 2015 were reviewed on December 15, 2015 and revisions were requested. The revisions you submitted on December 16, 2015 were reviewed and approved on December 17, 2015.

**Number of approved participants:** 280 Total

*You should not exceed this total number of subjects without prospectively submitting an amendment to the IRB requesting an increase in subject number.*

**Funding Source:** 1) Scholarship of Teaching and Learning Grant

**Approved Performance sites:** 1) DePaul University, 2) Rosalind Franklin University

#### Reminders

- Under DePaul's current institutional policy governing human research, research projects that meet the criteria for an exemption determination may receive administrative review by the Office of Research Services Research Protections staff. Once projects are determined to be exempt, the researcher is free to begin the work and is not required to submit an annual update (continuing review). As your project has been determined to be exempt, your primary obligation moving forward is to resubmit your research materials for review and classification/approval when making changes to the research, but before the changes are implemented in the research. **All changes to the research must be reviewed and approved by the IRB or Office of Research Services staff.** Changes requiring approval include, but are not limited to, changes in the design or focus of the research project, revisions to the information sheet for participants, addition of new measures or instruments, increasing the subject number, and any change to the research that might alter the exemption status (either add additional exemption categories or make the research no longer eligible for an exemption determination).
- **Once the project is complete, you should submit a final closure report to the IRB.**

The Office of Research Services would like to thank you for your efforts and cooperation and wishes you the best of luck on your research. If you have any questions, please contact me by telephone at (312) 362-7497 or by email at [rmulnix@depaul.edu](mailto:rmulnix@depaul.edu)

For the Board,

A handwritten signature in black ink, appearing to read 'Richard Mulnix', written in a cursive style.

Richard Mulnix, MS  
Research Protections Coordinator  
Office of Research Services



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## Community-based Service Learning: Innovations in Instructional Design and Student Learning Assessment

Miranda Standberry-Wallace, MSBIT  
Karen Larimer PhD, ACNP-BC, FAHA, Asst. Professor, School of Nursing  
Jaclyn Houston-Kolnik, MA, PhD(c)

## Today's Session

Topic: Innovative instructional design partnered  
with innovative evaluation


- ❖ Overview "Three Pillar" approach to CbSL
- ❖ DePaul's Master's Entry to Nursing Practice  
Program– CbSL throughout curriculum

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## Service Learning

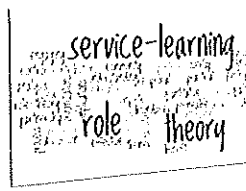
*"Service-learning is a teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the learning experience, teach civic responsibility and strengthen communities."*

—Learn and Serve America National Service-Learning Clearinghouse



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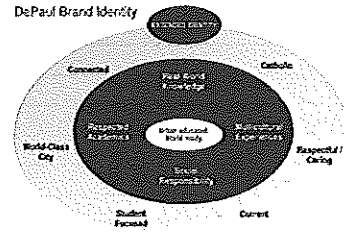
## Academic Service-Learning @DePaul



- Pedagogical tool
  - Fully integrated with course content
- Partnership between the community and the university
  - Exchange of knowledge for service provided
  - Community partners define parameters of the service

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## Academic Service-Learning @DePaul



Developing Superior Student Citizens

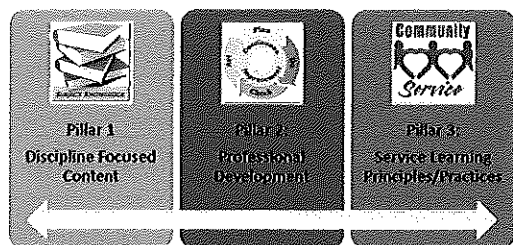
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## The Three Pillar Approach to Service Learning Instruction

- Innovative methodology in service learning  
lesson planning and assessment
  - Standardize some curricular components across academic disciplines
  - Provide a framework for assessing student learning within three distinct competence areas

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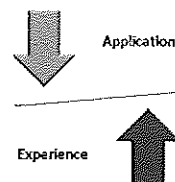
### The Three Pillar Approach to Service Learning Instruction



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### The Three Pillar Approach to Service Learning Instruction: Current Practice

#### IT 278: Community-based Technology Projects



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### Reframing How We Thought about Nursing Education

- MENP Program Students
- Steans Center Staff
- School of Nursing Faculty
- Community Partners and their clients

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### Why CbSL for MENP?

