

Veterans Caring for Veterans Through an Academic Practice Partnership

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Author Note

This article describes the Academic Practice Partnership (APP) between an urban college of nursing and VA Medical Center for the purpose of meeting the objectives of NEPQR-Veteran's BSN program. Funding for the project was made possible by HRSA grant number UF1HP28521. The evaluation of the APP was done evaluate the relationship developed by the APP and did not require IRB approval. There are no financial disclosures outside of salary support for Drs. Oliver-McNeil and Farner as part of the grant funding.

Abstract

Academic nurse leaders collaborate with clinical leaders on a variety of issues. A successful academic-practice partnership is based on trust, mutual goals, and open communication. The purpose of this article is to 1) describe the expansion of an academic-practice partnership (APP) between an urban public research-intensive university with a BSN track for military

veterans and a Veterans Administration Medical Center (VAMC) and 2) to describe the three year impact of the APP on both institutions by exploring the strengths, weaknesses, opportunities and threats (SWOT). Leaders from the VAMC, clinical faculty for the veteran students and a representative from the university's Office of Military and Veteran Academic Excellence completed the SWOT survey. Results of the SWOT analysis included the benefit of prompt communication and resolution of issues that threatened student experiences, enhancing areas of student educational experiences, and the recruitment of qualified students. The results of the SWOT analysis were used to improve student processes for a quality clinical experience. Communication that was developed through the APP meet the students and faculty needs.

Keywords: Academic Practice Partnership, SWOT analysis, Veteran education

Introduction of an Academic Practice Partnership

Nurse leaders in academia and service have a long history of collaborating with external stakeholders. A systematic review of academic practice partnerships (APPs) found that prerequisites for successful partnerships “start with self and mutual assessments of strengths and opportunities” (Beal, 2012, p. 2). Critical factors to a successful partnership include mutual trust and respect, shared commitment and goals, open communication, and institutional leadership support. The current literature describes the support of APPs using success metrics, focusing on patient and student outcomes, and striving to meet the needs of both the academic institution and clinical partner. Partnerships take time to develop but can provide benefits to both nursing educational institutions and healthcare organizations (Beal, 2012; Didion, 2013).

The development of APPs has the potential to meet the needs of academic centers and healthcare systems in the 21st century (Didion, 2013; Sebastian et al., 2018; Sadeghnezhad, Heshmati Nabavi, Najafi, Kareshki, & Esmaily, 2018). APPs have been shown to meet student educational needs while maintaining patient satisfaction (Sheldon et al., 2012; Smith, Hendrix, Lewis, Norma, & Lutenbacher, 2014). Additionally, faculty who are afforded the opportunity to maintain or enhance clinical competencies through APPs can develop deeper understanding of significant clinical questions and research opportunities (Didion, 2013).

The development of an APP between a Veteran Affairs Medical Center (VAMC) and a College of Nursing (CON) has been shown to be beneficial to both parties (Needleman, Bowman, Wyte-Lake, & Dobalian, 2014; Swenty, Schaar, & Butler, 2016). VAMCs can provide clinical sites for nursing students as well as professional development for their registered nurses (RNs). Faculty and students are exposed to the care of this unique patient population, thus gaining awareness of both veteran culture and the health care needs of veterans. Additionally, Veterans' Administration (VA) institutional leadership is then provided with a pool of graduates for potential recruitment (Sheldon et al., 2012). Expanding this partnership to focus on educating military veterans within the VAMC provides a special opportunity for both parties.

The purpose of this article is to: 1) describe the expansion of an APP between an urban public research-intensive university with a military veteran Bachelor of Science in Nursing (BSN) track and a VAMC, and 2) to describe the impact of the APP at year three on both institutions by exploring the strengths and weaknesses, opportunities and threats (SWOT).

