Looking Back: The Reflections of Registered Nurses on the Experience of Returning for the Baccalaureate Degree

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Abstract The purpose of this phenomenological research study was to understand the educational experiences of RN-BSN (Registered Nurse to Bachelor of Science in Nursing) graduates in order to more fully understand the future role of nursing curriculum in developing competent, confident healthcare professionals. Ten nurses who graduated from an online RN-BSN program in the prior two to three years agreed to participate and were interviewed. Six themes emerged from the data concerning associate degree nurses that return to academia for a baccalaureate degree: Connecting the Dots between Theory and Practice, Emotional Evolution, Seeing the "Big Picture", Opening Doors to New Opportunities, The Workplace Push, and Perceptions of Professionalism. The findings of the study provide a glimpse into the perspectives of nurses that have returned to academia for their BSN. This research adds to the body of literature regarding RN-BSN education and how specific experiences within these particular programs impact the professional growth of nurses working in healthcare today.

Keywords: undergraduate nursing curricula, RN-BSN online programs, professional development, RN-BSN curriculum

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1. Introduction

Nursing education has evolved over the past century to meet the healthcare needs of society. At one point in history, the majority of nurses were prepared in diploma programs; currently, the majority of registered nurses graduate from associate degree nursing programs.[1] The Institute of Medicine (IOM) [2] report unabashedly cited a predominant Bachelor of Science in Nursing (BSN) prepared workforce as the educational goal for the nursing profession, although literature has yet to definitively support this initiative. Nursing educators are faced with the challenges of preparing graduate nurses for the dynamic health environment and the reality of a profession that must provide safe, high quality patient care with limited resources. It is the responsibility of nursing academia to understand the specific aspects of educational preparation that optimally prepares nurses for practice, and RN-BSN graduates have the unique opportunity to provide their perspectives on this important foundational requirement.

1.1. Background

While the nursing profession espouses the importance of nursing practice based on outcomes, evidence to fully support the transition of our profession toward a predominantly BSN-educated workforce remains inconclusive. There also remains a dearth of research literature demonstrating the specific activities or experiences within RN-BSN programs that students believe foster their professional development.

1.2. Review of Literature

Nursing remains the only healthcare profession within the country that has multiple educational pathways leading to an entry-level license to practice. The myriad of choices available to prospective nurses has caused fragmentation within the nursing profession and generated confusion within the public sector as well as among other health professionals about these educational options. [2] The current entry level nursing school graduates are comprised of 54.0% AND (Associate Degree in Nursing) graduates, 44.4% BSN graduates, and 1.6% diploma nurses.[1] Within the past two decades, an evolution and expansion of RN-BSN programs within the United States have been developed to cultivate the educational advancement of the associate degree and diploma-prepared nurse into a baccalaureate nurse. Considerable research literature exists regarding the effects of nursing education on the quality of care received by patients; this research further expands the dichotomous views regarding level of preparation for registered nurses largely due to the contradictory nature of the findings.

Aiken, Clarke, Cheung, Sloane, & Silber [3] provided the first empirical evidence that hospitals employing baccalaureate-prepared or higher degrees are associated

with improved patient outcomes. This landmark study found a significant relationship between the proportion of nurses working in a hospital with bachelor's or Master's degrees and both mortality and failure to rescue in surgical patients. Friese, Lake, Aiken, Silber, and Sochalski [4] also found that educational preparation of registered nurses was significantly associated with patient outcomes. Further studies [5,6] used 30-day mortality to support the argument for baccalaureate preparation in nursing. Results of these studies provided evidence of a positive relationship between 30-day mortality and the proportion of baccalaureate nurses providing patient care.

There are limitations of these studies which support the need for increased proportions of baccalaureate nurses within the hospital environment. The standardized data sets [3,4,5] used in much of the literature supporting the need for more BSN-prepared nurses did not necessarily reflect outcomes that are directly affected by nursing. Large standardized data sets which were readily used in many cross-sectional studies did not provide outcomes data that are nursing-sensitive, [7] therefore the link between the level of nursing education and patient outcomes remained inconclusive.

