Recent Accelerated Second-Degree Baccalaureate Graduates’ Perceptions of Educational Preparation

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RECENT ACCELERATED SECOND-DEGREE BACCALAUREATE GRADUATES’
PERCEPTIONS OF EDUCATIONAL PREPARATION

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ABSTRACT

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As of 2008, the U.S. Department of Labor is predicting a need for greater than one million new registered nurses by the year 2016 (American Associations of Colleges of Nursing [AACN], 2008). One way that nursing schools around the country are dealing with this issue is through the creation of accelerated second-degree programs for non-nursing graduates.

The purpose of this descriptive study was to examine the perceptions of educational preparation of accelerated second-degree baccalaureate graduates, who have been out of school for at least one year, but no longer than four years. The sample consisted of 54 graduates from an accelerated nursing program in either Idaho or Nevada. Using the Survey of Nurses’ Perceptions of Educational Preparation (SNPEP), it was found that the majority of participants indicated that their accelerated nursing program prepared them for their first job, provided them with management skills, leadership skills, communication skills, documentation skills, decision making skills, organizational skills, provided instructors who acted as role models, encouraged independent problem solving, utilized multiple evaluation strategies, and helped them to feel confident in their ability.
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CHAPTER 1
INTRODUCTION

As of 2008, the U.S. Department of Labor is predicting a need for greater than one million new registered nurses by the year 2016 (American Associations of Colleges of Nursing [AACN], 2008). One way that nursing schools around the country are dealing with this issue is through the creation of accelerated second-degree programs for non-nursing graduates. These programs usually are 12 - 18 months in length, build upon the individual’s previous college experience, and prepare the individual to enter the nursing field through intense classroom and clinical training (AACN, 2008). These programs also require that one possess a baccalaureate degree in another field prior to enrollment in the program.

Accelerated nursing degree programs are not a new concept. They have been around since the 1970s (Suplee & Glasgow, 2008), however their popularity has increased dramatically during the past fifteen years. Today, 205 accelerated baccalaureate programs (BSN) are in existence, and 37 new accelerated programs are currently in the planning stages (AACN, 2008).

In order for these accelerated BSN students to be successful in their first nursing position, accelerated BSN programs must carefully balance the two factors of preparing nursing students in a short amount of time, and providing them the necessary education to feel competent as a newly graduated registered nurse (Bentley, 2006). In order to discover how well accelerated nursing programs are preparing their students, one must look at more than just NCLEX pass rates. One must also look at recent accelerated RN graduates’ perceptions of their educational preparation.
Background and Significance to Nursing

Research has found that the typical accelerated second-degree BSN class tends to be older, married, and more diverse than a class in a traditional program of nursing (Penprase & Koczara, 2009). The majority of the class still is female, however, there is twice as many males present in the class than in the traditional program (Penprase & Koczara, 2009). When accelerated BSN students were questioned as to reasons for seeking a second degree in nursing, their responses included seeking financial stability, seeking greater employment opportunities, and the desire to help people and make a difference in the post-9/11 era (Cangelosi & Whitt, 2005).

Accelerated BSN students have been studied a great deal during their time in school. However, little research has been done on accelerated BSN students once they have transitioned into the work place. A hermeneutic phenomenological study done by Cangelosi (2007) explored accelerated second-degree BSN graduates’ experiences and how these experiences shaped their practice during their first few years of employment. Based on her research, Cangelosi (2007) proposed four recommendations in order to enhance second-degree nursing programs: “Faculty members need to streamline their materials, sacred cows need to be given up, the quality of clinical time needs to be increased, and lastly, faculty members need to assist second-degree students with finding their own role in nursing.

Newschwander (1988) studied graduates from both traditional BSN programs and accelerated second-degree programs. Graduates of the second-degree programs voiced that they felt as competent as the traditional graduates in the workplace, yet managers
rated the accelerated graduates higher than traditional graduates in the areas of communication, planning, evaluation, and interpersonal relations.

With the need for new nurses so high, and the number of accelerated BSN programs growing exponentially, one needs to ensure that nursing programs are focusing on not just the quantity of nurses being produced, but also the quality of nurses being produced. Also, accelerated programs in place currently need to receive feedback from their working graduates in order to refine their programs in order to have the best possible outcomes.

**Problem Statement**

The literature is quite diverse when it comes to the subject of accelerated BSN programs. The American Associations of Colleges of Nursing describes second-degree accelerated nursing students as “motivated learners who challenge traditional thinking, have high academic expectations, and become engaged in evidence-based solutions to clinical dilemmas” (Cangelosi, 2007, p. 92). Contrary to this, Vinal and Whitman (1994) found that second-degree students had issues with self-confidence and required vigorous training in the clinical skills lab in order to become competent in clinical skills.

Another study by Seldomridge & DiBartolo (2005) reported that second-degree accelerated students performed higher academically, and had a higher passing rate on the NCLEX-RN exam than traditional students. Shiber (2003), however, found that there was no significant difference in NCLEX-RN performance between accelerated and traditional nursing students. When it comes to faculty perceptions of second-degree accelerated students, anecdotally, faculty members have described these students as “challenging, entitled, and assertive at times bordering on aggressive” (Suplee & Glasgow, 2008, p.1).
With the amount of conflicting literature, it is hard to really characterize accelerated students and the success of accelerated nursing programs. A major piece of the puzzle that is lacking in the literature is the newly graduated accelerated student’s perceptions of their education preparation. It is not enough to survey them right after graduation. Once the graduate has been working for at least one year, the graduate is able to reflect on his/her nursing program as a whole and discover areas that may have been lacking or areas that contributed to success as a novice RN (Cangelosi, 2007).

**Purpose of Study**

The purpose of this descriptive study was to examine the perceptions of educational preparation of accelerated second-degree baccalaureate graduates, who have been out of school for at least one year, but no longer than four years.
CHAPTER 2
REVIEW OF RELEVANT LITERATURE

Twenty-six articles from the field of nursing, spanning the years 1988 - 2009, were reviewed. The relevant literature covering the characteristics of accelerated second-degree nursing students, the teaching methods used to educate these students, achievement of program outcomes, nursing faculty perceptions, and employer perceptions of accelerated nursing program graduates is discussed. The review includes two existing studies that directly address newly accelerated second-degree graduates’ perceptions of their educational preparation.

Characteristics of Accelerated Second-degree Nursing Students

Demographics

Three studies, which examined the demographics of accelerated second-degree nursing students were found, all with similar findings. Siler, DeBasio, and Roberts’ (2008) descriptive study of 993 accelerated second-degree nursing students, found that the typical enrolled student in an accelerated second-degree nursing program is a single, Caucasian female, without children, under the age of 30 years old. Seldomridge and Dibartolo (2005) found similar results in their descriptive study focusing on 224 traditional and 71 accelerated student records from 1998-2003. They found that 87% of the students were female; however the 13% male population was actually double that of the traditional students (Seldomridge & Dibartolo, 2005). Similar to Siler, et al. (2008), Seldomridge & Dibartolo (2005) also found that the majority of the accelerated students were Caucasian and under the age of 30. These researchers, however, also found that the majority of the accelerated students studied had received their first bachelor degree less
than five years ago, with the most common bachelor degrees being in biology and psychology (Seldomridge & Dibartolo, 2005).

An older study of 10 accelerated second-degree baccalaureate programs by Wu and Connelly (1992), also found that the most common bachelor degrees held by an accelerated second-degree nursing student were in biology and psychology. The mean age of the accelerated students studied by these researchers was 28.7, and again, there were twice as many males enrolled in the accelerated program than in the traditional program (Wu & Connelly (1992).

**Reasons for Seeking a Second Degree in Nursing**

Similarities were also seen in the literature regarding accelerated students’ reasons for seeking a second degree in nursing. A ex post facto study done by Toth, Dobratz, and Boni (1998) of 102 second-degree students and 286 traditional students found no differences in the attitudes toward nursing between traditional and second degree nursing students.

