Excellence in Scholarship of Teaching and Learning Award

Georgia College & State University
College of Health Sciences
Leslie Moore, PhD, RN, CNE, MBA

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Teaching Philosophy

I believe that higher education is a right for all students. Learning is a joint collaboration between the student and teacher, with both assuming responsibility for learning outcomes. I believe students are responsible for committing to learning to the best of their ability. The learning experience can be challenging and rewarding for both students and educators. My goal for teaching is to ensure that nursing students can critically think, which then prepares them for assuming the nurse role. I also want to teach students to strive for life-long learning through continued education, graduate school, and fulfilling their curiosities. I hope my students can become responsible for their own learning. Finally, I hope my students can problem solve by using available resources, advocating for their patients, and searching for answers.

I believe that a learning environment should be conducive to learning. Instructional design is a critical element to teaching and learning. Each student is unique and has his or her own learning strategies, understanding of nursing, and view of the world. I believe students have a large role in formulating lesson plans, discussion, activities and measuring outcomes. Flexibility and creativity are necessary for the inclusion of all students in the learning process. The learning environment should be supportive for students who are not successful in efforts to investigate why, and to salvage the student's desire for learning. I believe learning outcomes may improve through a partnership for designing their learning experience.

I value the scholarship of teaching and learning. Through reflection, I aim to determine teaching practices that lead to increased student success. Through questioning teaching methods in relation to student outcomes, I can discover the best ways to foster deeper learning. The incorporation of scholarly evidence into my teaching strategies is a superior approach for fostering continued growth of my own teaching abilities and my students' learning. Disseminating my discoveries is the final step in my journey towards superior teaching and adds to the professions of nursing and nursing education.

I believe that teaching has many rewards. Every student encountered becomes an opportunity to change someone's life. To be caring and compassionate about their individual learning creates potential to positively affect students. To respect diversity in the classroom may earn trust within the classroom. I believe each day brings a new challenge and a new opportunity to enjoy working, as each day will be different than the day before. I hope to always love my work and to put students first. I believe that students deserve to be the driving force in higher education. In nursing, many focus on helping so many lives of their patients, but I also believe in preparing others to do so in a caring and knowledgeable manner.

Overview

The School of Nursing (SON) at Georgia College has long been committed to student success, and particularly to helping nursing students prepare for and pass the National Council Licensure Examination (NCLEX-RN), which is the national licensure exam for registered nurses. The 2016 national NCLEX-RN pass rate for first-time United States prepared test-takers was 84.57% as compared to 95.35% for Georgia College SON (NCSBN, 2016). Many nursing schools have implemented a required exit exam during the last semester of nursing school as a way to determine student readiness for the NCLEX-RN, and our SON did so in 2003. Faculty selected the Health Education Systems Incorporated (HESI) exam to be given to all nursing students and set a desired standard of achievement where scores coincided with a predictability model for passing the NCLEX-RN (Elsevier, 2018; Frith, Sewell, & Clark, 2005).

In a desire to increase student success on the Exit Exam requirement and the NCLEX-RN, the SON created a 1-hour NCLEX-RN preparation course in the early 2000s, Integrated Clinical Concepts, and have continued to require the course in the last semester of nursing school. The course was designed to "support, motivate, and test students, so that each student who graduated from the University's nursing program would have an excellent likelihood of passing the NCLEX-RN on the first attempt" (Frith, Sewell, & Clark, 2005). The course has traditionally included elements of comprehensive review of all nursing school content and practice questions for application of the material. This course remains in the curriculum today and has been co-taught by me since 2007 and solely by me since 2016.

Although I teach a variety of nursing courses across all program levels, this course remains my favorite because I believe I make a significant impact on students' success through simple but effective approaches. It presents a perfect lens for practicing the scholarship of teaching and learning within the nursing student community because important questions have surfaced regarding student learning/outcomes in this course

and what teaching activities are impactful in helping students achieve success in the course. The following questions have become my focus in the course: 1) What nonacademic barriers affect student performance on the HESI exit exam? 2) Do my teaching strategies help eliminate those nonacademic barriers? 3) Are there additional teaching strategies that could be implemented in the course to make additional student gains? A discussion of these questions and/or answers follows.