- University's Vincentian Mission
- HealthyPeople 2020
- Calls for change in health profession's training - greater emphasis on CbSL
- Pew Practitioner Competencies for 21st Century
- *The Essentials of Master's Education in Nursing*
  - (American Association of Colleges of Nursing)
- Meeting objectives of SON MENP Program

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### Goals for CbSL

- Incorporate CbSL into the MENP curriculum, creating sustainable community-campus partnerships consistent with DePaul's Vincentian mission of service
- Enhance the understanding and appreciation of "health" as a community focus, influenced by social and physical determinants as described in HP2020
- Collaborate with CPs to build foundations for community health focused initiatives
- Foster sustainable health initiatives and community-based research (CBR)

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### Master's Entry to Nursing Practice Program (MENP) Sample Schedule

Quarter 1			Quarter 2			Quarter 3			Quarter 4		
Title	Req	Gr	Title	Req	Gr	Title	Req	Gr	Title	Req	Gr
Basic Pathophysiology & Pharmacology	4	321	Art & Science of Nursing I	5	302	Art & Science of Nursing II	6	303	Art & Science of Nursing III	8	
Health Assessment	4	400	Nursing Theories	4	401	Biostatistics and Applied Epidemiology	4	403	Advanced Health Assessment	4	
Health Promotion for Families and Communities	4	422	Applied Physiology	4	540	Culture, Ethics, and Policy Analysis	4				
	Sum	12		Sum	13		Sum	16		Sum	12
Quarter 5			Quarter 6			Quarter 7			Quarter 8		
Title	Req	Gr	Title	Req	Gr	Title	Req	Gr	Title	Req	Gr
Art & Science of Nursing IV	6	440	Maternal Health Nursing	6	441	Community Health Nursing	6	426	Pharmacology II	4	
Nursing Research I	4	442	Infant, Child, and Adolescent Nursing	6	472	Critical Care Nursing	8	443	Clinical Innovation/Partnership	6	
Nursing Professionalism, Advocacy, and Leadership	4							558	Graduate Research Synthesis	4	
	Sum	14		Sum	12		Sum	14		Sum	14

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## What Might be the Impact on Students?

- Transformational learning experiences
  - clarification of values, sense of self
- Build a body of experience prior to graduation
- Greater gains in knowledge
  - awareness of determinants of health
  - sensitivity to diversity
  - knowledge of health policy issues
  - leadership development



## How We Previously Evaluated the Impact of CbSL

- Surveys in each course
- Work product in each course
- Letters of closure/thank you in N442



## Process of Evaluation

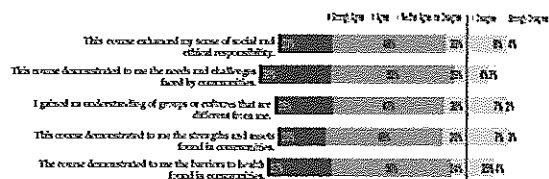
Mission of University (central purposes)	Goals of College/School	Goals of Program	Course Objectives (example from N431)
...contribute to the societal, economic, cultural and ethical quality of life in the metropolitan area and beyond	Demonstrate autonomy, integrity and social justice in professional nursing practice	Incorporate CbSL into the MENP curriculum, creating sustainable community-campus partnerships consistent with DePaul's Vincentian mission of service	Use an analytic framework to plan culturally sensitive care for a family in the context of interpersonal, social, cultural, economic, ethical, legal and political relations.



## Annual Data 2014-2015



### Increasing Community Awareness

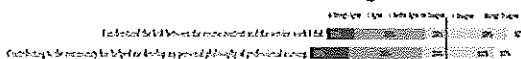


"I learned the most from interacting personally with guests at my site, because when I go out and become a nurse in the community, the more I am open to peoples varying experiences, the better am I will be able to provide for a wide range of needs."