Siler, et al.’s (2008) descriptive study looked at factors that influenced accelerated students’ decision to go into nursing. Of the 1,751 study participants, 50% of the participants indicated that job-related factors played an important role in their decision. Under this large heading of job-related factors, 51.8 % of participants stated that flexibility, specifically in the variety of nursing positions, locations, and hours of work, and allowable time for family life as primary factors for their decision to enter nursing (Siler, et al., 2008).
Characteristics While in the Accelerated Program

The literature touches on the characteristics of admitted second-degree accelerated nursing students while in the program itself. Youssef and Goodrich (1996) used the State-Trait Anxiety Inventory to compare stress levels between associate degree nursing students and accelerated second-degree nursing students. The researchers found a significant difference in stress levels between the two groups at the beginning of the semester ($t=3.68$, 2-tailed probability $P=0.008$) but non-significant differences in stress levels between the two groups before final exams ($t=2.51$, 2-tailed $P=0.07$) (Youssef & Goodrich, 1996).

Ouellet, Macintosh, Gibson, and Jefferson (2008) studied the stress levels of two classes, consisting of 42 accelerated nursing students, post-graduation. The researchers utilized the Perceived Stress Scale to assess students’ stress levels at the beginning of summer session, end of summer session, and end of fall term. They found that the students’ stress levels were the highest at the end of fall term, which was right before the students started their preceptorships.

Teaching Strategies for Accelerated Second-Degree Nursing Students

What types of teaching strategies should be utilized when educating accelerated second-degree nursing students? Accelerated nursing students meet the requirements for being adult learners due to their self-direction, their ability to draw on previous life experiences, and their view that education is a way to become competent and fulfill their lives (Cangelosi & Whitt, 2005). Teaching strategies that are suitable for these adult learners utilize cutting-edge techniques such as simulations, current topics, concept
mapping, case study problem solving, and discussion of current nursing literature (Renaud & Miller, 2003).

Cangelosi (2008) addresses the use of illness narratives as a beneficial teaching strategy for accelerated second-degree nursing students. Using a hermeneutic phenomenological approach, Cangelosi studied the experiences of 22 accelerated nursing students and their interactions with simulated clients. Overall, the researcher found that the students, who took part in the exercises with simulated clients, voiced favorable feelings toward the learning experiences (Cangelosi, 2008). The students felt they could learn and, at the same time, have a safety net in case they made a mistake, because they were not learning a skill on a “real” person. Cangelosi (2008) came to the conclusion that because accelerated students had already been out working in the “real” world, they were more aware of the fact that a mistake made, when caring for a patient, could potentially have fatal effects. Illness narratives provided a means for the students to learn with “fake” patients and reduced their stress when it came to worrying about making errors.

Schreier, Peery, and McLean (2009) describe the use of the Coach, Preceptor, Mentor Team model (CPMT) as an effective teaching approach for accelerated students given the shorter length of accelerated nursing programs. In the CPMT model one faculty member is assigned to 10 students, with each student being paired up with a preceptor on a nursing unit. The CPMT model provided multiple benefits to the students (Schreier, et al., 2009). First, using the model, the nursing students were able to quickly adapt to the daily routine on the unit. Secondly, there were greater opportunities for the students to practice skills and care for an increased number of patients. The CPMT model also allowed the students to witness numerous accounts of interactions between
nursing staff, and observe the communication and assessment skills of their preceptors. Finally, the nursing students were able to receive instant feedback from their preceptors regarding performance and questions (Schreier, et al., 2009).

**Achievement of Program Outcomes**

**Caring**

According to Raines (2007), the majority of accelerated nursing students do not expect to learn what it means to exhibit caring behaviors. Instead, they focus on learning technical skills, such as starting an IV or taking a blood pressure (Raines, 2007). Raines (2007) examined the caring abilities of accelerated second-degree nursing students as part of an evaluation study. The Caring Abilities Inventory (CAI) was used to assess 66 students’ caring abilities at the beginning and at the end of a 12 month accelerated nursing program. Overall Raines (2007) found that the students’ caring abilities increased from the beginning to the end of the program.

**Course Performance**

Accelerated nursing programs demand challenging credit load and vigorous clinical experience (AACN, 2008). Scant literature is available related to course performance of accelerated second-degree nursing students. A study completed by Shiber (2003) examined 226 graduates of a 13 month accelerated second-degree program and 204 graduates of a two year traditional program. Overall the researcher found that in all courses, the accelerated students did somewhat better, but not significantly better than the traditional students.
National Council Licensure Examination for Registered Nurses (NCLEX-RN) Pass Rates

One of the overall goals of nursing programs is to prepare nursing students to attempt and pass the NCLEX-RN licensure exam. Several studies regarding accelerated second-degree nursing students’ pass rates on the NCLEX-RN exam were examined.

Bentley (2006) performed a retrospective correlation study to compare the NCLEX-RN pass rates between 172 traditional and 52 accelerated nursing program graduates. Overall, Bentley (2006) found that graduates of the accelerated nursing program had a greater passing rate (92.3%) than the graduates of the traditional nursing program (85.5%). Despite the increased pass rate of the accelerated graduates, it was found that the difference between the two groups was not statistically significant ($P=.388$) (Bentley, 2006). Shiber (2003) also studied the NCLEX-RN pass rates for 226 accelerated second-degree nursing students. This researcher also found the pass rates of accelerated program graduates to be higher, but not significantly different from their traditional counter parts. Youssef and Goodrich’s (1996) prospective study of 46 traditional nursing graduates and 48 accelerated nursing graduates found that out of the 94 students, only two students had reported failing the NCLEX-RN exam. Both of these failures were reported by accelerated nursing graduates.

Aktan, Bareford, Bliss, Connolly, DeYoung, Sullivan, and Tracy’s (2009) descriptive study included the outcome, NCLEX-RN passing rates as part of an overall outcomes study. Using a self-reported questionnaire, the researchers reported that out of 33 traditional graduates, five graduates reported failing the NCLEX-RN exam the first time. In contrast, out of 40 accelerated program graduates, three graduates reported
failing the NCLEX-RN exam the first time. Overall, the difference was not significant (p=.252) (Aktan et al., 2009).

Evaluation research, done by Ouellet et al. (2008), studied 42 Canadian accelerated graduates’ passing rates for the Canadian equivalent of the NCLEX-RN, the Canadian Registered Nurse Examination (CNRE). Ouellet et al. (2008) also found that the accelerated students’ pass rates were higher than their traditional counterparts. However, the researchers did not address whether or not the higher passing rates were statistically significant.

**Nursing Faculty’s Perceptions of Accelerated Second-Degree Nursing Students**

A small amount of literature regarding nursing faculty’s perceptions of accelerated second-degree nursing students was identified. Lockwood, Walker, and Tilley (2009) conducted accelerated program faculty focus groups, consisting of nine faculty members, to address the faculty’s perceptions regarding the accelerated students and program during its inaugural year. The majority of the faculty agreed that present day nursing students are merely different than nursing students from previous generations. Nursing faculty also conveyed their frustration in regards to the high expectations that students held the faculty to. Being that accelerated nursing programs are an unusual type of educational program, the students mistakenly expected that the accelerated instruction would be similar to the instruction that they had received during their first-degree program (Lockwood, et al., 2009). Faculty also expressed frustration with the inaccurate view of nursing that most students had. Faculty perceived that students held the belief that the function of a nurse was task focused (Lockwood, et al., 2009). Faculty also voiced that they felt overwhelmed by the extra workload accompanying the accelerated
program (Lockwood, et al., 2009). They described the accelerated students as more demanding of the faculty’s time outside of class for review of written tasks and exams (Lockwood, et al., 2009).

When addressing the sacred cows associated with accelerated second-degree nursing programs, Hegge and Hallman (2008) address the myth upheld by some nursing faculty that nursing is too intricate to learn in just one year. The faculty that believe this myth, have the mistaken notion nursing subject matter needs to be watered down in order for it to be supplied to the students in such a short time frame (Hegge & Hallman, 2008). A second myth that various nursing faculty may uphold is the myth that professional traits cannot be shifted from one field of study to another (Hegge & Hallman, 2008). Some nursing faculty believe that professionals such as psychologists, teachers, and accountants, do not have the ability to transfer their professionalism from one occupation to another (Hegge & Hallman, 2008).

**Employer Perceptions of Accelerated Second-Degree Nursing School Graduates**

An aspect that was addressed in the literature concerned employer perceptions of accelerated second-degree nursing school graduates once they are out in the work place. According to the AACN (2008) employers describe accelerated second-degree nursing graduates as being able to function at a high maturity level, having superior clinical skills, and are able to learn quickly on the job.

