**RPN-RN Bridging Programs**

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NURS 3552-5

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**Student statement:** By submitting this reflection, I am acknowledging that it is my own work. Comments are my own and have not been used in any previous work (inside or outside the institution). I have followed the rules outlined by my instructor and am compliant with the University of Windsor, St. Clair College, and/or Lambton College Academic Integrity Policy.

Student Name: Reem Boudali Student Number: 110007510 Date: February 20

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| **Category** | **Satisfactory** | **Unsatisfactory** | **Student Reflection (must be typed)** |
| **Look Back**  **(L)** | * Identifies **ONE** relevant clinical event/experience/ learning opportunity that was significant/impactful in one or two sentences. * Describes this **ONE** clinical event so that the reader can gain an understanding of what occurred. * Provides opinion/idea/perspective and feelings related to own. role/actions/performance in this clinical experience. | * Does not provide a clear and succinct description of ONE clinical event, experience or learning opportunity. * Does not provide own feelings related to the clinical experience. * Identified event, experience, or learning opportunity is not relevant to clinical practice. | On February 17, I was paired up with a very talented and knowledgeable nurse (for the purposes of this paper and privacy, I will refer to him as M). M allowed to do a wide array of skills on his patients while walking me through every step, so I felt supported. He also asked me critical thinking questions (e.g., what labs to look up for certain treatments) to ensure I was both thinking and learning). I was surprised later when M told me he was only an RPN because his patient load (large load and unstable patients) did not seem to fit his scope of practice.  I was also surprised by this because M was extremely intelligent (not to say RPNs are not); he predicted the required treatments of my patient who was down for a scope based off her labs and history. Not only did his prediction become true, but he had also found multiple errors in the physician’s orders/treatments such as wrong doses for medications or ordering meds that should have been held with the patient’s condition. When inquiring why M had not become an RN or even a physician, he explained to me that he had encountered many barriers with school applications. The story angered me quite frankly because it was quite obvious that he should be admitted to such a program. |
| **Examine Experience**  **(E)** | * Selects a scholarly article that relates to this clinical experience (may use a CNO standard or BPG in addition to article, but not in lieu of an article). * Briefly summarizes key ideas/findings of the article. * Compares/contrasts own ideas/thoughts with those expressed by the author(s) with explanation. | * Does not incorporate a scholarly article. * Summary of the key ideas/findings of the article are not included.      * No explanation of the author’s ideas/thoughts compared/contrasted with own. | The journal I found is a systematic review of bridging programs. The purpose of the review was to analyze the transition process from RPN to RN. In summary, the researchers found that bridging programs generally have many barriers for RPNs (Suva et al., 2015). One issue was that bridging programs were often unclear with the level of difficulty; these programs are differently from a typical college or university program. Another huge issue was the lack of professional support; many work areas require new RNs to denounce their previous RPN designation in order to work there (Suva et al., 2015). |
| **Appraise**  **and**  **Analyse**  **(A)** | * Discusses at least **two** other people’s ideas/opinions/ perspectives that should be considered related to this clinical event (how might they feel: e.g. client, peer, family, other discipline, etc.).   **\*\***A reflection graded as ***excellent would also include the following:***   * Examines perspectives surrounding this event at the level of nursing in general, and/or society in general (e.g. impact on health care system/nursing profession, political, financial, cultural influences on Canadians). * Identifies how the event/situation challenged own perspective(s) and status quo (usual way of doing things). * Poses questions that should be considered due to their significance to nursing practice. | * No other perspectives are discussed. * Only one other perspective is discussed | For RPNs considering to go back to school for their RN, they make believe their to be many issues. One giant factor to consider is finances. When in school, it can be hard to maintain their jobs as RPNs. However, they may also need to work to be able to afford the schooling (Suva et al., 2015). This creates a stressful situation for the individual as they cannot prioritize one task over the other.  From an employer point-of-view, having an employee want to enrol in a bridging program can be unfavorable (Suva et al., 2015). This is because the employee will have to take time from work to focus on their education. There is also no guarantee that the employee will return to that floor when they graduate again.  In my opinion, I think hospitals and schools could work together to create better solutions. For example, they could create a way for clinical hours and work hours to be combined. They could also make class times flexible to accommodate for the work and personal schedules of students. I think this would make for an easier transition and would benefit all parties: RPN students would be less stressed, schools would get more enrollment, and hospitals would have greater staff retention, as well as more RNs who can take on patients with more complex conditions. |
| **Research**  **and**  **Revision**  **®** | * Provides summary of learning from this clinical experience and from the article findings. * Identifies what they could have done differently in this clinical experience. | * Summary not provided * Does not identify what they could have changed about their own role/actions/performance in this clinical experience. | Overall, I learned that bridging programs present a lot of difficulties for RPNs. From admission to enrolment, these students struggle to balance their current work life as an RPN with transitioning to the scope of an RN. Suva et al. (2015) make a few recommendations to ease this transition: teaching-learning methods, validating RPN experiences, personal reflection, and faculty–student/peer–peer mentorships.  When my nurse was telling me about being waitlisted and the issues he had with enrolment, I really wanted to email the school he was applying to as well as talk to some of our faculty members to give me recommendation. However, upon reflection I realized that while I have good intentions, I could unintentionally harm his application or cause issues. While I do want to help, I think it’s best to leave the situation up to him and hope for the best. |
| **New Perspective**  **(N)** | * Incorporates specific examples of how this new/enhanced knowledge will be implemented into future practice as a nurse. * Identifies a nursing resource(s) that will assist to develop this aspect of practice (e.g. identify a specific nursing textbook etc.). | * No specific examples for implementation into future practice are incorporated. * Does not identify a nursing resource to assist with learning | This knowledge isn’t something that directly affects me; it is more useful for those involved such as the schools offering bridging programs or employers who have RPNs wishing to get their RN designation. These parties can analyze their treatment towards RPNs and make adjustments to better accommodate the students and have the most beneficial outcome. More research needs to be done on what actions can be taken to develop this aspect of practice. |
| **Concept Identification** | * Identifies and describes key curricular concepts that influence the experience (minimum one in 1st year; two in 2nd year; three in 3rd year; minimum four in 4th year)   (critical thinking, know-based practice, evidence informed decision-making, health, teaching & learning, professional practice, communication, leadership, collaboration, safety, person family centered care, and informatics) | * Does not identify and/or describe related curricular concepts that relate to the experience/reflection. | Teaching and Learning – my experience with my assigned nurse  Professional Practice – RPN/RN practice  Collaboration – agencies and schools working together to create a better system |
| **References and APA Format** | * Scholarly article(s) and any additional resources (CNO, BPG) correctly cited in reflection in APA format. * Title page in correct APA format * Reference in correct APA format | * Incorrect APA format throughout reflection * Incorrect APA format on title page * Incorrect APA format for article(s) and/or other sources. | **Student Reference(s) in APA Format:**  Suva, G., Sager, S., Mina, E. S., Sinclair, N., Lloyd, M., Bajnok, I., & Xiao, S. (2015). Systematic Review: Bridging the Gap in RPN-to-RN Transitions. *Journal of nursing scholarship: An official publication of Sigma Theta Tau International Honor Society of Nursing*, *47*(4), 363–370. https://doi.org/10.1111/jnu.12147 |
| **Grade:** | **□ Satisfactory □ Excellent** | **□ Unsatisfactory** |  |
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