## Annual Data 2014-2015

### Connection of Course to Nursing



"This course is forcing me to approach nursing with an inquisitive mindset, instead of just memorizing information."



## Example of Reflection

### Primary Reflection Question #1 (choose 1 to 2): Due April 28th in class

Introduction to Community-based Service Learning, please respond to the following:

1. What are some of your initial perceptions or beliefs about the population with whom you will be working?
  - a. How are the cultures represented at your community site the same or different than yours?
  - b. How do you see that being a challenge or opportunity for you?
  - c. Discuss how culturally competent a mission you or others have used or could use at your community site to engage with the clients?
2. What policy issues (local, state, federal) most greatly affect your community site?
  - a. How does it affect the site itself?
  - b. How does it affect the clients at the site?
  - c. What type of changes in policy do you think are necessary? Do you think those changes can happen and, if so, how? If not, why?



## Letters of Thanks

part of your organization's mission the past several months

As a result of community-based service learning, I have a newfound appreciation for community-based nursing and primary health care. Low-income, immigrant, non-English speaking populations are most vulnerable to health disparities and poor health outcomes because there are many barriers that prevent access to health services, especially primary health care. Chronic diseases progressively worsen, health expenses increase, and treatment becomes palliative rather than curative. Primary health care is more important now than ever, and I hope to be at the forefront when primary care becomes universal and accessible to all individuals regardless of race, orientation, gender, socioeconomic status, citizenship status, or immigration status.

As a future nurse, I hope to provide the same compassion and quality care to every individual as you do. I want to commit my nursing practice to serving the less fortunate and try my best to disseminate educational resources so community members can feel empowered by making informed decisions about their health and well-being. Thanks to wonderful role models such as inspiring students to be selfless, I feel confident in the future of our humanity. I hope to work with you again in the future.

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## Evaluation Methods

- Interviews
- Focus groups
- Most common: Surveys
- Why do evaluation? Understand areas of strength/improvement and track achievement of student outcomes.
  - Both help to inform CbSL practices and form the basis of our approach to evaluation.

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## Nursing CbSL Evaluation

- Redesigned our survey tool along the following domains that are key nursing competencies:
  - Fostering respect for others (DiPadova-Stocks, 2005)
  - Promoting professional communication (Arnold & Boggs, 2016)
  - Exposure to diverse populations (DiPadova-Stocks, 2005)
  - Critical thinking (Rubenfeld & Scheffer, 2015)
  - Leadership skills (Foli, Braswell, Kilpatrick & Lim, 2014)
  - Professional conduct (Foli et al., 2014)

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## Measures of CbSL in Nursing

- Portland State University and Health Professions Schools in Service to the Nation Program (HPSISN)
  - 5 research questions about impact of program on:
    - University-community partnerships
    - Student preparation for professional careers
    - Faculty adoption of service learning
    - Institutional capacity
    - Community partner capacity

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## Research Method

- We administered this survey to our CbSL nursing students.
- $N = 304$  students
- We then entered the data and ran analyses to empirically assess our survey (Exploratory Factor Analysis)

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## Results from our Revised Survey

- It was a mess!
- Lack of connection in courses around CbSL may contribute to this.
- Lack of thoughtfulness in responding or survey fatigue
- Misguided assessment questions

DEPAUL UNIVERSITY

The Three Pillar Approach to Service Learning  
Instruction:  
Vision and Implementation

Goal: Use this methodology as a framework to develop evaluation/assessment tools

Fact: Understanding the effects of service learning experiences from student learning perspective is an important yet difficult task.



The Three Pillar Approach to Service Learning  
Instruction:  
Vision and Implementation

Issue: Developing assessment tool was a challenge

Question: Could this methodology work to improve current questionnaire?

Solution: Three Pillar Approach would provide a framework for assessing student learning.



The Three Pillar Approach to Service Learning  
Instruction:  
Vision and Implementation

Goal: Use this methodology to create standardization and cohesiveness in the implementation of service learning courses across disciplines.