Ouellet et al. (2007) examined employer perceptions of preparedness of Canadian accelerated second-degree nursing graduates as part of an evaluation research study. The researchers reported that overall employers were pleased with the graduates’ level of comprehension and their capabilities on the nursing unit, and that sometimes these
graduates’ abilities and skills transcended employers’ expectations of them (Ouellet et al., 2007).

### Student Perceptions of Preparedness

Overall, two studies similar to the area for this proposed study, were found. The first study is part of an evaluation study conducted by Ouellet et al. (2008) that looked at several outcomes, including students’ perceptions of preparedness for practice, of an accelerated nursing degree program. The researchers’ sample consisted of 42 “accelerated-option” students, who were given a two-part competency questionnaire. The first part of the questionnaire consisted of a self-report inventory containing 24 items pertaining to three domains of competencies: being/professional sensibility; knowing/knowledge; and doing/provision of nursing care. The second part of the questionnaire incorporated both closed and open-ended questions designed to draw out background information and nursing program elements that impacted graduates’ preparedness for practice (Ouellet et al., 2008). This survey was then mailed out to two consecutive graduating classes of 42 students (2003 and 2004), immediately following graduation and then eight months later. Overall, for all of the 42 students, the researchers found the mean of graduates’ ratings to be greater than 4.0, with a score of 4 indicating a feeling of being well prepared (Ouellet et al., 2008). Limitations of this study, discussed by the researchers, included a small sample size and measurements of variables at different points throughout the program which was thought to decrease response rates.

A second study, which examined preparedness, is by Cangelosi (2007) and utilized a hermeneutic phenomenological approach. A sample of 19 accelerated second-degree graduates from the mid-Atlantic region of the United States, who had graduated
within the past two years, were interviewed about their experiences as a second-degree nursing student and asked the following question: “Is there an incident that stands out in your mind that best prepared you for your current clinical position?” (Cangelosi, 2007, p. 92). The interviews were then transcribed and analyzed, using the human science research method, and sent to the interviewees to validate the accuracy of the content and interpretation of their interviews (Cangelosi, 2007). From the analysis of all 19 interviews, the researchers saw a common theme entitled “Clearing a Path Toward Possibilities,” which described the vital role that faculty members play in the success of accelerated second-degree students (Cangelosi, 2007, p. 93). Recommendations, by the researchers, included a larger sample size and replication in other geographical areas of the United States (Cangelosi, 2007).

**Chapter Summary**

Overall, research related to accelerated, second-degree programs and the students that enroll in these programs has been minimal (Cangelosi & Whitt, 2005). So far the current, relevant literature suggests that the accelerated second-degree nursing student population tends to be older and contains a higher percentage of males than its traditional counterpart (Seldomridge & Dibartolo, 2005; Siler, et al., 2008). These individuals choose a second degree in nursing for a variety of reasons (Siler, et al., 2008) and experience higher levels of stress while working on this degree (Youssef & Goodrich, 1996; Ouellet, et al., 2008). While these students are in the program, they benefit from use of adult learning strategies (Cangelosi & Whitt, 2005) and do not differ significantly from traditional students when it comes to achievement of program outcomes (Aktan et al., 2009; Bentley, 2006; Shiber, 2003; Youssef & Goodrich, 1996). When it comes to
perceptions of accelerated second-degree students, nursing faculty view them as challenging at times (Lockwood, et al., 2009), while their future employers view them as highly competent nurses with the ability to learn on the job quickly (AACN, 2008; Ouellet et al., 2008).

The relevant research examining accelerated second-degree students’ perception of preparedness is scant. Ouellet, et al. (2008) looked at students’ perceptions of educational preparation very briefly as a part of a much larger study, while Cangelosi (2007) briefly touched on the subject as a way of determining the effectiveness of accelerated second-degree programs in general. This descriptive study will add to the literature of accelerated second-degree students’ perceptions of educational preparation and can provide feedback for accelerated second-degree programs to be used in curriculum review and revision. In addition, it may provide faculty with information for determining how other aspects of the student experience can be improved for these students, which will assist them to move more smoothly into professional practice.
CHAPTER 3

CONCEPTUAL FRAMEWORK

The theoretical basis of this study is presented in this chapter. Research questions, definitions, and study assumptions based upon this theory are also discussed.

Theory of Adult Learning

The theoretical framework selected for this study is Malcolm S. Knowles’ Theory of Adult Learning. Knowles (1980) defined the concept of andragogy as “the art and science of helping adults learn” (p.43). For Knowles (1968), andragogy is based on the unique characteristics of adult learners, and based on these characteristics, it dictates specific procedures that should be used when teaching adults, as opposed to teaching children.

How are adults different than children? According to Knowles (1968, 1980), there are six characteristics that set the adult learner apart from the child learner. These six basic characteristics are:

1. **A self-concept of self-direction and autonomy.** Adults, in contrast to children, have a deep psychological need to be self-directed. Adults resent and refrain from situations where self-directed learning is not allowed (Lee, 1998). Since the majority of students that enter accelerated second-degree BSN programs are adults, then these students will be more self-directed and autonomous than their regular track counterparts (AACN, 2008).

2. **A higher level of background and life experience.** Unlike children, adults bring a wealth of previous experience to the classroom. This experience serves a resource for learning as well as a foundation in which to relate new learning to (Lee, 1998). The
majority of accelerated second-degree BSN students have previous bachelor degrees in science-related fields so they bring outside knowledge to nursing, which can either benefit or hinder their experience in the nursing program (Hegge, et al., 2008).

3. **The need to understand the reasons for learning something new.** The adult learner needs to know the significance of the material being taught to them. “It is seldom convincing for them to be told by someone (like the boss) that it would be good for them” (Knowles, 1987, p.170). The accelerated second-degree BSN student dislikes busy work. For curriculum to be beneficial, the accelerated BSN student has to find the curriculum meaningful and useful to their future career as an RN (Cangelosi, 2008).

4. **A motivation to learn based upon personal need.** Adults are motivated to learn things that will help them succeed in their role in society whether that role is a mother or nurse (Lee, 1988). In other words, do not teach accelerated second-degree BSN students the principles of good writing, instead, teach them how to write a thorough nursing care plan.

5. **A pragmatic orientation.** Adults want to learn things that relate to relevant issues so that they can make a difference in these present day issues. Adults want to be able to apply and use what they learn to be “able to better deal with some life problem about which they feel inadequate now” (Knowles, 1968, p. 386). Accelerated second-degree BSN students focus greatly on clinical experiences. Clinical experiences give the students the opportunity to practice what they have been learning in the classroom (Hegge, et al, 2008).
6. **A motivation to learn that is internally driven.** Adults are driven to learn by something inside of them rather than externally imposed requirements to participate (Knowles, 1987). Accelerated second-degree BSN students are in the classroom in order to better themselves and provide for themselves and their families (Siler, et al, 2008).

Overall, adults learning differently than children do. Because of this, educators need to use different approaches when teaching them new material.

**Research Questions**

Based on Malcolm Knowles’ Theory, this present study attempted to answer the following questions:

1. How well do recent graduates perceive their accelerated nursing program prepared them for practice?
2. Do recent graduates perceive their accelerated nursing program prepared them for the National Council Licensure Examination for Registered Nurses (NCLEX-RN)?
3. What is the relationship between selected demographic variables and recent graduates’ perceptions of how well their accelerated nursing program prepared them for practice?

**Definitions**

Terms that will be explained are introduced in quotations:

“Accelerated second-degree nursing programs” are an innovative approach to solve the nursing shortage (AACN, 2008). These programs are geared towards college graduates who hold a bachelors degree in a field other than nursing. The length of these programs is usually between 12 and 18 months and these programs offer the quickest route to becoming a registered nurse for second-degree students. (AACN, 2008).
“Recent RN graduates” is defined as students who have graduated from the two programs being surveyed in this study. Due to the recent creation of the second-degree accelerated nursing programs at the universities where the sample population was extracted from, in this study, “recent RN graduates” will refer to graduates who have completed their nursing program within the past three years which have agreed to allow this student researcher to access.

According to the Merriam-Webster Dictionary (2004), “perception” is operationally defined as one’s insight of the environment surrounding them. For this study, “perception” will be defined as those responses provided by the participants on the survey of nurses’ perceptions of educational preparation (SNPEP).