Additional research evaluated other factors beyond level of nursing education and the effect on patient outcomes; this research did not definitively support the trend toward a predominantly BSN-led workforce. [8] Blegen, Vaughn, and Goode [8] attempted to evaluate the effects of nurse experience and education on the quality of care provided in 81 patient care units in separate hospitals. The data also showed that the incidence of medication errors and falls were not significantly decreased on units with more baccalaureate-prepared nurses. The authors concluded that nurses with more experience provided higher-quality care regardless of educational preparation. [8] One of the largest studies to date, Sales et al. [9] conducted research within Veterans Health Administration (VHA) hospitals to evaluate the association between mortality rates and nursing factors such as RN staffing levels and RN educational levels. In both ICU environments and non-ICU environments, RN education was not significantly associated with mortality. [9] The inability to find significant links between nurse education and patient outcomes has not settled the debate regarding the necessary educational preparation for nurses.

Past research regarding RN-BSN programs have focused on the identification of barriers that students perceive when returning to school. [10,11,12] Studies have also evaluated students' satisfaction while navigating baccalaureate nursing programs as well as attributes of the program that contribute to successful completion. [13,14] Currently lacking in the literature is information from graduates regarding their perceptions of experiences and assignments within RN-BSN programs that further contribute to their professional development. It is necessary to understand which facets of curriculum are considered essential by graduates of such programs in order to guide the efforts of academicians in developing programs that are germane for students and cultivate their learning.

1.3. Research Question

The evolution of healthcare provision in our country has forced nurse educators to evaluate the necessary educational requisites for nursing graduates. The qualifications and level of educational preparedness for entry into nursing practice have been extensively debated by nurses, nursing organizations, academicians, and many other stakeholders for more than 40 years. [15] Although the "causal relationship between the academic degree obtained by RNs and patient outcomes is not conclusive in the research literature" [2], the Institute of Medicine (IOM) report provides recommendations toward an all-BSN workforce within the next decade. The report argues that an "all-BSN workforce at the entry level would provide a more uniform foundation" [2] for the re-conceptualized roles of nurses needed to provided patient care in the future healthcare environment. Students have been exposed to a more diverse range of competencies within baccalaureate programs, such as health policy, leadership and quality improvement. The IOM report also clearly emphasized the need for more baccalaureate-prepared RNs in order to poise them for higher levels of education such as master's and doctoral degrees. With the shortage of nurses prepared at these advanced levels, the delivery of patient care under the new health reform legislation is tenuous. [2]

The debate regarding the potential outcomes achieved by associate or diploma nurses as compared to baccalaureate-prepared nurses served as a platform for this research. Graduates of RN-BSN programs provided a unique perspective on the educational preparation of the nursing workforce. Their stories provide further information about the experiences they perceive as most important within academic programs to enhance professional practice. It was the goal of this research to elucidate the experiences of nurses returning for the baccalaureate degree in order to more fully understand the future needs of the nursing profession. To that end, the following research question was posed: *What are the perceptions of RN-BSN graduates regarding their educational experience and their subsequent reintegration, as a BSN nurse, into professional practice?*

2. Methods

Upon receipt of Institutional Review Board (IRB) approval, purposive sampling to recruit graduates from one particular RN-BSN program, approximately two to three years following graduation, was performed. Sampling was terminated when no new information was obtained during data collection and content analysis. [16] Participants for this study were chosen based on inclusion criteria; all graduated from a RN-BSN program within two to three years of data collection, and all were currently employed in the healthcare setting.

The primary form of data collection for this study was in-depth, face-to-face interviews with the participants. Interviews were audiotaped and transcribed verbatim. During each interview, participants were asked to choose a preferred pseudonym for anonymity. Data analysis for this particular research was conducted using Moustakas's [17] approach, which uses systematic steps within the data analysis process. Data analysis began by going through the data, e.g., interview transcripts, and highlighting what the researcher believed to be *significant statements*. These statements include examples or quotes provided by the

participants that provided a greater understanding of how the participants experienced the phenomenon. This step in the data analysis process is called horizontalization. [17] Those statements were used to develop clusters of meaning by grouping the significant statements into larger themes.