The majority of nursing students' grades are based upon exam scores, the principle method of summative evaluation used in nursing education (Oermann, Yarbrough, Saewart, Ard, & Charasika, 2009). Testing in nursing programs includes both standardized assessments and instructor-created assessments. NCLEX-RN passage rates and regulatory standards are major factors that influence the selection of summative evaluation methods used in nursing programs (Stonecypher, Young, Langford, Symes, & Wilson, 2015). Standardized assessments are used to compare nursing student performance across the nation and to predict success on the national licensure exam. Standardized exams are frequently utilized throughout nursing programs. When used to inform progression or graduation decisions, standardized testing is considered a "high stakes" form of assessment. Literature has shown that scores on standardized nursing exams are positively correlated with first time licensure examination passage rates (Brodersen & Mills, 2014; Schroeder, 2013). Although standardized assessments are used in a high stakes manner, negative findings such as student distress have been noted (Randolph, 2017; Tagher & Robinson, 2016).

The exit exam requirement promotes much anxiety and/or stress among many nursing students (Challenger, 2014). In fact, anxiety has been linked to testing performance, and studies suggest that higher anxiety experienced by nursing students adversely affects their testing performance (Turner & McCarthy, 2015). Students' self-perceptions of test taking skills has been shown to negatively impact scores on the HESI exit exam (Challenger, 2014). The HESI exit exam is considered a "high-stakes" exam because students: 1) are required to pass the exam prior to graduation, and 2) understand its significance in relation to their readiness to pass the NCLEX-RN. Although they have two opportunities to pass the exam during the course, students often admit during conversations with me that they are struggling to deal with the overwhelming tasks of completing a comprehensive review and improving their test-taking skills enough to pass the exam. My experience with these students suggests that, for many students, an unsuccessful score on the exam is not due to a lack of knowledge, but is instead due to nonacademic barriers such as anxiety, stress, lack of prioritization, lack of coping skills, lack of test-taking skills, etc. Although the original Integrated Clinical Concepts course was excellent for reviewing the content, I found that it did not address these additional factors that have been shown to affect student success. Therefore, my research interest

has developed into finding ways to help this group of students overcome these struggles.

In 2016, I became the sole faculty in this Integrated Clinical Concepts course. Based on the literature and my own observations, I immediately changed how I spent the one hour of face-to-face classroom time per week. Rather than have students complete practice questions in groups, I began to address these struggle areas and encouraged them to take practice questions outside of class. My course calendar now includes:

- Using HESI Reports for Studying. HESI specialty exams taken in previous courses provide a report to each student that contains NCLEX-RN-specific information to help students determine their strengths and weaknesses coming into this Integrated Clinical Concepts course. I teach them how to create a study plan from these reports that will conquer their weak areas.

- Test Taking Strategies. Many students have discovered how to master test-taking prior to this course, but others still struggle. I teach them how to prioritize, how to determine what the question is asking, how to eliminate answers, and a framework for addressing patient needs. The ability to talk aloud and let them hear how a nurse would think through the scenario seems to help many students. This class content consistently receives the highest marks on my end of course survey of what teaching strategies were most effective.

- Pharmacology Review. Students also take a Pharmacology HESI exam in this course (the first "official" exam in the course), and students tend to be anxious about this exam. I believe it is because they lack confidence in what they already know related to this topic. I created a quick but comprehensive review that presents the most common "must-know" pharmacology information in a way that can 1) clarify information, and 2) show students that they are further along in their understanding than they believed.

- Psychiatric Nursing Review. Psychiatric nursing tends to be one of the more difficult and low-scoring NCLEX-RN topics for our students and they worry that they do not remember the content since it was taught a year prior. Therefore, I recruited a Psychiatric Nursing faculty to provide a review session that provides students a framework for approaching this content on the exam.

- An open class period to be determined by student needs. Each class is different in what content they wish to cover with this final class period. Sometimes we

review difficult content, but often students wish to talk through more questions together using the previously mentioned test-taking strategies.