According to Knowles (1968) “andragogy” is a term used to describe characteristics of adult learners and a set of assumptions to be used for effectively teaching adult students. “Andragogy” is key to accelerated second-degree BSN programs since they are dealing with adult learners.

Assumptions

For the purpose of this study, the following statements were assumed to be correct:

1. The discrepancies between the different accelerated second-degree nursing programs did not affect the outcomes of this study.

2. Participants in this study answered all questions truthfully.
CHAPTER 4
METHODOLOGY

This descriptive study explored recent RN graduates, of second-degree accelerated nursing programs’ perceptions of educational preparation. The methodology utilized for this study is described in the following sections.

Settings and Design

The settings for this study were two accelerated second-degree nursing programs, one in a northwestern state and the second in a southwestern state. The accelerated program in the northwestern state has, to date, produced eight graduating classes. The accelerated nursing program in the southwestern state has been in operation since 2004 and to date has produced four graduating classes, averaging 28 students per class.

A descriptive survey design was utilized for this research study. Descriptive designs are utilized to acquire knowledge regarding characteristics within the confines of a distinct field of study (Burns & Grove, 2005). The objective of this type of study is to produce a picture of situation as it occurs naturally, which is often a necessary step in exploration of causality (Burns & Grove, 2005). The goal of this descriptive study was to paint a picture of graduates of accelerated second-degree nursing programs’ perceptions of their educational preparation. The survey method was fitting for this study because it is a noninvasive, nonexperimental approach for obtaining the accelerated program recent graduates’ individual perceptions of how they feel their educational program prepared them to practice as a registered nurse.
Sample

For this study, a convenience sample of at least 100 participants was sought out. The size of the accessible population was approximately 300 individuals. The number of graduates who actually choose to participate in the study ultimately determined the sample size, but the student researcher aspired to obtain a minimum of 100 participants. This sample size was selected because of the number of accessibility of students fitting the required inclusion criteria. All participants who met the inclusion criteria listed below during the selected time frame were contacted via email and asked to complete the Educational Preparation Survey.

Inclusion criteria:

a. A licensed graduate of an accelerated second-degree baccalaureate program from the two schools being sampled in this study.

b. The individual must have graduated no less than one year and no longer than four years from date of study.

c. The accelerated program from which the individual graduated from must have been in place greater than one year.

d. Willing to complete the survey.

Instrumentation

The instrument being used for this study consists of a three-part survey developed by Lori Candela and Cheryl Bowles (2008) called the Survey of Nurses’ Perceptions of Educational Preparation (SNPEP). The researcher has obtained permission from the developers to use the survey and modify it for this study. The survey is composed of 21 elements, asking the participants’ perceptions of how well their accelerated nursing
program prepared them for their first nursing position. These items are scored on a Likert-type scale, with scores ranging from 1 (strongly disagree) to 6 (strongly agree). The survey also contains questions related to the participants’ demographics and current employment status. Candela & Bowles (2008) report a Cronbach’s alpha reliability coefficient of .87 for the 21 perception items from their sample of 352 recent RN graduates. Content validity was reported using an extensive literature search for the development of survey items. Construct validity was reported based on a factor analysis of the survey items.

The second part of the survey consisting of the items related to perceptions of educational preparation will be used for this study and only demographic questions regarding age, race, gender, first job area, program location, year received license and amount of time spent working per week, will be added prior to the perception items. One of the 21 perception items was deleted by the developers because it did not meet factor analysis criteria and reliability criteria regarding having a clinical practicum course (C. Bowles personal communication, December 2, 2009). One item was added to the perceptions items by this researcher that addresses perception of whether or not the educational program prepared the individual for the NCLEX-RN exam. Therefore, there are 21 perception of educational preparation items used in this study.

Both the demographic questions and the SNPEP were placed on the web using the website, Survey Monkey. Survey Monkey is a company that allows users to create their own web-based surveys and then send the link, containing their survey, to individuals who the users wish to survey.
Data Collection Process

The student researcher made contact with educators from two accelerated second-degree baccalaureate programs and requested these individuals to compile contact information, in the form of email addresses, of their graduates from 2009 and previous years. Those graduates who have been out of school for greater than one year and less than four years, were contacted by their school’s educator via email. In this email, the student researcher explained her role as a researcher from the University of Nevada, Las Vegas, the purpose of the study, and the time and effort requested, and that participation is voluntary. The researcher then provided the participants with the secure web address of the online survey.

The rationale behind choosing a time period of one to four years post graduation is to first, make sure that the graduates have had adequate time in the work place to be able to answer questions about how well their nursing program prepared them for various aspects of their job. Secondly, the maximum time limit of four years was chosen to reduce any bias of survey answers due to the fact that the graduate would not be able to adequately remember all aspects of their nursing program in relation to their first nursing position. The participants’ answers to the online survey were kept anonymous.

The online survey was available for three weeks. One week before the survey due date, a reminder email was sent out to all of the participants by the nurse educator from their respective school. After the three week time period, the surveys were complied and analyzed. The out of pocket costs for this study were minimal due to the use of email for survey distribution and data collection. There was also a nominal fee for the student researcher for subscription to the survey monkey website.
Data Analysis

Data was collected and analyzed using SPSS 12.0 for Windows. Descriptive statistics were utilized to describe demographic data and responses related to perceptions of educational preparation. The student researcher also utilized ANOVAs to compare perceptions of educational preparation scores and demographic variables.

Limitations

The most concerning limitation of this study is sample size. Due to the minimal presence of accelerated second-degree nursing programs in the student researcher’s geographical location, there is a small pool of candidates eligible for this study. Also, due to the nature of on-line surveying, it was unclear how many participants will actually complete the survey. The smaller the sample size of the study, the smaller the power of the study will be (Burns & Grove, 2005).

To address the issue of a small sample size, the student researcher chose to sample students from two institutions in two different geographical areas. The reminder email may have helped to remind those participants who were planning on completing the survey at a later time.
CHAPTER 5

RESULTS

This chapter summarizes the findings of the study on recent accelerated second-degree baccalaureate graduates’ perceptions of educational preparation. Demographic data for the sample are described followed by results of the reliability analysis of the SNPEP for this sample. Presentation of the results related to each of the three research questions is also provided. The Statistical Package for the Social Sciences (SPSS® 12.0 Inc., 2003) software was used to analyze the data.

Sample Description

During the time period of May 21, 2010 to June 11, 2010, fifty-four (n=54) recent accelerated second-degree baccalaureate graduates, out of an estimated 300 invited participants, completed the Survey of Nurses’ Perceptions of Educational Preparation (SNPEP). Every participant whose survey data are included was a graduate of an accelerated second-degree baccalaureate program in either Idaho or Nevada, graduated no less than one year and no longer than four years from the date of the study.

The majority of participants identified themselves as Caucasian females between the ages of thirty and thirty-seven. The majority of survey participants graduated from an accelerated baccalaureate program in Nevada, during the years of 2007 or 2008. One third of the participants worked in critical care for their first nursing position, and the majority currently work full time as a registered nurse. Half of the survey participants’ previous bachelor degree was in the science field. The complete breakdown of demographic variables for all 54 recent accelerated second-degree baccalaureate
graduates can be found in Appendix A. The complete break down of demographic variables according to program location can be found in Appendix B.

**Reliability Analysis for the SNPEP**

The Survey of Nurses’ Perceptions of Educational Preparation (SNPEP) survey consisted of 8 demographic questions and 21 questions using a 4 point Likert-type scale ranging from strongly agree to strongly disagree. Internal consistency reliability analyses (Cronbach’s Alpha) was conducted for the current sample on the 21 Likert-type scale questions of the SNPEP. The Cronbach’s Alpha coefficient was found to be 0.653, which is considered low since a minimum of 0.70 is preferred (Salkind, 2004). Cronbach’s Alpha coefficient was then computed for the overall survey with a particular survey item deleted. By deleting the survey item “prepared me more for the NCLEX-RN exam than for practice”, the coefficient was calculated to be 0.715. By deleting the survey item “should have allowed more time to practice sterile procedures”, the coefficient was calculated to be 0.712. Finally, by deleting the survey item “should have allowed more time to perform medication administration”, the coefficient was calculated to be 0.694.