Lincoln and Guba's [18] guidelines were used to ensure rigor and trustworthiness of the study. To address the issues of trustworthiness, several techniques were employed. First, in order to establish credibility, the assistance of a peer reviewer was used throughout the data analysis process. Credibility was also established through member checking. During the data analysis, emerging themes were discussed with three of the original informants; informants were also asked to read transcript passages to verify the accuracy of the transcribed interviews. To address the issue of dependability, the research design was described, as well as the steps that were taken during the data collection stage. As a necessary step to maximize confirmability within this study, an audit trail of researcher's thoughts and feelings throughout the interviews with participants was recorded, as were detailed notes within the margins of the transcribed interviews as the data analysis process was undertaken and the initial themes were generated from the participants' interviews.

2.1. Demographic Data

Ten participants participated in this study; their ages ranged from 29-59 (mean 46.5) years old. All participants originally received an Associate of Applied Science degree in nursing. Study participants averaged 17 years (range 4-36 years) of nursing experience prior to returning to academia for a baccalaureate degree. A majority (80%) of the participants worked in the inpatient healthcare setting, while only 20 % were employed in the outpatient setting; one individual was a school nurse and the other worked as a community case manager. Of the participants that were interviewed in this study, 60 % of the nurses chose to change jobs following the completion of their BSN education, while 40% remained employed in the same setting following graduation.

3. Results

Six themes emerged from the interviews of these associate degree nurses after returning to academia for a baccalaureate degree: *Connecting the Dots between Theory and Practice, Emotional Evolution, Seeing the "Big Picture", Opening Doors to New Opportunities, The Workplace Push,* and *Perceptions of Professionalism.*

Theme 1: "**Connecting the Dots" between Theory and Practice.** Although many of these nurses had worked in healthcare for 10 years or longer, the comments in Table 1 exemplify how participants described specific activities within the program heightened their understanding of professional nursing practice. Specifically, these students believed the clinical practicums within the program were essential in helping them bridge the information they were learning in the classroom with the actuality of practice. One participant referred to this mental bridging as "connecting the dots" between didactic content and the day to day reality of the nursing profession. The participants of this study all completed a leadership clinical experience as well as a community health practicum, and felt that both experiences were paramount in importance in allowing them to gain a greater understanding of many of the foundational concepts that they were learning in their nursing program.

Table 1. Theme 1 - Participants "Connecting the Dots" between Theory and Practice

Participant	Illustrative Quotations
Lindsey	*Some of the things like management; I'm thinking what are they going to teach me about management? This is what I've done for a long time. I loved that part of the program. Some of my presentations to my staff and the way I dealt with staff really changed while I was in the program and has continued to change since then…… I know I am a better manager now that I have gone through this whole program.*
Heather	*I've worked in the hospitals for years now and got to the point where I felt like the people – the pediatric patients that I was working with are sick, and almost past help at some point. Whereas when they are in the community, or in the schools, they are healthy and they are happy, and in their normal calm environment; I can give them two simple facts that may or may not completely change their lives…..*
Louise	*So, I was in on the very ground floor and I felt like by doing that paper, and doing the research; finding out what other hospitals had done, I was very helpful in going through that process. Bringing the stakeholders around to the fact that it was going to happen and providing encouragement, cheerleading; elevator speeches. The whole thing; I just felt like I was so much more prepared…..from doing that one paper.*

Within their leadership practicum, students explored the various areas of nursing they could practice. Even the nurses who perceived themselves as nursing leaders quickly understood the opportunity to learn was pervasive. Lindsey admitted she was somewhat skeptical regarding the extent of learning that was possible in her leadership experience, as her quote illustrates in Table 1.

Community health practicums also gave students insight into the potential activities patients can engage in at an early point in the health-illness continuum which could change illness trajectory long before the need to enter the acute care setting. Heather's comments in Table 1 emphasized her feelings regarding the value of the community health practicum. Informants discussed various learning activities which connected theory with practice situations. When students were tasked with developing and implementing change within the practice environment, one participant worked with her supervisor and a committee to implement barcode medication administration in her hospital; this highlighted the integral link between coursework and the realities of practice. Students were able to take abstract concepts and apply newly developed knowledge into the professional nursing workplace, with advantageous results seen by both the student and their practice environment.

