Actualizing veterans education in nursing

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A B S T R A C T

A grant driven partnership among a west Texas university, Texas Workforce Commission’s College Credits for Heroes, and the Health Resources and Services Administration provided the funding needed to create a competency based education (CBE) model for recognizing military veteran service training and experience. Through this model, we call Competency Assessment Placement (CAP), prior learning credits can be awarded for upper division nursing courses leading to a Bachelor of Science in Nursing. The process used by faculty to create this direct assessment method for awarding credit, performance data of Cohort I using the CAP, and our initial “lessons learned” are provided. Incorporating an on-going reflection of military veteran student learning needs, a persistent concern for improvement of the nursing program, as well as a frequent review of veteran educational benefit policies will continue as this CAP model provides beneficial outcomes for the students.

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Assisting service members to reenter civilian life and find career avenues which build on the training and experience gained while in the military has been an ongoing challenge for federal, state, and private sectors (Hitt et al., 2015). Upon return, hopefully the veteran finds some type of employment, yet it may not necessarily be related to their military expertise, provide sufficient financial support for them and their dependents, nor produce a fulfilling long term career path. In a recent letter to the New York Times, Seymour (2016) points out that “It makes no sense to force veterans, who have had both classroom and on-the-job training in roles as varied as medics, IT specialists, mechanics, communications technicians, and military police, to take college courses—at considerable cost in time and money—[while] requiring them to duplicate lessons already learned” (para. 5). This concern is important as our nation invests millions of dollars into the troop’s skillset during their military service.

During 2013 and 2014 alone, the American Hospital Association (2014) reported over 10,000 hospital corpsmen/medic personnel, including Licensed Practical Nurses, have already left the military. Yet when trying to advance their education, military medic and LVN veterans have had a long history of facing barriers (LeVasseur, 2003), and are still experiencing civilian job and nursing program admission obstacles. Often this has been due to the inadequate equivalency of job skills between the military and civilian sectors, as well as any development of realistic and innovative assessment testing of their education (Allen, Armstrong, Salidiner, Hamilton, & Conard, 2014; Halloran, 2009).

On the Federal level, these problems were recognized by the Obama Administration through the establishment of the Joining Forces initiative of veteran’s access to education (White House, 2012). For nursing, this policy initiative was actualized through the Health Resources and Services Administration’s (HRSA) Nurse Education, Practice, Quality, and Retention (NEPQR) grant to fund veterans to BSN programs (U. S. Department of Health and Human Services, n.d.).

On the state level, Texas has the second largest veterans’ population with more than 70,000 veterans seeking educational program benefits (Office of the Actuary, Department of Veterans Affairs, 2011). Two state-wide agencies, the Texas Workforce Commission (TWC) and the Texas Higher Education Coordinating Board, have provided valuable veteran assistance by administering the College Credits for Heroes (CCH) program (National Conference of State Legislatures, 2014). This supportive funding program, along with their collaborative work with some of the state colleges and universities, has paved the way for workable educational options for veterans and members of the military. Student support services to address the unique needs of this veteran learner and their families were also included (American Council on Education [ACE], 2016; Texas Workforce Commission [TWC], 2011).

With our school’s long history of creating innovative web-based nursing education programs to ease the nursing shortage (Billings, Allen, Armstrong, & Green, 2012), a grant driven partnership for the CCH program was enthusiastically endorsed by our faculty and administration. Later, our successful NEPQR HRSA funding award provided the final key impetus for implementation of an unique method for recognizing service member’s military training and experience through a model of competency based education (CBE). The objective was to award and incorporate prior learning credits within specific upper division nursing courses that could be used in a Veteran Track (VBSN)
within our 12 month Accelerated BSN Second Degree Bachelor of Science in Nursing program. This article presents our method of credit-earning-direct assessment for health-oriented military veteran students called the Competency Assessment Placement (CAP), Cohort I performance data while using the CAP methodology, and our lessons learned to date.

Competency based education model formation

Institutions of higher education have traditionally used the Carnegie Unit as the primary gold standard for measuring and awarding educational degrees since the early 1900’s (Silva & White, 2015). This Carnegie Unit eventually evolved into what is currently known as the “credit hour” in higher education, used to establish standards related to student records within the university setting, including the basis for transfer and awarding of degrees. Yet this standard model did not provide for recognition of prior learning assessments nor subsequent award of academic credit based on a demonstration of competencies (Silva & White, 2015), something very important to military veterans. (Snyder, Wick, Skillman, & Frogner, 2016). With limited nursing literature available for any assessment guidance regarding veteran transition, several directions for sources of information were sought.