**Results**

The following are the results of the statistical analyses pertaining to each research question. It should be noted that seven individuals left one of the survey items blank. There was no pattern of which item each person left blank among the participants. The one missing value for each of the seven participants was replaced with the median score of all other values of that variable. The use of the median is an acceptable practice when one does not want to distort the average (Salkind, 2004).
**Research Question 1**

“How well do recent graduates perceive their accelerated nursing program prepared them for practice?”

This question was addressed by examining the percent of responses in agreement and those in disagreement to individual survey items in the SNPEP. Appendix C shows each individual survey item followed by the percent of respondents in agreement with the survey item. Appendix D shows each individual survey item followed by the percent of respondents in agreement with the survey item broken down by program location. A participant was considered to be in agreement with an item if they answered slightly agree, agree, or strongly agree. Looking at the table in Appendix C, it can be seen that the majority of participants indicated that their accelerated nursing program prepared them for their first job, provided them with management skills, leadership skills, communication skills, documentation skills, decision making skills, organizational skills, provided instructors who acted as role models, encouraged independent problem solving, utilized multiple evaluation strategies, and helped them to feel confident in their ability.

The sample was split when it came to their accelerated nursing program teaching them critical thinking skills. Only 48% of participants agreed with this statement. The sample was also split when it came to the statement that their accelerated nursing program prepared them more for the NCLEX-RN exam than for practice. Approximately 57% agreed with this statement.

**Research Question 2**

“Do recent graduates perceive their accelerated nursing program prepared them for the National Council Licensure Examination for Registered Nurses (NCLEX-RN)?”
The final item of the SNPEP survey asked the participants how much they agree or disagree that their initial educational program in nursing prepared them for the NCLEX-RN exam. Of the total sample (n=54), 93% (n=50) slightly agreed, agreed, or strongly agreed, while 7 (n=4) disagreed or strongly disagreed.

Research Question 3

“What is the relationship between selected demographic variables and recent graduates’ perceptions of how well their accelerated nursing program prepared them for practice?”

Due to the small sample size, it was not possible to examine the relationships between demographic variables and scores on the SNPEP, except for age and program attended. A one-way analysis of variance was calculated to determine whether the participants’ age was related to their perception of educational preparation. Age was collapsed into three sub groups. The difference between the three age sub groups was not found to be statistically significant with $F_{(2,50)} = .525, p = .595$.

A one-way analysis of variance was conducted to compare the perception of educational preparation between participants in the two programs. This was designed to examine the relationship between the program the participants attended and their perception of educational preparation. The difference in perception of educational preparation between participants in the two programs was found to be statistically significant with $F_{(1,52)} = 4.747, p = .034$. 
CHAPTER 6
DISCUSSION, LIMITATIONS, and RECOMMENDATIONS

This chapter includes discussion and interpretation of the study findings and the study limitations. Also included are recommendations for the accelerated nursing programs and further study. This discussion is organized according to sample description and study questions for ease of presentation.

Discussion and Interpretation

Sample Description

The majority of the sample of this study consisted of Caucasian females with an average age of 33.68 years old (see Appendix A). For the most part, these results agree with the findings of Siler, DeBasio, and Roberts (2008)’s descriptive study of 993 accelerated second-degree and Seldomridge and Dibartolo (2005)’s descriptive study of 71 accelerated student records from 1998-2003, that found that the typical enrolled student in an accelerated second-degree nursing program is Caucasian female, and under the age of 30 years old. Although the average age of the participants in this study’s sample was slightly older than 30 years, it should be noted that the SNPEP asked the participants for their current age, and not the age that they were while in their accelerated nursing program. Since participants could have graduated from their accelerated program up to 5 years ago, it is possible the mean age of this group of participants could have been closer to 30 years of age at the time they were attending their nursing program.

This study also found that the majority of survey participants’ previous bachelors degree was in science, followed by social science, an “other” field, and finally business. These results coincide with the results found by Seldomridge & Diabartolo (2005)’s
study that found that the most common bachelor degrees held by accelerated second-degree students were biology and psychology. Wu and Connelly (1992)’s study of 10 accelerated second-degree baccalaureate programs also found that the most common degrees held by accelerated second-degree nursing students were biology and psychology.

**Research Question 1**

The first research question for this study was: “How well do recent graduates perceive their accelerated nursing program prepared them for practice?

Overall, the participants in this study indicated that their accelerated nursing program prepared them for practice. There were two survey items out of a total of 21 items that survey participants were undecided on. The first survey item that participants were split on was pharmacology content. Forty-eight percent of participants indicated that their program did not provide enough pharmacology content. When this survey was given to recent RN graduates, Candela & Bowles (2008) found that 51% of their 352 respondents indicated that they did not receive enough preparation in pharmacology. Although their sample contained traditional RN graduates and not accelerated RN graduates, the fact that both studies found similar response rates is significant. It may be possible that because the accelerated program is shorter than a traditional nursing program, that perhaps the pharmacology content received is less, however literature states that accelerated students have equally as many classroom hours as traditional nursing students, however the processing and reflecting time that accelerated students have is shortened (Hegge & Hallman, 2008). The second survey item that participants were split on was critical thinking skills. Forty-eight percent of participants indicated that their
accelerated nursing program taught them critical thinking skills. This finding differs from Ouellet et al. (2008)’s findings. When Ouellet et al. (2008) completed their evaluation study of 2 classes of 42 accelerated nursing graduates, they found that their graduates perceived themselves to be well prepared in this area. Since this current study was conducted using participants from two different programs, it is unknown whether this problem is confined to these two programs, or if it is also an issue in other parts of the country.

When asked if their accelerated nursing program prepared them more for the NCLEX-RN than for practice, 57% of participants indicated agreement with this statement. Although this issue has not been looked at in any of the relevant literature on second-degree accelerated baccalaureate graduates, it has been looked at with traditional baccalaureate programs. Candela & Bowles (2008) found that 51% of their participants also indicated that their nursing program better prepared them for the NCLEX-RN exam than for practice. Literature suggests that accelerated nursing programs should focus on more clinical hours and mastery of task-oriented skills, since accelerated students excel in NCLEX and didactic content (Penprase & Koczara, 2009).

Another area that is consistent with the literature is the key role that faculty members play in the second-degree accelerated baccalaureate student. Ninety-one percent of the participants in this study felt that their accelerated nursing program provided them with instructors who acted as role models. Cangelosi (2007)’s hermeneutic phenomenological study saw the common theme of “Clearing a Path Toward Possibilities,” which described the vital role that faculty members play in the success of accelerated second-degree students (p.93). Since overall the participants in
this study indicated that their program did in fact prepare them for practice, it is possible that the instructors in these programs contributed a great deal to this.

**Research Question 2**

The second research question was “do recent graduates perceive their accelerated nursing program prepared them for the National Council Licensure Examination for Registered Nurses (NCLEX-RN)?”

In this study, 93% of participants indicated that their accelerated nursing program did indeed prepare them for the NCLEX-RN exam. This finding is consistent with the relevant literature. Ouellet et al. (2008)’s evaluation study found that 100% of the accelerated baccalaureate graduates passed the Canadian Nurse Registration Exam (CNRE), the Canadian version of the NCLEX-RN, on the first try. Although, this study did not ask the graduate whether or not he/she passed the NCLEX-RN on the first try, it is thought that if participants answered positively to the survey item, then it is more likely that they were successful on the exam on their first try.

**Research Question 3**

The third research question was “What is the relationship between selected demographic variables and recent graduates’ perceptions of how well their accelerated nursing program prepared them for practice?”

The difference in perception of educational preparation between participants in the two programs was found to be statistically significant. However, due to the uneven number of participants in each sample group (n=18 and n=36 respectively), the significance of these results is questionable.
Appendix D shows the recent accelerated second-degree baccalaureate graduate responses to the Survey of Nurses’ Perceptions of Educational Preparation (SNPEP) broken down by program location. Participants’ responses to four of the survey items differ greatly according to program location. Fifty-five percent of Idaho graduates indicated that their program should have required more clinical hours, while only 17% of Nevada graduates were in agreement with this survey item. Twenty-eight percent of Idaho graduates compared to 58% of Nevada graduates indicated that their nursing program taught them critical thinking skills. Seventy-two percent of Idaho graduates compared to 53% of Nevada graduates indicated that their program should have spent more time on physical assessment. Fifty-six percent of Idaho graduates compared to 94% of Nevada graduates indicated that their program used multiple evaluation strategies to test their knowledge. It is possible that the responses to these four survey items account for the significant finding between the two programs.