Beyond the class content, I address non-academic barriers to academic success. This includes a focus on the emotional component of preparing for the HESI exit exam for all students. I begin every class with an opportunity for students to share their thoughts and/or feelings, and surprisingly, many students will share. Simple statements like "I believe in you", "You can do this", and "Your preparation will pay off" seem to help students feel supported and encouraged. I encourage students to create a "mantra" to calm them when they recite during the exam. I remind students of the importance of self-care. I lovingly encourage the unmotivated students to buckle down so their procrastination does not lead to failure. I email each student individually about one week prior to the HESI exit exam. I offer encouragement in the email, as well as the opportunity to tell me what is on their mind. Finally, my office tends to stay full of these students during office hours.

Some students spend additional time with me during office hours. Any student with a previous course failure is asked to meet with me since failing this course, too, would result in removal from the nursing program, and this is typically around 20% of the class. Students with a HESI Specialty Exam average of less than 800 are also encouraged to meet with me regularly to begin building confidence in taking HESI exams, review study plans, etc. I ask all students to come see me for any support they think can help them. I offer this because I think my knowing that something has happened in a student's life can enhance my ability to help them better cope, and I can also recommend additional services provided by the university such as counseling. I also offer any student the opportunity to use office hours for taking practice questions together so I can hear how they think through the scenario and offer advice for improvement.

My observations of students' willingness to visit me during office hours have changed over time. I see students taking advantage of the opportunity now more than ever, and several reasons might explain the increase: 1) I offer the help every week; 2) I strive to remain upbeat and positive; 3) I do not turn any student away; 4) word of mouth between students may be positive. I also offer online office hours in addition to my face-to-face hours because I want to be available when the students need to meet. Students are told that they are a priority for me, and I believe providing and strongly encouraging office hours is a critical component to increasing student success in this class.

Preliminary Results

All students each semester are required to take and pass the HESI exit exam with a score of ≥850, which correlates with a 95% probability of passing the NCLEX-RN according to the HESI prediction model (for reference, a score on any HESI exam of 1000 or higher is considered excellent and often falls into the 90+% scoring percentile) (Elsevier, 2018). Data from the previous three course offerings reveal a 99.3% pass rate for the course (144/145 students), meaning all but one student have passed the HESI exit exam within two attempts. Similarly, 82.7% of all students (120/145) pass the HESI exit exam on the first attempt. This suggests that classroom changes implemented in 2016 (when I began solely teaching the course) have been extremely successful.

Students who do not meet minimum score standards (≥850) on the first HESI exit exam attempt (17.3% of students in the past three offerings) are required to remediate with me for approximately 4-5 weeks and then retake the HESI exit exam. Remediation in nursing schools is supported in the literature as an effective intervention to increase student success (Davenport, 2007). During remediation, students meet with me individually and/or in small groups each week to discuss barriers to success and to take practice questions together. Additional study plans that could be helpful are recommended to students as needed. Students are able to practice questions with additional versions of two HESI Specialty Exams in order to simulate the HESI experience; however, I am available on site to answer specific questions during each exam so I can talk students through questions. This allows students to apply what we practice together to a real HESI situation that often provides a high score and builds confidence.

Below is a table presenting exam score data of remediating students for the previous three semesters. The Pharm 1 and Exit 1 columns represent scores of students who have attended classes as previously described above, but who have yet to complete remediation with me. The Pharm 2 and Exit 2 columns represent scores of the same students post-remediation. The Change in Pharm Points and Change in Exit Points columns represent the net increase or decrease in their scores from the first to second attempts. Finally, the last column indicates whether the student passed the course and are ready to take the NCLEX-RN. Data indicate that the remediation plan works well for students, with 96% (25/26) of remedial students passing the course after the HESI exit exam second attempt. Scores from Pharm 1 to Pharm 2 have improved as much as +316 points. Likewise, scores from Exit 1 to Exit 2 have improved as much as +285 points, which is impressive given the HESI exit exam is 4 hours in length and 165 items. 92% of these students have experienced an increase in their HESI exit exam scores from 1st attempt to 2nd attempt.