Fact: All service learning course have a project management and service learning concepts involved



The Three Pillar Approach to Service Learning  
Instruction:  
Vision and Implementation

Issue: Vast differences in service learning instruction practices

Question: Could this methodology be used to standardize some curricular components across academic disciplines?

Solution: Three Pillar Approach would provide plug and play options: pre-developed (modifiable) modules in project management and service learning concepts/studies – including tools/exercises



Collaboration is key!

A word cloud featuring terms related to collaboration and service learning, including: sustainable, team-oriented, partnership, students, community-based, learning, service, university, innovation, co-teaching, connections, justice, civic, trust, social, collaboration, partner, engagement, and interdisciplinary.



*"A rising tide lifts all boats."*

"Cross-discipline collaboration is the way of the future in business, education and health-care."



# 2016 DePaul Faculty Teaching & Learning Conference

## Session Evaluation Summary

**Instruction and Evaluation of Service Learning:** Karen Larimer & Miranda Standberry-Wallace

Average Rating for Session: **3.60/4**      Number of Attendees: **13**      Number of Responses: **13**

Ratings by Category:

	Average Rating	Points Possible
Please rate the overall quality	<b>3.62</b>	<b>4</b>
This presentation aligned well with the conference theme.	<b>3.69</b>	<b>4</b>
This presentation featured innovative ideas, models, and/or approaches for teaching.	<b>3.62</b>	<b>4</b>
This presentation offered practical strategies and/or techniques I can apply to my teaching.	<b>3.25</b>	<b>4</b>
This presentation was well focused.	<b>3.67</b>	<b>4</b>
This presentation was engaging.	<b>3.75</b>	<b>4</b>

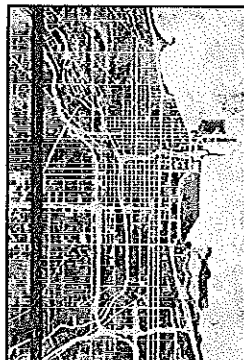
### What did you like best about the session?

- High energy, presenters engaged, very interesting presentation of innovative ideas and focus on collaboration
- Seeing the collaborations
- The speakers were engaging
- Engaging; high energy and I can make the connections with what I'm doing
- Demonstration of the effect of collaborations on implementing high impact practices cross curricular was awesome!
- The topic was presented well
- Very interesting project discussed; Dynamic speakers; Nice job!
- Enthusiasm of presenters; pillars; service learning examples
- Cross collaboration is key
- That the content can be applied across disciplines, pretty much right out of the box
- Interactivity

### What could have been improved in this session?

- More interactive
- The approaches discussed did not seem innovative; perhaps it should have been listed as a "pilot study"
- More questions from audience
- Give concrete examples of tools that are useful in service based learning

- N/A
- N/A



### Addressing Complex Community Health Challenges through Academic Service Learning

Jonathan Handrup, MS  
 Karen Larimer, PhD, ACNP-BC, FAHA  
 Micaela Varro, MPH, Director of Health Programs –  
 Erie Neighborhood House  
 Abby Biasco, BA, MENP Student  
 Megan Moriarty, BA, MENP Student  
 DePaul University  
 Chicago, IL

### Presentation Overview

- Goals of Community-based Service Learning
- Impact of CbSL on Community Partners, Students, Faculty
- Erie House Experience
- Best Practices
- Discussion

### Reframing How We Think about Nursing Education

- MENP Program Students
- Steans Center Staff
- School of Nursing Faculty
- Community Partners and their clients

### Why Community-based Service Learning?

- University's Vincentian Mission
- HealthyPeople 2020
- Calls for change in health profession's training - greater emphasis on CbSL
- Pew Practitioner Competencies for 21st Century
- *The Essentials of Master's Education in Nursing*
  - (American Association of Colleges of Nursing)
- Meeting objectives of School of Nursing MENP Program

### Goals for CbSL

- Incorporate CbSL into the MENP curriculum, creating sustainable community-campus partnerships consistent with DePaul's Vincentian mission of service
- Enhance the understanding and appreciation of "health" as a community focus, influenced by social and physical determinants as described in HP2020
- Collaborate with CPs to build foundations for community health focused initiatives
- Foster sustainable health initiatives and community-based research (CBR)