No comparative studies examining program location and perception of educational preparation were found in the literature, however the two programs used for research in this study differ slightly from each other so this may contribute to the significant finding. Both programs are accredited by the Commission for Collegiate Nursing Education (CCNE) and both programs accept 30 individuals each year into their program (Idaho State University, 2010; Nevada State College, 2010). The curriculum of both programs is very similar in nature. The accelerated program in Nevada is twelve months in length, starting in August and ending in August of the following year (Nevada State College, 2010). The program in Idaho, however, is four semesters in length, staring in January and ending in May the following year (Idaho State University, 2010). The
clinical instructors to student ratios are also different in each program. For the program in Idaho, the clinical instructor to student ratio is 1 to 10 while in the program in Nevada has a ratio of 1 to 8 (Idaho State University, 2010; Nevada State College, 2010).

In this study, it was determined an individual’s age was not related to their perception of educational preparation. No comparative studies examining individual’s age and perception of educational preparation were found in the literature. This non-significant finding could be related to the small sample size, or it could also mean that both accelerated second-degree baccalaureate programs have been able to key in on the principles of adult learning. Because all of the individuals in this study had gone through the college experience previously by obtaining a baccalaureate degree prior to obtaining their degree in nursing, these individuals, ranging from age 24 to 51, are true adult learners. It is thought that perhaps the accelerated nursing programs in this study, took into account these individuals’ wide range of backgrounds, their tendency to be self-directed learners, their need to understand why specific things are being taught, and their need for problem-centered rather than content-oriented learning (Knowles, 1987).

Limitations

Sample size (n=54) was a major limitation in this study. As a result, several comparisons between demographic variables and perception of educational preparation could not be completed. A second limitation in this study was geographical constraint. The findings of this study cannot be generalized beyond the graduates of the two accelerated nursing programs surveyed.

An additional limitation of this study was the survey questionnaire. The survey itself had a Cronbach’s Alpha coefficient of 0.653, indicative of low internal consistency.
By removing the survey item “prepared me more the NCLEX-RN exam than for practice”, the coefficient was calculated to be 0.715. By deleting the survey item “should have allowed more time to practice sterile procedures”, the coefficient was calculated to be 0.712. Finally, by deleting the survey item “should have allowed more time to practice medication administration”, the coefficient was calculated to be 0.694. It is thought by the researcher that perhaps the survey items that contained the words “should have” or “more than” may have confused some participants and may have been more difficult for those whose native language was not English.

Recommendations

Recommendations for the Accelerated Second-Degree Baccalaureate Nursing Programs Included in this Study

Accelerated second-degree baccalaureate nursing students have different needs than a traditional nursing student. These individuals choose a second degree in nursing for a variety of reasons (Siler, et al., 2008) and experience higher levels of stress while working on their degree (Youssef & Goodrich, 1996; Ouellet, et al., 2008). The challenge for accelerated nursing programs is to fit all the required educational requirements into a short amount of time. Accelerated nursing graduates feel that more pharmacology content should be included in their curriculum and that critical thinking skills need to be developed. Slightly greater than half of the participants indicated that their accelerated nursing program prepared them more for the NCLEX-RN exam than for practice. This is a complicated issue since nursing program performance is judged by the amount of graduates that pass the NCLEX-RN on the first time. In addition to NCLEX type multiple-choice questions, alternative measures such as case studies and written
papers should be utilized to assess the nursing student’s knowledge (Candela & Bowles, 2008).

The common theme found in the literature and this present study is the significant role that nursing faculty play in these students’ success in the accelerated nursing program (Cangelosi, 2007). Over 90% of survey participants indicated that their nursing program provided them with instructors who acted as role models. The extent to which this contributed to the participants’ overall feeling of preparedness is unknown, but is thought to be great (Cangelosi, 2007).

**Recommendations for Further Study**

Overall, research related to accelerated, second-degree programs and the students that enroll in these programs has been minimal (Cangelosi & Whitt, 2005). The relevant research examining accelerated second-degree students’ perception of preparedness is scant. This study should be repeated with a larger sample size. This study should also encompass various geographical locations, instead of being localized to one region. It is also recommended that the survey instrument be altered in vocabulary to enhance the reliability of the tool and lead to less confusion for participants whose native language is not English.


Knowles, M.S.  (1968). Andragogy, not pedagogy. Adult Leadership, 16(10), 350-352, 386


APPENDIX A

DEMOGRAPHIC VARIABLES FOR 54 RECENT ACCELERATED SECOND-DEGREE BACCALAUREATE GRADUATES
Demographic Variables for 54 Recent Accelerated Second-Degree Baccalaureate Graduates

<table>
<thead>
<tr>
<th>Variable</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
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</tr>
<tr>
<td>Female</td>
<td>82</td>
</tr>
<tr>
<td>Male</td>
<td>18</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>24 – 29</td>
<td>34</td>
</tr>
<tr>
<td>30 – 37</td>
<td>43</td>
</tr>
<tr>
<td>40 – 51</td>
<td>23</td>
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<td><strong>Ethnicity</strong></td>
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<td>Caucasian</td>
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</tr>
<tr>
<td>African-American</td>
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</tr>
<tr>
<td>Asian</td>
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</tr>
<tr>
<td>Latino</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
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</tr>
<tr>
<td><strong>First Nursing Position Area</strong></td>
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</tr>
<tr>
<td>Medical-Surgical</td>
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</tr>
<tr>
<td>Critical Care</td>
<td>32</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>4</td>
</tr>
<tr>
<td>Maternal Child</td>
<td>7</td>
</tr>
<tr>
<td>Other Inpatient Area</td>
<td>21</td>
</tr>
<tr>
<td>Outpatient/Community</td>
<td>8</td>
</tr>
<tr>
<td><strong>Hours Per Week as RN</strong></td>
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</tr>
<tr>
<td>Full Time</td>
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</tr>
<tr>
<td>Part Time</td>
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</tr>
<tr>
<td>Not working as RN</td>
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<tr>
<td><strong>Area of Previous Bachelor’s Degree</strong></td>
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<td>Science</td>
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<tr>
<td>Social Science</td>
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<tr>
<td>Business</td>
<td>11</td>
</tr>
<tr>
<td>Other</td>
<td>19</td>
</tr>
<tr>
<td><strong>Year Received Nursing License</strong></td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>24</td>
</tr>
<tr>
<td>2008</td>
<td>28</td>
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<tr>
<td>2007</td>
<td>28</td>
</tr>
<tr>
<td>2006</td>
<td>20</td>
</tr>
<tr>
<td><strong>Program Location</strong></td>
<td></td>
</tr>
<tr>
<td>Nevada</td>
<td>67</td>
</tr>
<tr>
<td>Idaho</td>
<td>33</td>
</tr>
</tbody>
</table>
APPENDIX B

DEMOGRAPHIC VARIABLES FOR 54 RECENT ACCELERATED SECOND-DEGREE BACCALAUREATE GRADUATES BROKEN DOWN BY PROGRAM LOCATION
### Demographic Variables for 54 Recent Accelerated Second-Degree Baccalaureate Graduates Broken Down by Program Location

<table>
<thead>
<tr>
<th>Variable</th>
<th>Idaho (%)</th>
<th>Nevada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
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<td></td>
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<tr>
<td>Female</td>
<td>67</td>
<td>89</td>
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<tr>
<td>Male</td>
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<td>11</td>
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<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 – 29</td>
<td>24</td>
<td>39</td>
</tr>
<tr>
<td>30 – 37</td>
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<td>44</td>
</tr>
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<td>40 – 51</td>
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<td>17</td>
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<tr>
<td><strong>Ethnicity</strong></td>
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<td></td>
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<tr>
<td>Caucasian</td>
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<td>67</td>
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<td>African-American</td>
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<tr>
<td>Asian</td>
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<td>22</td>
</tr>
<tr>
<td>Latino</td>
<td>6</td>
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</tr>
<tr>
<td>Other</td>
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<td><strong>First Nursing Position</strong></td>
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<tr>
<td>Medical-Surgical</td>
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<td>Critical Care</td>
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<td>Pediatrics</td>
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<td>Outpatient/Community</td>
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<td><strong>Hours Per Week as RN</strong></td>
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<td></td>
</tr>
<tr>
<td>Full Time</td>
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<td>84</td>
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<td>Part Time</td>
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<td>Not Working as RN</td>
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<td>5</td>
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<tr>
<td><strong>Area of Previous Bachelor’s Degree</strong></td>
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<td></td>
</tr>
<tr>
<td>Science</td>
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<td>56</td>
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<td>Social Science</td>
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<td>Business</td>
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<td>5</td>
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<tr>
<td>Other</td>
<td>22</td>
<td>17</td>
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<tr>
<td><strong>Year Received Nursing License</strong></td>
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<tr>
<td>2009</td>
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<td>2008</td>
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<td>2007</td>
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<td>31</td>
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<tr>
<td>2006</td>
<td>22</td>
<td>19</td>
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</table>
APPENDIX C