Fall 2016 Students Required to Remediate and Retake Exit Exam							
Student	Pharm 1	Pharm 2	Change in Pharm Points	Exit 1	Exit 2	Change in Exit Points	Pass or Fail Course
1	859	981	+122	808	839	+31	Pass
2	811	1001	+190	828	1043	+215	Pass
3	815	1131	+316	769	837	+68	Pass
4	969	NA	NA	812	948	+136	Pass
5	915	NA	NA	824	871	+47	Pass
6	849	1086	+237	825	942	+117	Pass
			Average Improvement = 216 Points			Average Improvement = 102 Points	
Spring 2017 Students Required to Remediate and Retake Exit Exam							
Student	Pharm 1	Pharm 2	Change in Pharm Points	Exit 1	Exit 2	Change in Exit Points	Pass or Fail Course
1	937	NA	NA	830	884	+54	Pass
2	842	1139	+297	735	904	+169	Pass
3	1014	768	-246	757	888	+131	Pass
4	745	894	+149	788	899	+111	Pass
5	995	NA	NA	759	988	+229	Pass
6	993	NA	NA	848	986	+138	Pass
7	1149	NA	NA	782	1067	+285	Pass
			Average Improvement = 200 Points			Average Improvement = 160 Points	
Fall 2017 Students Required to Remediate and Retake Exit Exam							
Student	Pharm 1	Pharm 2	Change in Pharm Points	Exit 1	Exit 2	Change in Exit Points	Pass or Fail Course
1	1025	NA	NA	773	797	+24	Pass
2	1120	NA	NA	841	823	-18	Pass
3	877	887	+10	779	1011	+232	Pass
4	834	719	-115	800	886	+86	Pass
5	1052	NA	NA	753	896	+143	Pass
6	865	991	+126	736	1013	+277	Pass

7	836	917	+81	737	789	+52	**Fail**
8	736	842	+106	681	897	**+216**	Pass
9	973	904	-69	847	923	+76	Pass
10	836	735	-101	839	833	-6	Pass
11	973	NA	NA	834	895	+61	Pass
12	823	915	+92	778	989	**+211**	Pass
			Average Improvement = +16 Points			**Average Improvement = +113 Points**	

The SON tracks pass rates for pre-licensure students taking the NCLEX-RN. We anticipate the percentage of students who will pass the NCLEX-RN on the first attempt based on the HESI exit exam scores since the HESI exam creator indicates a 95% probability of passing for scores ≥850 and a 99% chance of passing for scores ≥900 (Elsevier, 2018). The SON Faculty set the benchmark for first time test-takers at or greater than the Georgia Board of Nursing (GBON) requirement (passing percentage of at least eighty (80) percent of all first-time test takers) or national average. The table below indicates pass rates for the past 8 years for GC first time NCLEX-RN test takers. This supports the emphasis on the HESI Exit Exam within this course, and that current teaching methods are successful.

Program	Student Description	2009	2010	2011	2012	2013	2014	2015	2016
Georgia College and State University (BSN)	# Passed	75	83	85	95	95	85	99	92
	# Taking Exam	76	84	88	97	99	92	105	96
	% Pass	99%	99%	96.50%	97.90%	96.08%	92.39%	94.29%	95.83%
National pass rates	1st time US educated Baccalaureate degree	89.49%	88.69%	89.09%	91.66%	83.04%	84.93%	88.04%	85.26%

Finally, student feedback is highly valued in this course. Student comments have helped me determine effective teaching methods as well as eliminate ineffective techniques. Student Rating of Instruction (SRIS) scores (see below) for this Integrated Clinical Concepts course indicate high student satisfaction with both my teaching and course, with a mean Excellent Teacher rating of 4.8 (out of 5) and mean Excellent Course rating of 4.7 (out of 5).