### What Might be the Impact?

Students	Faculty
<ul style="list-style-type: none"> <li>■ Transformational learning experiences               <ul style="list-style-type: none"> <li>— clarification of values, sense of self</li> </ul> </li> <li>■ Build a body of experience prior to graduation</li> <li>■ Greater gains in knowledge               <ul style="list-style-type: none"> <li>— awareness of determinants of health</li> <li>— sensitivity to diversity</li> <li>— knowledge of health policy issues</li> <li>— leadership development</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>■ Improvement of overall learning/teaching</li> <li>■ Enhanced relationships - students, community</li> <li>■ Linkage of personal/professional lives understanding of community issues</li> <li>■ New career and scholarship directions</li> </ul>

## What Might be the Impact?

### Community Partners

- Dedicated, long-term, reliable service-learners
- Voice heard in planning projects
- Service, economic and social benefits
  - awareness of institutional assets/limitations
- Strengthened relationship with faculty
- Opportunity to be recognized as teachers and experts
- Possible increased capacity and sustainability



## Erie Neighborhood House

- Serving Chicago's immigrant community since 1870
- Settlement House tradition
- Head Start, After School programs, teen programs, adult ESL, citizenship, workforce development, and housing
- Health and Leadership Programs
  - Health education classes for children, parents, and families
  - Dental program
  - Advocacy and leadership development



## Erie's Needs

- "Health ambassadors" to influence a culture of health
- Program sustainability
- Meet funding requirements
- Expanded programming and fresh ideas



## How our Community Garden Project met Nursing Program Goals/Erie House Needs

- Provided an opportunity to integrate nursing theories in the community
  - For example, garden project utilized the Health Belief Model
- Engaged in health education and positive community engagement that intended to change health outcomes by encouraging individuals to make informed decisions
- Grassroots knowledge of Primary, Secondary and Tertiary Models
- Increased our knowledge of the social determinants of health
- Social Consciousness

## Opportunity to Implement a Health Intervention Project

- Implemented a Community Garden Project
  - Allowed children to be involved in the planting, watering and maintenance of the garden
  - Interactive garden yoga class, growing seeds to promote understanding of plant development, multiple cooking activities, and art activities related to the garden and healthy eating
- Focus was on experiential learning activities related to healthy eating and nutrition
- Created and disseminated a Community Garden Resource kit designed for non-gardeners



## How our Community Garden Project met Course Goals

- Health Promotion (NSG 431)
  - Community Partner Site Assessment
  - CbSL Journals
  - Health Promotion Plan- Healthy People 2020 objectives that relate to our site
- Nursing Theory (NSG 400)
  - CbSL was discussed in relation to nursing theory (ie Conceptual frameworks)
- Intro to the Art and Science of Nursing III (NSG 303)
  - CbSL reflections
- Mental Health (NSG 307)
  - Reflections about mental health needs in our community sites and how our sites address mental health issues
- Culture, Ethics and Policy Analysis (NSG 640)
  - CbSL reflections and discussion posts about ethical concerns at our site
- Community Health Nursing (NSG 442)
  - Health Intervention Project
  - Final interview with CbSL site coordinator
  - Professional letter of closure

## Example Reflections and Discussions

- What are some of the most important lessons you have learned at your community service site that you wish you could share with other nursing students?
- What is your perception of the identified problem/community need at your site?
- Is there something more you could do to contribute to help solving some of the key issues at your site, ie. Healthcare needs of individuals, a particular family or the community as a whole?
- How do you see your service learning experience relating to your readings and discussions in class?
- What do you hope to gain from this experience personally, as well as professionally as you become a nurse?
- Your role, if any, in providing mental health services or participating in activities or services that promote or protect the mental health of people served by your agency OR what you would have liked to have been able to do.