Purpose of Building a Successful Academic Practice Partnership

Per the National Center for Veteran Analysis and Statistics, there are nearly 22 million veterans in the United States (2019). In 2018, the State of Michigan was home to approximately 608,000 of those veterans. Nationally, 9.05 million military veterans receive health care through one of 1,700 VA sites. The VA health system employs over 80,000 nurses nationwide, focusing on quality care to military veterans (Office of Nursing Service, 2018).

To address the need of having well-educated RNs in the workforce, the VA established the Veteran Affairs Nurse Academy (VANA) program (Bowman et al., 2011). VANA was a federally funded program that provided mentoring for VA registered nurses as preceptors in the clinical setting, linking them with pre-licensure baccalaureate nursing students. The overarching goals of VANA were to provide the VA nursing staff professional development opportunities, and the pre-licensure student with potential post-graduation employment (Bowman et al., 2011; Harper et al., 2016; Sikes et al., 2017). The concept of VAMC and CON practice partnership was a major component of the VANA program (Needleman et al., 2014). It provided VAMCs and CONs with a framework for partnership development by providing the means to recognize and address issues that may arise when blending two different cultures (Needleman et al., 2014).

The Health Resources and Services Administration (HRSA) funded the Nurse Education, Practice, Quality and Retention (NEPQR): Veterans' Bachelor of Science Degree in Nursing Program (VBSN) in 2013. This grant provided an opportunity to develop an innovative APP, building upon the success of VANA program, and to implement a VBSN program in an urban university. The Wayne State University College of Nursing (WSU-CON) was interested in creating such a program to support military veterans transitioning into civilian nursing careers. An APP was initiated by the Detroit VAMC and leadership of WSU-CON in the grant application. A sense of shared purpose was developed with the collaborative effort required to write the grant. The writing team recognized the uniqueness of a program where military veterans would be cared for by military veteran nursing students. WSU-CON was committed to the academic success of military veterans, and the VAMC was committed to providing interested staff with access to a University system (Pearson et al., 2015). The APP between the VAMC and WSU-CON was unique: military veteran nursing students cared for military veteran patients under the guidance of a military veteran clinical instructor.

The goals of the VBSN were to recruit and retain military veterans in a baccalaureate nursing program, to increase nursing faculty knowledge about military culture, and to reduce barriers for military veteran students that would prevent them from graduating (Elliot, 2015). Several colleges and universities throughout the United States received three-year grant funding (D'Aoust, Rossiter, & Clochesy, 2016; D'Aoust, Rossiter, Itle, & Clochesy, 2016). In 2015, WSU-CON became the third group of HRSA VBSN grant recipients. The VAMC nursing leadership sought to enhance the clinical partner relationship with WSU-CON to build on the success of VANA, as well as provide the VA staff nurses with opportunities for professional growth through clinical preceptorships (Needleman et al., 2014; Westwood, Richardson, Latter, Macleod Clark, & Fader, 2018). The partnership increased the opportunity for the VAMC to provide nursing students with VA-specific clinical experiences with a goal of retaining them post-graduation, and thus avoiding long orientations of new RNs lacking such experience

(Bowman et al., 2011; Harper et al., 2016). The VA, as well as the advisory board, provided support services to assess and screen the VBSN students for traumatic brain injury, and post-traumatic stress disorder (Elliot, 2015). The combination of resources and clinical placement opportunities provided a strong, effective APP to meet the needs of military veteran nursing students (Elliot, 2015).

The primary focus of the APP was meeting the educational needs of veteran nursing students. Program evaluations were conducted to determine whether the APP was meeting those goals. Orr (2013) advocated the use of strength-weakness-opportunity-threats (SWOT) analysis for education program evaluation. An integrated literature review described the benefits of SWOT analysis for planning and process changes (Helms & Nixon, 2010). SWOT analysis includes discerning organizational and program strengths and weaknesses while anticipating external opportunities and threats. This type of analysis is especially important for both public universities and governmental agencies (Helms & Nixon, 2010).