Semester	Student Comment
Spring 2016	In my opinion, Dr. Moore is one of the best teachers in GC SON. She gives us personal support and encouragement whenever needed. She also has an ability to explain things in a way that makes them easy to understand. Her organization makes the stresses of nursing school much more manageable.
	Dr. Moore is extremely organized and takes the time to ensure students feel prepared and confident as the semester and nursing school comes to a close. She took the time to meet with me at least three different occasions to go over practice questions and testing strategies. From the very beginning, she was always concerned about students and how they were handling everything, and she has prepared me SO well for the working environment!
	Dr. Moore is an excellent professor, especially for this class. It involves preparing for an exam that has the potential to be incredibly stressful, and she did a wonderful job preparing us and keeping us calm.
Fall 2016	Dr. Moore is the BOMB! I really don't think that I could have made it through my exit and Pharmacology HESI without her help. She took time to help each of us understand the reasoning behind an answer and why it was the best answer choice. She also really helped me with stress relief and study tips so I didn't overdo it.
	Dr. Moore is GREAT for this class. She was the best encourager and personal "cheerleader" for each and every one of us. I personally had more self-confidence because of Dr. Moore.
	Dr. Moore was a phenomenal instructor for this course. She had high achievement standards which helped me strive even harder. She was very positive, uplifting, and encouraging. I appreciate her willingness to help us in every way she could. Thank you so much for all your hard work and dedication over the past two years. I will miss you.
Spring 2017	Thank you so much Dr. Moore! I credit you and this course for how highly I scored on the Exit and how well I think I'll do on the NCLEX. You were a bright spot during nursing school, and especially this semester. I always enjoyed coming to your class and learning from you- your test taking tips were extremely helpful! I hope you stay with GC for a long time because you are truly appreciated as a nursing instructor.
	Dr. Moore goes beyond expectations to ensure EVERY student has the opportunity to do well. EXCELLENT PROFESSOR!
	Integrated Concepts thoroughly prepared me for the exit exam, and in turn, the NCLEX. The structure of this class was very helpful to me in completing my course work and having adequate time to process the information. Dr. Moore really showed that she cared about our success and helped us any way she could!
	Dr. Moore is an outstanding member of the nursing faculty. She has such a positive attitude and has a way of just inspiring students. Sometimes I think Dr. Moore should be a professional speaker and life coach! I believe a faculty member's attitude can really make or break how students approach course material. Dr. Moore truly has the respect and appreciation of her students, as she is so nurturing and approachable. This attitude is crucial when it comes to the big bad exit exam! I am so grateful for her guidance!
Fall 2017	Dr. Moore is exactly what fourth semester nursing students need! She is committed to

	helping us to do our best and continuously gives off positive energy! She is motivating and made me feel more comfortable ad prepared than for any test before. She gave great test taking strategies, and her review schedule helped me a great deal. She also presented material in a way that really helped me make connections and get a firm grasp on concepts. I wish Dr. Moore taught more undergraduate courses.
	Dr. Moore was a wonderful asset to my success in passing the Exit exam. Her continual support and positive attitude were an inspiration throughout this semester. In my opinion, this course helped me the most in preparing for the exit exam and could have been extended beyond an hour.
	I was very thankful for this class and the confidence and encouragement constantly given by Dr. Moore. Thank you!
	Dr. Moore is a wonderful instructor for this course. She is very encouraging and supportive and makes you realize your full potential.

Integrated Clinical Concepts Semester	Excellent Teacher Rating	Excellent Course Rating
Spring 2016	4.8	4.5
Fall 2016	4.8	4.8
Spring 2017	4.9	4.9
Fall 2017	4.7	4.6

Through the scholarship of teaching and learning, I have amended my teaching philosophy for teaching this course. It is unique as compared to that for traditional courses I teach because I see my role as different. It is coach, cheerleader, encourager, rather than traditional teacher. During this transition period from student to Registered Nurse, students need support, compassion, and guidance. They need the ability to admit that they do not know something without repercussions. While I have high standards and believe every student can achieve them, I recognize in this course that those additional struggles are real to students and do impact their success. It is my desire to assist students in identifying nonacademic barriers to success and tools for removing them. If I can help students realize their potential, I think I have done my job.

Based on comments and data above, I have gleaned that the support and teaching methods I offer to this class are appreciated and make a positive impact on their outcomes. However, I am not merely satisfied with these outcomes because I believe I can do more to identify and help alleviate nonacademic barriers to their success on the HESI exit exam. Making a larger impact on these barriers has the potential to shape nursing students beyond the classroom and into their professional career. I strive to take my scholarly teaching approach to one reflecting the scholarship of teaching and

learning in order to foster deeper learning. Therefore, additional research regarding nonacademic barriers is warranted.

Current Research

My approaches implemented in this course have not been studied as a comprehensive method for improving nursing student success on the HESI exit exam and NCLEX-RN. One 2001 study described a review course for nursing students that included test-taking tips, content review, practice questions, assistance with study habits, and help with psychological issues such as negative thoughts during the exam (Mills, 2001). However, this course was required only for students scoring in the bottom 20th percentile on the exit exam and resulted in only 63% of "at-risk" students passing the exam. The current course is different in that, although similar approaches are used, they are introduced to all students in the beginning of the course rather than to only at-risk students repeating the exit exam. It is my thought that all students deserve the opportunity to remove nonacademic barriers to success from the beginning rather than as a result of being unsuccessful.