RECENT ACCELERATED SECOND-DEGREE BACCALAURATE GRADUATE RESPONSES TO THE SURVEY OF NURSES’ PERCEPTIONS OF EDUCATIONAL PREPARATION (SNPEP)
<table>
<thead>
<tr>
<th>Survey Item</th>
<th>% in Agreement</th>
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</thead>
<tbody>
<tr>
<td>Preparation for first job</td>
<td>95</td>
</tr>
<tr>
<td>Provided management skills</td>
<td>91</td>
</tr>
<tr>
<td>Did not provide leadership skills</td>
<td>15</td>
</tr>
<tr>
<td>Should have required more clinical hours</td>
<td>30</td>
</tr>
<tr>
<td>Provided communication skills</td>
<td>93</td>
</tr>
<tr>
<td>Did not provide enough pharmacology content</td>
<td>48</td>
</tr>
<tr>
<td>Access and input electronic patient data</td>
<td>74</td>
</tr>
<tr>
<td>More time to perform medication administration</td>
<td>26</td>
</tr>
<tr>
<td>Provided documentation skills</td>
<td>89</td>
</tr>
<tr>
<td>Did not provide decision-making skills</td>
<td>17</td>
</tr>
<tr>
<td>Taught critical thinking</td>
<td>48</td>
</tr>
<tr>
<td>Did not provide organizational skills</td>
<td>17</td>
</tr>
<tr>
<td>More sterile procedure practice</td>
<td>44</td>
</tr>
<tr>
<td>More time on physical assessment</td>
<td>59</td>
</tr>
<tr>
<td>Provided instructors who acted as role models</td>
<td>91</td>
</tr>
<tr>
<td>Prepared more for NCLEX-RN than for practice</td>
<td>57</td>
</tr>
<tr>
<td>Encouraged independent problem solving</td>
<td>93</td>
</tr>
<tr>
<td>Multiple evaluation strategies</td>
<td>94</td>
</tr>
<tr>
<td>Did not provide information on finding information in various sources</td>
<td>8</td>
</tr>
<tr>
<td>Helped to feel confident in ability</td>
<td>87</td>
</tr>
<tr>
<td>Prepared for the NCLEX-RN exam</td>
<td>93</td>
</tr>
</tbody>
</table>
APPENDIX D

RECENT ACCELERATED SECOND-DEGREE BACCALAUREATE GRADUATE RESPONSES TO THE SURVEY OF NURSES’ PERCEPTIONS OF EDUCATIONAL PREPARATION (SNPEP) BROKEN DOWN BY PROGRAM LOCATION
### Recent Accelerated Second-Degree Baccalaureate Graduate Responses to the Survey of Nurses’ Perceptions of Educational Preparation (SNPEP)

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>% in Agreement</th>
<th>Idaho</th>
<th>Nevada</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparation for first job</td>
<td>94</td>
<td>94</td>
<td></td>
</tr>
<tr>
<td>Provided management skills</td>
<td>94</td>
<td>89</td>
<td></td>
</tr>
<tr>
<td>Did not provide leadership skills</td>
<td>11</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Should have required more clinical hours</td>
<td>55</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Provided communication skills</td>
<td>100</td>
<td>89</td>
<td></td>
</tr>
<tr>
<td>Did not provide enough pharmacology content</td>
<td>55</td>
<td>44</td>
<td></td>
</tr>
<tr>
<td>Access and input electronic patient data</td>
<td>83</td>
<td>89</td>
<td></td>
</tr>
<tr>
<td>More time to perform medication administration</td>
<td>67</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>Provided documentation skills</td>
<td>89</td>
<td>89</td>
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<tr>
<td>Did not provide decision-making skills</td>
<td>11</td>
<td>19</td>
<td></td>
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<tr>
<td>Taught critical thinking</td>
<td>28</td>
<td>58</td>
<td></td>
</tr>
<tr>
<td>Did not provide organizational skills</td>
<td>0</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>More sterile procedure practice</td>
<td>50</td>
<td>42</td>
<td></td>
</tr>
<tr>
<td>More time on physical assessment</td>
<td>72</td>
<td>53</td>
<td></td>
</tr>
<tr>
<td>Provided instructors who acted as role models</td>
<td>94</td>
<td>89</td>
<td></td>
</tr>
<tr>
<td>Prepared more for NCLEX-RN than for practice</td>
<td>67</td>
<td>53</td>
<td></td>
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<tr>
<td>Encouraged independent problem solving</td>
<td>89</td>
<td>75</td>
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</tr>
<tr>
<td>Multiple evaluation strategies</td>
<td>56</td>
<td>94</td>
<td></td>
</tr>
<tr>
<td>Did not provide information on finding information in various sources</td>
<td>0</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>Helped to feel confident in ability</td>
<td>89</td>
<td>86</td>
<td></td>
</tr>
<tr>
<td>Prepared for the NCLEX-RN exam</td>
<td>94</td>
<td>92</td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX E

APPROVAL LETTER
Biomedical IRB – Expedited Review Approval Notice

NOTICE TO ALL RESEARCHERS:
Please be aware that a protocol violation (e.g., failure to submit a modification for any change) of an IRB approved protocol may result in mandatory remedial education, additional audits, re-consenting subjects, researcher probation suspension of any research protocol at issue, suspension of additional existing research protocols, invalidation of all research conducted under the research protocol at issue, and further appropriate consequences as determined by the IRB and the Institutional Officer.

DATE: April 20, 2010

TO: Dr. Cheryl Bowles, Nursing

FROM: Office of Research Integrity - Human Subjects

RE: Notification of IRB Action by Dr. Charles Rasmussen, Co-Chair
Protocol Title: Recent Accelerated Second-Degree Baccalaureate Graduates’ Perceptions of Educational Preparation
Protocol #: 1003-3407

This memorandum is notification that the project referenced above has been reviewed by the UNLV Biomedical Institutional Review Board (IRB) as indicated in regulatory statutes 45 CFR 46. The protocol has been reviewed and approved.

The protocol is approved for a period of one year from the date of IRB approval. The expiration date of this protocol is April 15, 2011. Work on the project may begin as soon as you receive written notification from the Office of Research Integrity - Human Subjects (ORI – Human Subjects).

PLEASE NOTE:
Attached to this approval notice is the official Informed Consent/Assent (IC/A) Form for this study. The IC/A contains an official approval stamp. Only copies of this official IC/A form may be used when obtaining consent. Please keep the original for your records.

Should there be any change to the protocol, it will be necessary to submit a Modification Form through ORI – Human Subjects. No changes may be made to the existing protocol until modifications have been approved by the IRB.

Should the use of human subjects described in this protocol continue beyond April 15, 2011 it would be necessary to submit a Continuing Review Request Form 60 days before the expiration date.

If you have questions or require any assistance, please contact the Office of Research Integrity – Human Subjects at IRB@unlv.edu or call 895-2794.

Office of Research Integrity – Human Subjects
4505 Maryland Parkway • Box 451047 • Las Vegas, Nevada 89154-1047
INFORMED CONSENT
Department of Nursing

TITLE OF STUDY: Recent Accelerated Second-Degree Baccalaureate Graduates’ Perceptions of Educational Preparation

INVESTIGATOR(S): Susan Candelaria RN and Dr. Cheryl Bowles EdD, RN

CONTACT PHONE NUMBER: 702-895-3082

Dear Accelerated Second-Degree Baccalaureate Graduate:

You are invited to participate in the research study entitled: Recent Accelerated Second-Degree Baccalaureate Graduates’ Perceptions of Educational Preparation

Purpose of the Study
The purpose of this study is to examine the perceptions of educational preparation of recent graduates of accelerated second-degree baccalaureate nursing programs.