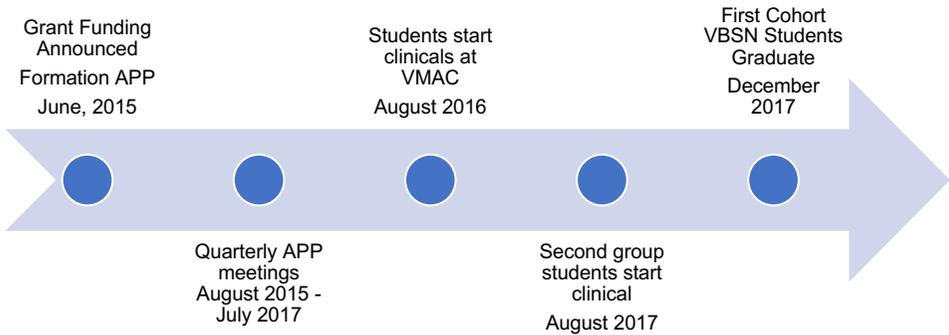
One of the critical objectives of the WSU CON-VAMC VBSN program was to develop an advisory board to ensure the success and long-term sustainability of the APP and to institute many of the essential aspects of a successful APP (Beal, 2012). The advisory board purpose, frequency of meetings, and membership roles and responsibilities were addressed within the proposal. The advisory board consisted of John D. Dingell VAMC key personnel, military community personnel with regional unit/base access, WSU CON faculty and students, nursing administration from both organizations, and other community leaders dedicated to the needs of veterans. The John D. Dingell VA Hospital was selected because it is a comprehensive medical center and veterans counseling center, and is close to the WSU CON.

The VAMC provided nursing leadership, core staff members, and military community stakeholders. Wayne State University provided nursing leadership, the project director, leaders from the Office of Military and Veteran Academic Excellence (OMVAE), and a Veteran BSN student. Meetings were held every quarter for the first two years of the grant and then every six months thereafter. The meetings focused on assessing the strengths, weaknesses, and areas for improvement to support the program. Location of the meetings alternated between the WSU CON and the VAMC, providing an opportunity to not only share the burden of transportation between the facilities, but to directly experience each other's facilities and cultures.

The board meetings also served to accelerate trust-building between each organizations' nursing administration and leadership and provided a regular vehicle for clear and transparent communication. The quarterly meetings in the first year of grant funding allowed a relationship to develop prior to student clinicals at the VAMC. This relationship allowed for more insightful planning of these experiences. This early relationship was essential to student success in the VAMC clinical sites (Elliot & Patterson, 2017).

Another goal of the advisory board was the clinical experiences of the VBSN students would be rigorous. The assigning of students to appropriate units each semester was a priority. The VAMC coordinated clinical experiences while managing new hire orientation and the facility's limited number of inpatient beds.

Time Line of Academic Practice Partnership



VBSN Program Implementation

The goals of the VBSN program included: 1). Improving academic performance and retention of the students in the VBSN program, and 2). Increasing student and faculty awareness of the unique needs and culture of military veteran students. WSU CON and the VAMC collaborated on identifying and addressing the potential barriers a veteran student might encounter and could prevent progression in the program (Osbourne, 2014). Military veterans are at risk for post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI) (Elliot, 2015). These two health issues result in concentration and memory difficulties, flashbacks, and anxiety. The VAMC was able to provide comprehensive medical care to address these issues. Students were screened upon discharge from the military, and their medical problems were controlled before entry into the program.

Leadership from the VAMC and WSU CON were committed to having VBSN students caring for veterans. The APP facilitated essential communication to identify areas within the VAMC that matched the course objectives. Communication between institutions, coupled with pre-semester meetings with the program director, VBSN clinical instructor, and unit leaders, ensured that the selected units met course objectives. The VBSN clinical instructor reported the student experiences along with available patient populations to the CON's course coordinator. These reports were the basis of monitoring for quality and provided feedback.