My first study is currently in data collection and focuses on academic and non-academic barriers to success on the Hesi Exit Exam and the NCLEX-RN. Academic barriers such as SAT/ACT score, final GPA, TEAS (nursing school pre-admittance Test of Essential Academic Skills) score, scores on previous Specialty Hesi Exams, previous pre-nursing and nursing course grades, and age at graduation will be examined as predictors of success. Academic barrier data is routinely collected each semester as part of the selection process for program entry.

This study also focuses on the effects of motivation and anxiety on their exam performance, as these are two potential non-academic barriers that have been unofficially identified in this course as having an impact on success on the Hesi Exit Exam. Students complete the Motivated Strategies for Learning Questionnaire (Pintrich & DeGroot, 1990) within the first two weeks of the course to provide both the student and me an idea of how motivated the student is to prepare for the Hesi Exit Exam. The motivation questionnaire score can range from 301 (high) to 43 (low). Students are asked to use their score to assist them in determining strategies that will assist in identifying what is working well and strategies that can be used to stay (or become) motivated. Students also complete the Sarason Test Anxiety Inventory (1978) within the first two weeks of class to indicate their level of anxiety coming into this course. The 37-item instrument aids the student and me in identifying low (0-11), medium (12-20), or high (>20) level of anxiety so a plan can be made to address it (counseling, for example).

Hypotheses for this study include:

1. Students with higher motivation will score higher on the Hesi Exit Exam.
2. Students with lower test anxiety will score higher on the Hesi Exit Exam.
3. Students who self-report higher test anxiety and receive anxiety reducing strategies will score higher on the Hesi Exit Exam than students who self-report higher test anxiety and do not receive anxiety reducing strategies.
4. Academic barriers (SAT/ACT score, final GPA, TEAS score, scores on previous Specialty Hesi Exams, previous pre-nursing and nursing course grades, and age at graduation) and non-academic barriers (anxiety score and motivation score) will account for a significant amount of variance in the Hesi Exit Exam.

My second study is in the beginning stages of study design, but will focus on student resilience, which is a student's ability to "bounce back" from adversity and remain focused on the future (Thomas & Revell, 2016). This is an imperative quality in nursing students because of the stressful nature of nursing school. My observation of nursing students in many nursing courses is that they experience adversity from many aspects of life, including time management, anxiety, low test-taking confidence, personal stressors, etc. A lack of resilience, especially early in the nursing program, can affect students' ability to persevere and ultimately pass the Hesi Exit Exam and NCLEX-RN.

The study team, led by me, will examine resiliency through a series of studies. We will begin by comparing baseline resilience among our nursing students across the program (4 semesters) and how it affects testing performance. If this reveals a difference in resilience and performance based on semester in the program, the team will identify interventions to improve resilience and test effectiveness. Results from these studies can inform all nursing courses, including and especially my Integrated Clinical Concepts course. The final phase for me will be to determine whether interventions to improve resilience can improve performance on the Hesi Exit Exam and NCLEX-RN.

Past Research

I have completed three studies with colleagues/students that focus on non-academic barriers to nursing student success. Similar to observations made in my current course, the questions of student anxiety on academic performance and the effects of faculty support on reducing anxiety arise in other nursing courses. Findings from all studies have informed my teaching of the current course. They have also reinforced my observations and conclusions in my course, especially related to the importance of offering proper support to students as they undergo stressful experiences within the nursing program.

The purpose of the first study (Godwin & Moore, 2018) was to explore nursing students' experiences during their psychiatric nursing school rotation at Central State Hospital in the 1960s. This qualitative study utilized oral histories as the method of conducting nursing historical research. This oral history project gave voice to a group of nurses and the meanings they assigned to their student experiences while visiting the hospital. Two paradoxical themes emerged as the narrators reminisced about their clinical experiences, including The Dark Side (sub-themes "snake pit" and "lack of support") and The Light Side. These oral histories spotlight experiences of student nurses completing their psychiatric rotation in the 1960s. These can remind present-day instructors the importance of improved preparation before clinical experiences, supportive faculty during clinical hours, debriefing after clinical experience, and a support group with time to reflect, discuss, aid, and generally care for the students. These findings were a profound realization that nursing students' basic needs such as faculty support are universal across the curriculum and transcend over time. Results from this study were presented at the American Association for the History of Nursing Annual (National) Conference in Fall 2017.