Theme 2: Emotional Evolution. Many participants described a dramatic change in emotional state as they progressed through the program. The impetus for returning to school for a baccalaureate degree was different for each student, but many discussed experiencing uncertainty and

fear as they returned to academia. The students graduated with a different set of emotions and walked away from the experience with a renewed sense of purpose and an increased confidence in their nursing skills and knowledge.

Table 2. Theme 2 - Participants' Emotional Evolution

Participant	Illustrative Quotations
Savannah	*When I first started at ...., I was getting my BSN so I could have more letters behind my name and didn't give it a lot of respect. Since then, my thoughts have definitely changed. I am thrilled that I did it even though I was dragged into it kicking and screaming. I know now that there's a bit more credibility to it.....It changed me mentally and my trust in myself, that I could do these things.*
Heather	*I was so angry that my workplace was forcing me to go back to school after being a nurse for eight years. I spent the first month in school sulking, but then I realized that everything I was learning was pertinent to my job. I was learning new things every day and was amazed at how exciting it was. I ended up loving school!*

Savannah and Heather discussed the negative emotions originally brought into the RN-BSN program. Table 2 describes how Savannah entered school with a skeptical attitude about the ability of an educational program to add to her professional demeanor. Each of the participants had a unique emotional journey as they progressed through their nursing program, and continued practicing with newly developed perspectives and a different emotional baseline. None of the informants believed that they had completed the program as the "same" nurse they were when they entered the program.

Theme 3: Seeing the "Big Picture". One of the more pervasive themes generated through these interviews was the informants' realization that their nursing knowledge had been transformed.

Table 3. Theme 3 - Participants Seeing the "Big Picture"

Participant	Illustrative Quotations
Maria	*It actually opened my eyes a lot about different things going on now with the healthcare reform and just about changes going on, and issues throughout the whole United States. How do you basically take care of these underprivileged people or people who have no insurance? Trying to address those types of problems.....so much is preventative care. It provided so much more as far as understanding what I do on the floor, understanding the whole issue, not just focusing on the clinical skills, but more of the whole picture of the community versus what I see just in the hospital.*
Savannah	*After graduating from the RN-BSN program, there have actually been times when I stopped what I was doing for a patient and took just a second to marvel at what I have learned. I am a more effective advocate and educator now than I have ever been.*

The comments of Maria and Savannah in Table 3 highlight the perceived ability of the nursing program to elevate their practice. Although most participants felt they were competent practitioners prior to entering the RN-BSN program, they graduated with a new perspective on their healthcare experiences.

Theme 4: Opening Doors to New Opportunities. A majority of the participants perceived that the transition to the baccalaureate degree in nursing could open doors for them both educationally and professionally. Regardless of whether they continued to work in the same healthcare environment post-graduation, participants believed that opportunities were increased by their new educational degree. In Table 4, participants' comments described the potential for new opportunities as a "safety net" in their current position or an avenue for different opportunities within nursing.

Table 4. Theme 4 - Opening Doors to New Opportunities

Participant	Illustrative Quotations
Brittany	*The reason I went in to get my bachelor's degree was because I think it –that it made me marketable. I think it's the wave of the future....that the RN is pretty much the same status as an LPN used to be. So, I think in order to move on in any nursing career, I think it is best to have your bachelors.*
Maria	*I felt as if I was getting stale in my current job, but realized that I might not be competitive when looking for a new job if a was competing against a BSN. Even with 14 years of experience, I knew that further education would increase my chances of a new job.*

Theme 5: The Workplace "Push". One of the driving factors described by participants in their decision to return for their baccalaureate degree was the workplace that they were employed in immediately before going back to school. For many, the workplace was a positive force in the decision to return to school. Many nurses shared their workplace provided some type of financial support, primarily in the form of tuition reimbursement. In other cases, nurses felt the financial incentives assisted the decision to return, but the emotional and mental support from nursing supervisors or hospital administration was considered paramount in importance.