Evaluating the Partnership Through the VBSN Program

Near the end of the third year of grant funding, feedback was solicited from four individuals with the most interaction between the two institutions and VBSN students, who were involved on the beginning of the development of the advisory board. This formative evaluation included two members of leadership from the VAMC, one person from WSU CON, and a WSU representative from the OMVAE. The feedback was used to assess whether VBSN student needs were being met through the APP. The survey items were focused on the strengths and weaknesses, opportunities, and threats of the VBSN program and the clinical partnership. This feedback offered the team an opportunity to work toward sustainability (Helms, & Nixon 2010; Beals, 2012). The purpose of the survey was to reflect on the positive aspects' relationship and areas of difficulty, as well as the exploration of improvement opportunities.

Using an online survey methodology (QualtricsXM), the participants were asked to answer four questions to identify the SWOT of the VBSN program. The questions were:

- 1) What do you see as the major strengths (i.e., current situation or trends likely to lead to improvement) in place to ensure the success of the VBSN program?
- 2) What do you see as the weaknesses (i.e., factors compromising the achievement of central goals) that may hinder the success of the VBSN program?
- 3) What do you see as the opportunities (i.e., practical openings that will result in change) that will increase the success of the VBSN program?
- 4) What are the threats (i.e., external factors that impede progress) that may hinder the success of the VBSN program?

The WSU-CON Data Manager de-identified the results prior to the content analysis. All the responses under each section were aggregated for respondent confidentiality. Complete results are seen in Appendix A at the conclusion of this article.

Survey Results

Strengths of the Partnership

Two primary strengths were identified in the survey: collaboration and benefits to student education. One of the defining strengths of the partnership between the VAMC and WSU CON program was a willingness to collaborate to meet the shared goals of the VBSN program. Representatives of the VAMC and the WSU CON VBSN program frequently met to discuss progress and to troubleshoot issues as they arose. VAMC leadership sought feedback from the instructors and program director of the VBSN program regularly, and select administrators were available to clinical faculty nearly every time the students met for clinical at the VAMC. These findings are consistent with the assertions by Toderò, Long, and Hair (2015) that frequent communication is essential in forming and sustaining partnerships.

The VAMC provided the opportunity for many off-unit student experiences, such as the operating room, intensive care unit, and inpatient rehabilitation, which was easier than arranging the non-veteran students attending clinicals at the other local hospitals. Students were assigned to care for patients that dwelled at or utilized care at community sites (identified through the VAMC), allowing for experiences across the entire system.

Another strength identified was the benefit to student education. Foremost, the team cited the opportunity for students and patients to form meaningful relationships with the patients as a major student education enhancement. Students were able to quickly forge therapeutic relationships with their patients as a result of shared military service history. The students reported that due to that level of trust, the provision of care was enhanced. Likewise, Toderò et al. (2015) noted the students providing care within the VAMC improved their knowledge of how to care for veterans in the population, regardless of setting.

The students felt their clinical experiences at the VAMC gave them an idea of what it would be like if they took a job at the facility after graduation. This was supported by Toderò

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et al. (2015), who also noted that having clinical experiences at the VAMC may decrease orientation and transition times after hire. Approximately 12 percent of nurses leave their positions with the VAMC within their first year (United States Government Accountability Office [U.S. GAO], 2015), providing the students with opportunities for acculturation into the environment of the VAMC before being hired may reduce this attrition rate.

One of the respondents provided a summary of what the APP did for nurses and the nursing students:

Synergy between the WSU College of Nursing and the John D. Dingell VA Medical Center. Other VBSN schools do not have such a relationship. Educating Veterans to be nurses in a military friendly institute with the help of a VA Medical Center is probably a unique situation. This relationship creates an opportunity for both entities to learn from their individual service to this country. Routinely we hear the words, “thank you for your service” as it relates to our veterans but seldom do we hear “thank you for your service” when speaking of nurses or other service oriented careers. This relationship forges that understanding and demonstrates the value in each of us.