Participants
You are being asked to participate in the study because you have graduated from an accelerated second-degree baccalaureate program at least one year ago but no longer than four years ago and you are between the age of 21 and 65 years. Your participation in the study will be valuable in learning more about this important issue. In addition, the information obtained from this study may be used by accelerated baccalaureate nursing programs to assess their current curriculum.

Procedures
If you volunteer to participate in this study, you will be asked to do the following:
1. Access the internet address provided below and complete a 21 item questionnaire entitled, “Survey of Nurses’ Perceptions of Educational Preparation,” which should take approximately 15 minutes.
2. Click the submit button at the end of the survey.

Benefits of Participation
You may not experience any direct benefits from this study except the satisfaction of participating in research. However, the information that you provide may help accelerated program nursing faculty to have a better understanding of how the educational preparation they provide is affecting their students once they have graduated and are working out in the field.

Risks of Participation
There are risks involved in all research studies. This study offers only very minimal risks. At most, you may experience slight discomfort with some of the survey questions.
TITLE OF STUDY: Recent Accelerated Second-Degree Baccalaureate Graduates' Perceptions of Educational Preparation

Cost /Compensation
There will not be financial cost to you to participate in this study. The study will take approximately 15 minutes of your time. You will not be compensated for your participation.

Contact Information
If you have any questions or concerns about the study, you may contact Dr. Cheryl Bowles or Susan Candelaria at 702-895-3360. For questions regarding the rights of research subjects, any complaints or comments regarding the manner in which the study is being conducted, you may contact the UNLV Office for the Protection of Research Subjects at 702-895-2794.

Voluntary Participation
Your participation in this study is voluntary. You may refuse to participate in this study or in any part of this study. You may withdraw at any time (by clicking the X button at the top right of the survey screen) without prejudice to your relations with the university. You may also choose not to answer any of the survey questions. You are encouraged to ask questions about this study at the beginning or any time during the research study.

Confidentiality
All information gathered in this study is anonymous. Your completed survey is not linked to you in any way. Only the researchers will have access to the survey data. All data will be reported as grouped data. All data will be stored on a password-protected computer in a locked facility at UNLV for 3 years after completion of the study. After the storage time, the information gathered will be destroyed.

Participant Consent:
By clicking on the link below and completing the survey, you indicate that you have read the above information, agree to participate in this study and you are between the age of 21 and 65 years. You understand you have the ability to ask questions about this study before, during or after completing the survey. A copy of this informed consent may be printed for your records.

Please click on the link below to begin the survey.

Thank you for your participation.
APPENDIX G
DATA COLLECTION INSTRUMENT
SURVEY OF NURSES’ PERCEPTIONS OF EDUCATIONAL PREPARATION (SNPEP)

Part 1 – Demographics

For each item, please select the most appropriate response:

1. What is your gender?
   Male          Female

2. What is your age?
   ______________

3. What is your ethnicity?
   Caucasian       African-American       Asian       Latino       Other

4. What area was your first nursing position in?
   Medical-Surgical   Critical Care   Pediatrics   Maternal Child
   Other Inpatient Area   Outpatient or Community

5. How much time per week do you spend working as an RN?
   Full-time          Part-time          Not working as an RN

6. What field was your previous bachelor’s degree in?
   Science          Social Science   Math          Business
   Engineering      Other

7. What year did you receive your nursing license?
   ______________

8. What state was your accelerated BSN program located in?
   Idaho          Nevada
Part 2 – Educational Preparation

For each item, please select the most appropriate response.

Response Options:

1 = strongly disagree  4 = slightly agree
2 = slightly disagree  5 = agree
3 = disagree          6 = strongly agree

As a new graduate in my first job as an RN, I felt that my initial educational program in nursing:

1. Prepared me for my first job as an RN.
   1 3 3 4 5 6

2. Provided me with management skills.
   1 2 3 4 5 6

3. Did not provide me with leadership skills.
   1 2 3 4 5 6

4. Should have required more hours in the clinical setting.
   1 2 3 4 5 6

5. Provided me with communication skills.
   1 2 3 4 5 6

6. Did not provide me enough content on pharmacology.
   1 2 3 4 5 6

7. Taught me how to access and input patient data electronically.
   1 2 3 4 5 6

8. Should have allowed more time to perform medication administration.
   1 2 3 4 5 6

9. Provided me with skills to document patient progress.
   1 2 3 4 5 6

10. Did not provide me with decision-making skills.
    1 2 3 4 5 6
Part 2 – Educational Preparation

For each item, please select the most appropriate response.

Response Options:

1 = strongly disagree  4 = slightly agree
2 = slightly disagree   5 = agree
3 = disagree           6 = strongly agree

As a new graduate in my first job as an RN, I felt that my initial educational program in nursing:

11. Taught me to think critically.

   1  2  3  4  5  6

12. Did not provide me with organizational skills.

   1  2  3  4  5  6

13. Should have allowed more time to practice procedures.

   1  2  3  4  5  6

14. Needed to spend more time on physical assessment.

   1  2  3  4  5  6

15. Provided instructors that acted as nursing role models.

   1  2  3  4  5  6

16. Prepared me more for the NCLEX-RN exam than for practice.

   1  2  3  4  5  6

17. Encouraged students to solve problems on their own.

   1  2  3  4  5  6

18. Utilized multiple strategies to evaluate my knowledge.

   1  2  3  4  5  6

19. Did not provide information on how to find information in different sources.

   1  2  3  4  5  6

20. Helped me to feel confident in my ability.

   1  2  3  4  5  6


   1  2  3  4  5  6

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APPENDIX H

EMAILS REQUESTING PARTICIPATION IN SURVEY
Subject: Your Participation is Requested

Greetings Recent Accelerated BSN Graduate:

My name is Susan Candelaria and I am a graduate student in the nursing education program at the University of Nevada, Las Vegas. My advisor, Dr. Cheryl Bowles, and I are currently conducting a research study which is my master’s thesis entitled “Recent Accelerated Second-Degree Baccalaureate Graduates’ Perceptions of Education Preparation.” I am requesting your participation in this study because you have recently (1 to 4 years ago) graduated from an accelerated BSN program.

The link below will take you first to a page, which is the informed consent and provides you with information about the study. A link on the bottom of the informed consent will take you to an online survey entitled, “Survey of Nurses’ Perceptions of Educational Preparation,” where you be asked questions about your experiences in an accelerated BSN program in relation to your first nursing position. The anonymous survey will take about 15 minutes to complete and is completely voluntary. The survey will be available online until: Friday, June 11, 2010.

Your participation in this study will be valuable in learning more about this important issue. In addition, the information obtained from this study may be used by accelerated BSN programs to assess their current curriculum.

Please click on the link below to be taken to the survey information/informed consent page.

http://nursing.unlv.edu/pdf/rn_education.pdf

Thank you in advance for your time!

Susan Candelaria RN
Cheryl Bowles EdD, RN, CNE
Subject: REMINDER Your Participation is Requested

Greetings Recent Accelerated BSN Graduate:

If you have already completed the “Survey of Nurses’ Perceptions of Educational Preparation,” thank you!

If you have not completed the survey, but would still like to participate, you have until: Friday, June 11, 2010.

This anonymous survey will take about 15 minutes to complete and is completely voluntary. Your participation in this study will be valuable in learning more about this important issue. In addition, the information obtained from this study may be used by accelerated BSN programs to assess their current curriculum.

Please click on the link below to be taken to the survey information/informed consent page.

http://nursing.unlv.edu/pdf/rn_education.pdf

Thank you in advance for your time!

Susan Candelaria RN
Cheryl Bowles, EdD, RN, CNE
VITA

Graduate College
University of Nevada, Las Vegas

Susan Candelaria

Degrees:
   Bachelor of Science, Kinesiology, 2002
   University of Illinois, Urbana-Champaign

   Bachelor of Science, Nursing, 2005
   Nevada State College

Thesis Title: Recent Accelerated Second-Degree Baccalaureate Graduates’ Perceptions of Educational Preparation

Thesis Examination Committee:
   Chairperson, Cheryl Bowles, EdD, RN, CNE
   Committee Member, Lori Candela, EdD, RN, APRN, BC, CNE
   Committee Member, Susan Kowalski, PhD, RN, CNE
   Graduate Faculty Representative, Jane McCarthy, EdD