Table 5. Theme 5 - Participants' Workplace "Push"

Participant	Illustrative Quotations
Louise	*I was truly amazed that the hospital was willing to invest that much time and money in my education. I felt supported throughout the entire process.*
Savannah	*I was reminded frequently that perhaps my schooling was not adequate enough for me to contribute to discussions or decisions. I was frequently questioned regarding my performance. I was able to leave that company behind. The company that I work for currently is very validating.*
Maria	*I was so miserable in my job when I started the program. I felt as if advancing my education was the ONLY way out of a really bad work situation.*

In Table 5, Savannah and Maria had different perceptions of the workplace's impact on the decision to return to school. Although they admit their former work environment was a major factor in going back to school, it was due to the fact they were unhappy with their workplace situation and wanted a way to leave. Savannah was frustrated with her job when she chose to go back to school and feels that her negative work environment was a major impetus for returning to school.

Theme 6: Perceptions of Professionalism. Although each described being a professional in different ways, all nurses entered the RN-BSN program with the self-perception of being a professional. However, almost every nurse had different views of professionalism following graduation. Louise described her efforts on her hospital's professional nursing council and her seminal role in researching and presenting information on barcode medication administration. She was "able to go and look at the research and find evidence-based practice that I would have never even conceived of doing before I started this program". Her efforts were instrumental in leading her hospital through change, and she attributed this increased professional demeanor to her educational experiences

4. Discussion and Implications

Findings of this research study suggest that RN-BSN students experienced an array of mental and emotional transitions as they progressed through their educational program. Several themes provided a new perspective on the experiences of RN-BSN graduates, while others were consistent with prior literature regarding nurses returning to the academic environment for an undergraduate degree. The first theme, *Connecting the Dots Between Theory and Practice*, was not found in the corresponding literature of RN-BSN students. This theme focuses on the idea that each nurse believed that specific activities within their educational journey were increasingly responsible for their heightened awareness of professional practice and their ability to bridge the theoretical content learned in the RN-BSN program with the realities that they see daily in healthcare. Participants discussed some of the critical aspects of the RN-BSN program that fostered their understanding and assisted them to bridge what they were learning in the classroom, and how that was utilized in the healthcare setting. As our nation works to increase the number of baccalaureate-prepared nurses, programs are making changes to facilitate the movement of nurses into and through RN-BSN programs. One of the potential tendencies of academicians could be to eliminate practicum experiences, in the hope that this would decrease the amount of time necessary for each student to complete the program requirements. Based on the information provided by these students, that decision could produce unintended negative consequences. The perspectives shared by these participants emphasized the need to maintain clinical practicums within RN-BSN programs, and underscored the importance of those experiences in the transformation of nurses returning for their baccalaureate degree.

The theme of *Emotional Evolution* was also not found in the previous literature. Although many studies of RN-BSN education have discussed specific emotions related to the overall educational experience, they focused on barriers and incentives to entering and completing programs. There is ample research [10,11] to document the fear experienced by adult students as they consider entering baccalaureate programs as well as concerns about balancing work, family, and school [14] There is also research [19] discussing the various emotions that students experience as they encounter either support or negative reactions from workplace peers or friends and family members. There was less research chronicling the emotional transition of students from start to finish of a RN-BSN program. Although most educators would probably be optimistic in their belief that students would evolve emotionally throughout their educational experience, these participants confirmed that there is immense potential to produce affective change in RN-BSN students. This provides concrete information about a relatively intangible aspect of nursing professionalism; the emotional health of the nurse. *Emotional Evolution* speaks to the ability of nurse educators to assist students to understand their unique experiences and assume a higher level of emotional intelligence as a result of additional education.

The theme *Seeing the Big Picture* was the most pervasive during interviews. Every nurse felt personal professional competency was enhanced while moving through the curriculum, graduation, and remained in professional practice following completion of the program. Although descriptions varied considerably, the overall idea that participants could see patient care through a larger lens was common throughout. With the exception of the Delaney and Piscopo [19] study, this particular theme was not described in recent RN-BSN research. The idea that students believe their baccalaureate education has the potential to change their perspectives within the healthcare environment speaks to the strength and capacity of RN-BSN programs to shape the views of our current nursing profession. The IOM report [2] discussed that the BSN is imperative in order to provide a stronger foundation for the nursing profession, assist nurses in becoming more effective change agents, and to help adapt to evolving models of care. Nursing academicians need to remain focused on teaching germane content to students that they can use within their current practice. Continued efforts must integrate information in the curriculum that includes public policy, healthcare reform, and health promotion/disease prevention, so that practicing nurses become more aware of the global facets of health beyond the individual care that they provide to patients at the bedside.