Weaknesses of the Partnership

Despite the strengths of the VAMC/WSU-CON partnership, the survey revealed some notable weaknesses. The weaknesses centered around both the VAMC system challenges and the VBSN program design at the WSU CON. One of the weaknesses of the program was related to the patient demographic at the VAMC. The students’ experiences at the VAMC provided them with many opportunities to care for patients with complex physical and psychological needs. The patients in the VAMC were not representative of the patients in the non-VA hospitals in the same geographic region. The homogeneity of the patient population, primarily older Caucasian or African American males, the VAMC resulted in the VBSN students not caring for a sufficient number of patients who were female or from racial, ethnic, or cultural backgrounds commonly represented in metro Detroit. All of the patients spoke English, and most were literate. Given the racial, cultural, and socioeconomic diversity of Detroit, the patients at the VAMC were not representative of the range of patients treated in other facilities. Discussions with the advisory board led to the determination that VBSN students would be assigned to clinics with more diverse patient populations as part of their immersion experience in their final professional nursing course. VAMC leadership agreed that the VBSN students would benefit from experiences outside of the VAMC without jeopardizing the APP agreement.

Though the VBSN students had fewer opportunities than their non-veteran peers to care for patients with diverse gender, racial, and cultural backgrounds, they did have the unique opportunity to learn to provide care to veterans, a group which has a culture of its own. Most veterans seek care outside of the VAMC (Miltner et al., 2013), many nurses will end up providing care for veterans during their career, regardless of where they work. Veterans have high rates of PTSD, TBI, and chronic multisymptomatic illness (CMS), among other special healthcare needs (Johnson et al., 2013; Miltner et al., 2013). Many healthcare providers outside of the VA lack experience working with veterans (Kilpatrick, Best, Smith, Kudler, & Cornelison-Grant, 2011). The students who completed most of their clinical training at the VAMC will have a particular advantage in working with this special patient population, regardless of where they gain employment after graduation.

An initial challenge met by students at the start of the program was their integration into nursing units who had little to no experience in precepting students in their clinical rotations. Early on, perceived value differences between the VAMC clinicians and the students led some students to feel that the nursing staff was dismissive of students' inputs or that the staff "worked around them," rather than with them. Lovecchio, DiMattio, and Hudacek (2015) correlate student satisfaction with program retention and completion, grade point average (GPA), and employment preparation. Given this relationship, facilitators of the VBSN program had strong motivations to improve the rapport between the students and the VAMC nurses.

These problems are not unique to the VBSN program. Todero et al., (2015) also found clashes between the academic and clinical cultures early in their program, and Lovecchio et al. (2015) noted clinical environments often did not live up to student expectations. As with Todero et al., (2015), acknowledging the problem within the APP allowed for an open discussion with VAMC leadership, which led to leadership facilitating training and mentorship for the staff. Additionally, having a consistent faculty member working with the students led to an improved trusting relationship between the faculty member, the nurse manager, and the staff nurses on the unit. This is consistent with assertion by Todero et al. (2015) "Visibility earn[s] credibility" (p. 48). These problems were reported less frequently by subsequent VBSN cohorts as a result.

One of the reports from the students was that the VA on-boarding was a complex and lengthy process. Compared to their non-veteran peers, their on-boarding was perceived as to take much longer. WSU utilizes a third-party organization to assist with the clinical on-boarding for most of the institutions in which clinicals are held. In this system, the students essentially go through the vetting process on admission to the nursing program, and the information is stored with the third-party on-boarding organization. This organization then serves to examine the student for the institution the student will be undergoing clinicals.

The VAMC is not part of this third-party system and the students were initially required to go through the on-boarding process directly with the VA. While it is true that the initial process required more involvement from the students, they underwent the same vetting process as new employees, which is designed to ensure the safety and security of the patients within the VAMC system (Danielson et al., 2018). The advisory board recognized the VBSN students could find this frustrating as it meant some students (and faculty) were required to repeat steps multiple times. The trust and communication developed through the APP allowed both parties to quickly resolve issues to avoid disrupting student education. The VAMC was able to develop process changes to reduce the burden on students and faculty. The more cohorts of VBSN students who went through the on-boarding process, the smoother the process became.