Due to large class sizes and limited resources, students participating in high-fidelity simulation experiences may be assigned to an observer role as opposed to an active nursing role. It is important for educators to determine if anxiety levels and student learning outcomes are comparable, regardless of role. The purpose of the second study (Bates, Moore, Greene, & Cranford, under review) was to explore the impact of simulation roles on anxiety and perceived student outcomes of satisfaction, self-confidence in learning, clinical ability, problem solving, confidence in clinical practice, and collaboration in pre-licensure, baccalaureate nursing students who participate in high-fidelity simulation. The following objectives and research questions were the focus of this study: to determine if 1) There was a difference in state anxiety level and student outcomes (satisfaction, self-confidence in learning, clinical ability, problem solving, confidence in clinical practice, and collaboration) in those assigned to the active versus observer role; 2) There was a relationship between student demographics, anxiety level, and outcomes (satisfaction, self-confidence in learning, clinical ability, problem solving, confidence in clinical practice, and collaboration); 3) State anxiety levels changed from pre-simulation to post-simulation. A quasi-experimental correlational study was conducted with 132 pre-licensure baccalaureate students. There were no significant differences between simulation roles for anxiety levels and perceived outcomes for satisfaction, self-confidence in learning, clinical ability, problem solving, confidence in clinical practice, and collaboration. These findings suggest that either role is an appropriate assignment during simulation. Once again, the role of anxiety on student learning and performance was examined, and results can be related to other nursing education courses such as my Integrated Clinical Concepts.

The purpose of the third study (Goldsberry, Handwerker, & Moore, under review) was to explore two methods of exam scheduling for first semester nursing student exams in efforts to reduce test anxiety. Nursing exam scores generally provide the majority percentage of nursing students' course grades, and nursing students often take multiple, content-laden courses concurrently. Due to the high stakes nature of these exams, best practice for administering exams is an important topic of study for nurse educators. One aspect of exam administration to consider is the scheduling of course exams across various nursing courses in a given semester. This study used a retrospective, comparative, descriptive design. Testing results from nursing students at Georgia College who successfully completed both Fundamentals and Health Assessment courses during their first semester junior year from Fall 2015 to Spring 2017 semesters were examined. Course content was streamlined between Fundamentals and Health Assessment courses to overlap. Exam scores from two separate cohorts of first semester students were compared. The first cohort was administered exams for both Fundamentals and Health Assessment on the same day, while the second cohort was administered the exams for each course one week apart. An independent samples t-test was utilized to compare student performance on exams given on the same day with those given a week apart. Student course evaluation comments were also analyzed to determine student preference for exam scheduling. Findings indicate students' exam performance improves significantly when exams are scheduled on different days. Faculty should consider administering nursing exams on separate days to maximize student success. Simple findings such as this are easy to implement in my Integrated Clinical Concepts course since this study provides clear best practices on exam scheduling.

Summary

In summary, I am incredibly proud of results from this course. I give much credit to the entire SON faculty because it does take a village to make a registered nurse. However, I believe my contribution in the end helps to push students over the finish line. This course has become my passion, mainly because I see that I make a difference and want to find ways to do more for my students. The profession of nursing means a great deal to me, and I believe my contribution is to prepare competent and confident nurses. While higher education provides the means for my accomplishing this, the scholarship of teaching and learning allows me to hone my craft.

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Leslie C. Moore
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February 16, 2018

Dear Excellence in Scholarship and Teaching Award Committee,

Dr. Leslie Moore is an applicant for the Excellence in Scholarship of Teaching and Learning Award. I offer her application my full and enthusiastic support. Please allow me to briefly outline why Dr. Moore would be a worthy recipient of this year's award.
Dr. Moore's pedagogical methods in the Integrated Clinical Concepts nursing course have positively and significantly impacted the percentage of our students who pass the nursing licensure exam. Passing this exam is necessary before our students can begin their careers. During Dr. Moore's tenure teaching this vital course, our pass rates have exceeded the national average every year. Importantly, Dr. Moore has been very successful in the early identification of "at risk" students. She works with these students individually and holistically. Due to her techniques (such as practicing exam taking skills and stress reduction strategies), they make outstanding academic progress over a relatively short period of time.

