Transitioning from nurse clinician to nurse educator

The future of nursing and healthcare requires more nurse educators.

By Donelle M. Barnes, PhD, RN, CNE, and Amanda Veesart, PhD, RN, CNE

The U.S. Bureau of Labor Statistics predicts that 500,000 new nurses will be needed between now and 2022 to care for the growing population of Americans with chronic conditions, to provide healthcare services required by the baby boom population, and to fill gaps left by retiring nurses. To meet this need, the profession needs more educators. In 2016, a lack of qualified nurses left at least 1,567 faculty vacancies in the United States. As many as 64,067 qualified applicants were turned away from nursing schools because of a lack of faculty, clinical sites, classroom space, and clinical preceptors, according to the American Association of Colleges of Nursing.

The nursing profession desperately needs part-time and full-time clinical nurse educators. If you’ve considered transitioning to a teaching role but don’t know where to begin, start by examining your motivation, being open to becoming a novice again, and learning new skills.

Examine your motivation
To ensure you’re making the move from clinician to educator for the right reasons, consider what’s motivating you. The best motivation is a joy of learning for yourself and the desire to share what you know, taking your focus on positive patient outcomes and aiming it at positive learning outcomes so that new nurses can continue the tradition of excellent patient care. Many nurse educators describe teaching as an opportunity to touch more patient lives through nursing students than they could have on their own.

You’ll reap personal and professional benefits as well. As you learn your new role, you’ll feel revitalized and challenged. Rather than providing patient care, you’ll describe what you do and why, lead by example, and serve as a role model. And as a novice educator, you’ll likely develop empathy for nursing students who are themselves novices.

To become a competent nurse educator, you’ll need to go through a process of self-assessment, evaluating your temperament to teach and your personal attitudes about students and the educational process. The goal is congruence between...
Incorporate these steps into your journey from expert nurse clinician to educator.

1. Observe experienced educators in clinical settings and the classroom. Ask for permission first and arrange acceptable times.
2. Volunteer to precept an undergraduate student in your clinical site. If your organization has a preceptor training program, complete that first.
3. To experience the educator role before making a commitment, teach one course or clinical group part-time while still employed as a full-time clinician.
4. Look for new faculty orientation and development education opportunities at your organization and online.
5. Read articles and books about nursing education. You can find them via literature searches at a hospital or university library.
6. If you plan to become a full-time educator, get your master’s degree or post-master’s certificate in nursing education, in addition to your clinical degree.
7. If you decide to get a nursing education degree, look for schools with new faculty mentoring programs. If they don’t have one, ask to be assigned to an experienced faculty mentor and ask many questions.
8. Attend national nursing education conferences, such as the National League for Nursing (nlfn.org) or the American Association of Colleges of Nursing (aacnnursing.org). Attend as many sessions as you can on topics that fit your new role.

You can find more information about nurse education at americannursetoday.com/2018-education-guide/

who you really are and how you present yourself as an educator.

Be a novice
You may be an expert clinician, but you won’t automatically be an expert educator. Being a novice can be unsettling and scary, especially if you’re coming from a leadership position. In fact, some nurses give up on the transition to the new role almost before they begin. Becoming a novice educator requires a certain degree of self-confidence to learn new skills, but also a degree of humility. New educators make mistakes, so you must be willing to accept responsibility for them and learn to do better. You also must be able to leave your comfort zone and step into the unknown, which can be both scary and exciting.

Some of the new knowledge you’ll need to acquire includes active teaching strategies, examination writing, and student evaluation. You may never have heard of test item analysis, for example, but it’s a skill you’ll need when giving multiple-choice examinations. You’ll also encounter new legal guidelines, such as the Family Educational Rights and Privacy Act. And working with students (and fellow faculty) will require you to hone your communication, respect, compassion, integrity, and sensitivity skills. In addition, you’ll need to learn how to assess students and mentor those who are struggling.

Learn by doing
Transitioning into a nurse educator role can be frustrating because the process isn’t always clear or well explained by current experts, and some new educators feel as if they’re thrown into the role with little real training or mentoring. If you’re interested in precepting nursing students at your current clinical site, you won’t need an academic degree, but you may need to participate in your organization’s preceptor training program (if it has one). If your goal is to become a full-time nurse educator, consider completing a master’s degree in nursing education.

Whatever your goal, begin by observing expert educators—in classrooms, clinical sites, and offices. Ask a nurse educator to be your informal mentor. He or she can describe common work experiences, answer questions, and give advice. A solid orientation, faculty development sessions, and consistent mentoring can make the transition to educator less stressful.

Training the next generation
The nursing profession needs more educators to train more nurses to serve the healthcare needs in all of our communities. Current clinicians need to consider training the next generation of nurses in part-time or full-time positions, in community colleges, and in 4-year universities.

Donelle M. Barnes is an associate professor of nursing at the University of Texas at Arlington. Amanda Veesart is an assistant professor and program director at Texas Tech University Health Sciences Center in Lubbock.

Selected references
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