Opportunities for the Partnership

Two opportunities were described by stakeholders: student-to-staff education and program marketing to other veterans in the VAMC system. The VBSN students were able to provide the nursing staff with current evidence-based practice guidelines for treating people with different illnesses and injuries. Students were required to work with a nurse manager on implementing change as part of their VBSN leadership course. The clinical faculty for this course was an off-duty VAMC administrator also serving as a member of the advisory board. This individual facilitated the relationship between the nursing units. He identified unit managers willing

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to work with students and assisted the unit managers in identifying appropriate quality improvement projects for the students' education level. The VBSN students were able to initiate sustainable changes throughout several units in the VAMC. Having the students complete these projects allowed for the provision of "educational and practice innovations" (Miltner et al., 2015, p. 265), benefitting not just the VAMC, but also the future VBSN students.

The partnership between the WSU CON and the VAMC also provided opportunities for disseminating information regarding the VBSN program. Veteran staff members who were interested in advancing their career in nursing were introduced to the VBSN program through their interactions with the veteran students. Facility veteran staff members may have recognized the VBSN program as their own opportunity to pursue a BSN, as more than one of the Licensed Practical Nurses (LPNs) inquired about the program. Toderia et al. (2015) noted similar interests in advancing education with the clinicians in their study.

Threats to the Partnership

Survey participants identified two potential threats to the APP and the success of the VBSN program: the unique needs of the military veterans transitioning to academia and the potential for recruitment of qualified candidates to the program. The decision was made not to evaluate potential external threats at this time, as the advisory board determined that it was best to focus efforts on improving internal issues first.

The VBSN students are non-traditional students, as most of them are older, with the inherent stressors and responsibilities of adulthood, such as jobs, spouses, children, and mortgages. In addition to the challenges faced by non-traditional students, veterans may be dealing with stressors unique to their status as veterans. As noted, veterans face high rates of PTSD, TBI, and CMS, which may affect their academics. Also, some veterans may have trouble adjusting to civilian life, as they are used to living within the military culture (Voelpel, Escallier, Fullerton, & Rodriguez, 2018). The WSU- CON partnered with Wayne State's OMVAE to ensure resources were in place to support the special needs of these veterans prior to their admission to the program. One of these resources included having a clinical faculty member who was also a veteran, as she was able to identify and intervene when she noticed VBSN students having a difficult time with particular stressors. For example, a unit nurse once dropped a paper chart next to one of the VBSN students unexpectedly. The faculty member recognized the PTSD trigger with this particular student and intervened before the student's symptoms escalated.

The admission requirements to the VBSN program were perceived as a weakness by some of the survey participants. Baccalaureate nursing programs have notoriously competitive admission requirements, often limited to standardized grading metrics (e.g. GPA). The WSU CON requires a minimum GPA of 3.0 to be considered for admission into the second-degree and traditional nursing programs. However, with the average admission GPA of 3.7, there was only a 20 percent acceptance rate of otherwise qualified candidates to the second-degree program. The NCLEX first time pass rate for WSU-CON ranges between 100-95%, with the VBSN students' numbers included in the WSU-CON numbers. A total of 32 students have been admitted to the VBSN program over a four-year period, with a 100% retention rate. Currently only 15 VBSN have taken the NCLEX exam with 14 passing on the first attempt, and passed on the second attempt taking shortly after the first attempt. Eight additional

VBSN students graduated in December, 2019 and will be taking the NCLEX in 2020. WSU CON utilized a holistic admission process to determine appropriate candidates for the VBSN program. Holistic admissions have been shown to improve diversity in the student body without significant impact to academic outcomes (Zerwic, Scott, McCreary, & Corte, 2018). Recognizing the benefits to this type of admission process, WSU CON began the process of transitioning to holistic admissions for all their undergraduate programs shortly after the VBSN program was initiated.