Dr. Moore provides these at-risk students with an up-beat and positive learning experience. Her student evaluations from this course are outstanding. And, her empirical results speak for themselves.

Dr. Moore's work appears in several peer-reviewed nursing journals. Importantly, she implements findings from these studies directly into the Integrated Clinical Concepts course. For example, her article in the Archives of Psychiatric Nursing showed the importance of faculty support for students to achieve academic, and later, professional success. Additionally, her article currently under review in the Journal of Nursing Education focuses on reducing the negative impact of anxiety in nursing simulation education. She and her colleagues have produced working papers (soon to be submitted) on varied teaching issues such as predicting student readiness for the nursing licensure exam and the importance of resiliency on passing high-stakes exams.

Dr. Moore uses holistic and individualized teaching methods in her Integrated Concepts Course. She improves students' test taking skills, reduces their anxiety, and helps build their professional resiliency. The impact that she makes with at-risk students is one major reason the GCSU School of Nursing produces students who greatly exceed the national average on the licensure exam. Additionally, her published research directly impacts her teaching methods. Her teaching techniques effectively serve as a best practice model for other universities with a capstone course geared toward student success.

Sincerely,

Josie Doss Ph.D. RNC

Josie Doss, PhD, RNC

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Scholarship of Teaching and Learning

Dr. Leslie Moore

Dr. Moore is dedicated to the Scholarship of Teaching and Learning. Her careful self-reflection and analysis of teaching efforts have resulted in SRIS results for the 2016 calendar year that were excellent. Her average teacher rating was a 4.84 out of 5, and average course rating was a 4.71 out of 5. She was recognized as an outstanding nurse educator in the state by the Georgia Association for Nursing Education (GANE). She received the Jane Van de Verde Nurse Educator Award which goes to a nurse educator in Georgia who has demonstrated a positive influence on nursing education in the areas of scholarship, service and innovative educational practices. Perhaps there is no higher honor than to be selected by nurse educators across the state. Dr. Moore has also served as the faculty mentor for the School of Nursing's Jonas Scholar during this past year.

Our students often have the best point of view about our teaching:

I really was not excited about the course at all! Dr. Moore is literally a breath of fresh air. She is super knowledgeable, super approachable and very easy to talk to. She really made sure we understood the course material and why it is important for a master's prepared nurse.

Dr. Moore has an incredible way of making this challenging subject relevant. Her excitement for learning and teaching is evident. I really believe she truly desires for us to know this stuff and be better because of it. I really respected that and gave this subject more of a chance because of her teaching style and commitment to her class.

Dr. Moore is the BOMB!! I really don't think that I could have made it through my exit and pharm HESI without her help. She took time to help each of us understand the reasoning behind an answer and why it was the best answer choice. She also really helped me with stress relief and study tips.

She has served as Chair of GCSU School of Nursing's Educational Effectiveness Committee (evaluation/accreditation) for many years. This is a voluntary role that has recently been formalized into the Accreditation Coordinator for our school of nursing. The accreditation coordinator provides coordination of Commission on Collegiate Nursing Education (CCNE) accreditation and program evaluation for all programs within the School of Nursing. The accreditation coordinator works closely with the director, faculty, various committee chairs, and program coordinators to facilitate accreditation and program evaluation operations of the School of Nursing.

This calendar year was successful with many scholarship activities for Dr. Moore. Two articles were published (co-authored with colleagues), and two manuscripts were submitted for publication. Two additional articles were written and are ready for submission. She has worked with numerous DNP students on their Translational Projects this year (chaired 2, provided statistics guidance for 1). Dr. Moore is also a reviewer for Nursing Research.

Dr. Moore also serves as the Advisor for the School of Nursing Professional Practice Council. This student led organization helps students to understand the role of leader and guides them to transition from the role of student to professional.

Overall Dr. Moore is an example of excellence in the scholarship of teaching!

Deborah MacMillan