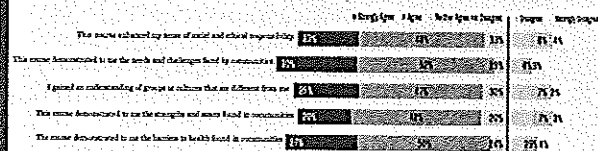
## Evaluation in CbSL

- Surveys in each course
- Work product in each course
- Letters of closure/thank you in N442

## Annual Data 2014-2015



### Increasing Community Awareness



"I learned the most from interacting personally with guests at my site, because when I go out and become a nurse in the community, the more I am open to people's varying experiences, the better am I will be able to provide for a wide range of needs."

## Connection of Course to Nursing

I understand the link between the course work at and the service work I do. 100%  
 Contributing to the community has helped me develop a personal philosophy of professional nursing. 100%

"This course is forcing me to approach nursing with an inquisitive mindset, instead of just memorizing information."

## Example of Reflection

### Prior to Reflection Question 11 (Submitted on 11/10/2014)

Introduction to Community-Based Service Learning, please respond to the following:

1. What are some of your initial perceptions or beliefs about the population with whom you will be working?
  - a. How are the cultures represented at your community site the same or different than yours?
  - b. How do you see this being a challenge or opportunity for you?
  - c. Does a pre-existing opinion or stereotype you or others have and would you at your community site to engage with the client?
2. What policy are in effect, ones that likely most greatly affect your community site?
  - a. How does it affect the service itself?
  - b. How does it affect the culture of the site?
  - c. What type of changes in policy do you think are necessary? Do you think those changes are happening, if so, how? If not, why?

## Letters of Thanks

part of your organization's mission the past several months.

As a result of community-based service learning, I have a new-found appreciation for community-based nursing and primary health care. Low-income, immigrant, non-English speaking populations are most vulnerable to health disparities and poor health outcomes because there are many barriers that prevent access to health services, especially primary health care. Chronic diseases progressively worsen, health expenses increase, and treatment becomes palliative rather than curative. Primary health care is more important now than ever, and I hope to be at the forefront when primary care becomes universal and accessible to all individuals regardless of race, orientation, gender, socioeconomic status, ethnicity, or environment.

As a future nurse, I hope to provide the same compassion and quality care to every individual as you do. I want to continue my nursing practice to serving the less fortunate and try my best to disseminate educational resources so community members can feel empowered by making informed decisions about their health and well-being. Thanks to wonderful experiences and people who have not only taught me but also in the future of our humanity. Thank you for the opportunity to be a part of this in the future.

## Best Practices

### Students

- Schedule time in advance
- Communication...communication.... communication (partner and faculty)
- Be proactive and flexible
- Connect classroom experience and CbSL

### Faculty

- Getting buy-in
- Consistent and fair with expectations
- Regular check-ins with students (formal and informal)
- Provide support with training (pedagogical approaches)
- Facilitate connection of academic experience and CbSL work regularly

## Best Practices: Community

- "Deep" listening with partners
- Mutual assessment of existing community and university resources
- Start with small groups (no larger than 4) per site
- Stress project-focused work rather than direct service
- Regular communication between MENP coordinators and Steans Center administrators and service learning coordinators (graduate students)
- Revisit partners frequently
- Refresher meetings with community partners
- Course reflection opportunities for students to facilitate real time feedback
- Concrete/clear expression of expectations
- Connecting to "right" people at community organizations
- Strong leaders at centralized sites

## Resources

- Links provided for supporting material on Nursing curriculum development on DePaul community engagement

Or contact:

- Jonathan Handrup, Academic and Community Coordinator Steans Center [jhandrup@depaul.edu](mailto:jhandrup@depaul.edu)
- Karen Larimer, Community Engagement Coordinator, Nursing [klarimer@depaul.edu](mailto:klarimer@depaul.edu)
- Micaella Verro, Director of Health Programs, Erie Neighborhood House [mverro@erinehouse.org](mailto:mverro@erinehouse.org)
- Abby Blasco, MENP Student, DePaul University [blascoa@gmail.com](mailto:blascoa@gmail.com)
- Megan Moriarty, MENP DePaul University [moriartymeg@gmail.com](mailto:moriartymeg@gmail.com)