

How do we learn: Impressions and perspectives from Johns Hopkins Nursing

Background

Hospital patients are more acute while experienced nurses are leaving the workforce faster than they can be replaced. 51% of JHH frontline nursing staff has less than two years' experience and 70% of new hires are new graduate nurses. It is projected that millennials will make up 50% of the workforce by 2020; they have different expectations and desires than previous generations of workers. Adult learning principles may better support and motivate new nurses so they are confident and competent in their skill set with increased levels of job satisfaction in the transition from nursing school to nursing practice.

Methods

Convenience sampling was used to conduct semistructured individual and group interviews with 29 educators, preceptors, and new graduate nurses from the Johns Hopkins Hospital and the Johns Hopkins University School of Nursing, to uncover what nurses at different levels think about learning and conditions that foster learning. This information will be used to highlight gaps, determine target areas, and guide future discussions about learning and the role of nurse educators in practice and academia.

Interview Questions

- 1. Think about a time when learning was fun, engaging, or when someone helped you. How was that? What did it feel like?
- 2. How do you learn best?
- 3. How do you like to learn?
- 4. What conditions do you think are necessary to be a successful learner?
- 5. What would an ideal learning model look like?
- 6. What do you see as desirable learning behaviors and/or skills?
- 7. Other thoughts about this topic?

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Project Question

How do nurses describe the conditions that support learning?

	Results
Fun & engaging learning is:	Idea
 Active/Hands-On 	• Flo
 Motherly/Supportive 	• Er
Creative	• Ha
 Non-Punitive 	• In

Preferred learning styles varied; most prefer multiple methods; nearly all learn best the same way they like to learn.

Desirable learning behaviors:	Cond
 Preparedness 	• Int
 Openness 	• Su
 Critical thinking 	• Mo

Nurses interviewed had experience ranging from five months to more than thirty years. They had many additional thoughts about how to provide an ideal learning environment:

- More exposure to community, clinic, specialty areas of practice
- Increase time, effort, & focus on clinical placement and preceptor model/training
- Need to draw on life experiences of adult learners
- Nursing is flexible; nursing school is rigid & dated
- Internship in school would be ideal for transition
- There is no replacement for face to face learning
- Degrees alone don't make good teachers
- Less duplication, more true collaboration
- Lack of realistic clinical settings
- Importance of mentoring

There were several limitations to this study:

- Small sample size
- Very limited time for data collection
- All participants affiliated with Hopkins
- TJC & Epic Go-Live impacted recruitment efforts
- All stakeholder groups not represented

I learning model: lexible ngaging las variety ndividualized

ditions for successful learners: nterest in the subject matter upportive environment lotivation & desire to learn



There is no one-size-fits-all approach to learning. Learners desire engaging & creative teaching using multiple methods, ideally personalized.

Educators can have a lifelong impact on learners. Feeling that a teacher *cared* about the subject matter and the learner as a person, was more important than the teacher's knowledge or experience.

There were many similarities in responses despite a significant variance in the age and experience level of respondents, with one clear area of dissention: academic educators believe more online learning is needed, while new graduate nurses and clinical educators want more hands-on instruction.

Teachers and students agreed that teaching should be recognized and valued as much as research and scholarship.

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Lessons Learned

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