Another method for academic focus

Competency based education (CBE) is another way to recognize learning. It is based on principles of andragogy, purporting adult learning theory concepts of self-direction, application of experiences, and an orientation of learning from a problem-centered approach (Muneja, 2015). Using this foundational CBE model, the learner focus is shifted away from the semester credit hour and the “how, where, and how long it takes students to learn” (Schroeder, 2015, p. 64). Educational institutions using CBE instead promote credit that is earned, or awarded on mastery of skills and concepts, in a flexible and personalized manner, based on previous knowledge and demonstration of learned skills (Federal Student Aid, 2013; U. S. Department of Education, n.d.; Jones-Schenk, 2014). Often Registered Nurse to Baccalaureate Science Nursing (RN-BSN) programs promote more opportunities for their students learners to demonstrate competency through high stakes examinations. This has produced an overall increase in student and employer satisfaction (Jones-Schenk, 2014). These CBE concepts were thought to have further application for our military veteran students.

Previous literature

Other ideas for this project evolved from the School of Nursing’s previously conceived but not initiated program entitled, “Returning Enlisted Veterans–Upward (to) Professional Nursing (REV-UPN);” The published “lessons learned” from that undertaking (Allen, Billings, Green, Lujan, & Armstrong, 2012), using our successful, decade old, online Accelerated BSN Second Degree curriculum (Allen, Van Dyke, & Armstrong, 2010), with almost a 1000 graduates, also had pertinent applications for the CBE model designed for military veteran students.

College Credits for Heroes (CCH)

The CCH program already had a successful five year TX history which focused on assurance that active duty, veteran, and retired military personnel could maximize any college credit awarded for military service. To obtain this college credit, the CCH used a three pronged approach of:

a) an online portal to evaluate their service transcripts and DD214 form, both essential veteran documents provided upon separation and/or discharge status (DD214 US, 2007). The DD214 is a Department of Defence document issued to all service members upon discharge and describes their discharge status and military service occupation, such as medic or corpsman. Upon the translation of their military education, the information then was converted into the state’s common academic numbering system, and an official transcript generated for use by colleges throughout the state (College Credit for Heroes, 2011). Combat experience was not considered when translating military education to college credits.

b) a network of partnering associate and baccalaureate levels TX schools, and

c) funding for the creation of accelerated curricula within these schools (Texas Workforce Commission (TWC), 2011). For our School of Nursing, the CCH grant award provided for a VBSN program director, faculty release time to assess and initiate a CBE assessment program, and student recruitment for the VBSN track.

University policy review

A review of university educational policies leading to a degree-award was also important. Our search found that the total available award of prior learning credit, based on demonstrated competencies, could not exceed 24% of total programmatic requirements for any degree at our university. Also, as our university is solely an upper division school, all competency based credits for lower division pre-requisites had to be awarded prior to entry. The CCH transcript, with its translation of military training into the state’s common core numbering system, allowed the university to review and make a determination on the entry transfer of lower division course credit.

Additional funding

The supportive HRSA grant funding extended the work of our CCH grant ensuring the hire of a Veteran Program Liaison, while increasing veteran students enrollment, and recruiting new faculty. Sustainability of the program was also important until budgetary state formula funding became available in two years. HRSA funding also paved the way to obtain a new clinical site near the joint military Medical Education Training Campus (METC) in Fort Sam Houston (San Antonio, TX) where all healthcare education for the Air Force, Army, Coast Guard, and Navy enlisted personnel was conducted. This close access to our Armed Forces partners enhanced communication around their ever-changing medical training initiatives, as well as access to service members separating from the military who may later be referred to our nursing program.

Partnership experts

The partnerships with both funding agencies (TWC & HRSA) provided opportunities for introductions and accessibility to veteran education content experts. Helpful guidance by these experts, both in Washington, DC and with other HRSA funded VBSN programs across the country, became critical to the continuing formation of our school’s military veteran CBE model.

One assistive suggestion was the use of a curriculum crosswalk (Table 1) to further validate what could be provided as competency based credit (Bitters & Wegner, 2009). Comparing our Accelerated BSN Second Degree curriculum with the METC military corpsman education was valuable (Medical Education & Training Campus (METC), 2015). This curriculum excercise helped determine which courses veterans could potentially demonstrate competency, based on their education provided in the METC military program. For the faculty, the outcome of this curriculum crosswalk verified the written and skills assessments the veteran already could have regarding Health Assessment, Nursing Foundations, Pharmacology, and Leadership & Management that was currently present in our Accelerated BSN Second Degree program. Thus, potentially the VBSN student had the opportunity to earn academic credit with four courses and obtain 13 semester credit hours toward their BSN.

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