Three of the themes found in this study have been consistently discussed in the literature: *Opening Doors to New Opportunities*, [11,20] the *Workplace "Push"*, and *Perceptions of Professionalism* [21]. In the past decade, many healthcare facilities have changed their hiring practices to a philosophy in which they prefer to hire baccalaureate-prepared nurses. Nursing education has an opportunity, based on these themes, to generate enthusiasm for the idea of baccalaureate education. Rather than placing nurses in a position in which they feel forced to return to academia for the BSN degree, nurse educators have the chance to present further education as a gateway to greater opportunities.

The IOM [2] report discussed that nursing education should "serve as a platform for continued lifelong learning", but it is not the sole responsibility of academicians to create a nursing workforce that embraces education and understands the need for perpetual learning. The workplace has the opportunity to foster this thinking as well, and encourage nurses, in whatever means possible to continue learning. Prior research has shown that nurses perceive the support of their nurse management and co-workers as essential for their success while in school. [13] This assistance may take the form of tuition reimbursement, or flexible scheduling to accommodate responsibilities associated with educational programs. Regardless of the manner in which workplace support is provided, it must be evident to nurses returning to RN-BSN programs. Without it, these nurses may perceive a lack of workplace encouragement which may have negative implications for their overall job satisfaction.

4.1. Limitations

This study was conducted using participants that graduated from a RN-BSN program within the past 2-3 years. Although using semi-structured interviews allowed the participants to guide the direction of the interview, uncovering the commonalities amongst the interviews was the responsibility of the researcher. Throughout the research endeavor, there was an attempt to determine themes within the data; however, at times those themes were not readily apparent until heard multiple times. Future research could possibly be conducted in a focus group format. Conducting research in carefully organized focus groups may allow other members within the group to recall or be reminded of similar situations in their clinical practice. Conducting data collection in a group format may allow RN-BSN graduates to generate new stories from other participants.

A majority of the participants (90%) were female, with only one male nurse interviewed as a part of this study. Although this closely resembles the current culture of the nursing profession, having a predominant number of female participants may have biased the study and allowed an almost entirely female perspective to be heard. Male nurses may have different experiences within the educational process and may provide a unique insight into understanding the phenomenon of RN-BSN students as they return to academia for their baccalaureate degree.

4.2. Future Research

This research has provided additional information about the experiences of associate degree nurses as they navigate the academic environment and attempt to use the knowledge gleaned from their RN-BSN program to make potential changes in their own practice. Future research has the opportunity to provide further understanding of this phenomenon, in order to guide nursing academicians in our continual efforts to foster the development of confident, competent professional nurses.

Further research in the area of RN-BSN program development and implementation has the opportunity to expand our understanding of which elements of the curriculum have the greatest chance to foster the integration of theoretical knowledge learned in the classroom into the practice setting. Focus must remain on outcome based competencies and the accumulation of knowledge that is germane to the student. There is also a need to further understand the role that educators play in supporting the emotional evolution of nurses as they return to academia.

Finally, the issue of workplace support and attitudes of nursing administrators must be assessed to evaluate the extent to which our nursing leaders support the educational process. Nursing administrators have the potential to create unique opportunities for their associate-prepared nurses; perhaps by providing them with paid "release time" from their professional responsibilities so they can focus attention on academic activities. Future research on how the nursing profession can create a climate that truly values education; not just giving "lip service" to the importance of education, but developing an environment that fosters success and facilitates movement of nurses through the learning process.

5. Conclusion

The educational preparation needed for entry into professional nursing practice has been the topic of debate for over four decades. Current research provides nurse educators with a greater understanding of the phenomenon of RN-BSN education and the perceptions of graduates as they complete their baccalaureate degree and continue to practice as professional nurses. This information can be used to guide curricular decisions regarding RN-BSN programs and the specific types of learning opportunities that enhance their educational experience. The nursing profession must work toward the goal of 80% baccalaureate-prepared nurses over the next five years with thoughtful consideration regarding how to assist nurses in their educational journey. It is imperative that nurse educators understand the unique needs of this student population in order to foster their continued professional growth.

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