Reflecting on the Partnership

The relationship between WSU CON and VAMC demonstrated the development of a successful APP. The resulting communication between the two facilities has enriched opportunities in both organizations, despite the challenges of competing responsibilities on the part of students, nursing faculty, and VA staff. Even though the patient population was predominately male and did not represent the diversity of the urban environment, the complexity of the patient's health issues, and unique veteran culture provided excellent opportunities for students to think critically and to learn to care for vulnerable populations. In addition, all the students noted they felt honored to provide care for veterans. Veterans caring for veterans allowed the opportunity to share military experiences and to deepen patient-provider relationships.

The development of the advisory board and meetings prior to the students' arrival for clinical experiences allowed time for relationships to be formed between leadership, clinical faculty, and university veteran support services. Development of trust is vital in academic-clinical partnerships, which held true for this relationship (Beal, 2012; Dobalian et al., 2014). Face to face meetings and joint planning to achieve the goals and objectives for the VBSN program resulted in the successful implementation and sustainability of the program. The advisory board facilitated the ability to address issues requiring immediate attention, such as the expiration of student computer access, on-boarding process changes, and clinical practice unit assignment. The team could rely on each other and receive an immediate response from one of the members of the advisory board.

The patients in the VAMC often present with complicated physiological, mental, and social issues. The partnership between the VAMC and the VBSN program provided the students with the opportunity to work with patients with multiple comorbidities throughout their program, beginning with their first clinical course, *Nursing Fundamentals*, and finishing with their community health rotation. In addition to developing strong assessment skills, the students were able to plan for continuity care within a healthcare system offering onsite integrated health care, since they were provided with the opportunity to learn about the system first-hand. Many patients receive their healthcare in a variety of settings within the VA health system, providing the students with a unique opportunity to see the advantages of having access to health care (when fragmentation was reduced). For example, throughout their program, students cared for patients in the VA's long-term care, hospice, inpatient rehabilitation, psychiatric, and acute care units, as well as in community health facilities.

The VAMC provides inpatient and outpatient physical and mental health care, as well as outreach and care for veterans in the community. Given the breadth of practice in the VAMC,

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students were able to complete most of their clinical rotations within the system. Since the students did not have to orient to a new health system each semester, they had more time for clinical interactions with patients. Many of the patients in the students' clinical rotations receive all their healthcare through the VAMC, including primary care visits, laboratory and diagnostic testing, as well as acute care management. Having access to a patient's entire medical record provided students with the opportunity to see how a comprehensive healthcare system could improve continuity of care.

Even though most students did not apply as new graduates to the VAMC, some of them considered working in a VA health system in the future, and one was hired to the VAMC within a year of her graduation. Limited RN positions for new graduates at the VAMC discouraged prevented many of the students from applying to the VAMC. The students in the VBSN program have experience in caring for military veterans, and their experiences can be translated into the civilian arena. Since many veterans do not receive care through the VAMC, the extensive experience caring for veterans may assist peers in civilian hospitals by being a resource for other nurses.

Despite the VANA experiences, the VAMC nursing units had minimal exposure to students from baccalaureate nursing programs. Although specific staff were identified as mentors who were educated to be preceptors, the mentors were not always available to the VBSN students. The mentors were aware of how to identify best practice from the literature, whereas other staff members were more likely to focus on completing tasks. This focus provided an experience more closely resembling real-life for the students. Even though the students were frustrated with the perceived gap between reality and classroom teachings, this frustration is not uncommon to all nursing students (Tiwaken, Caranto, & David, 2015). The more exposure to the VBSN students clinical training and the more the staff learned about the program, the higher the staff satisfaction became, evidenced by an increased willingness to work with the students. This result aligns with the findings from the VANA program (Pearson et al., 2015). According to Pearson et al. (2015), over half of the nurses who were exposed to the VANA program saw a "moderate or substantial increase in [evidence-based practice] EBP activities" (p.3). The students' clinical experiences allow them to translate didactic knowledge into practice with veterans, which could pave the way for including senior-level students and recent graduates in program development at the VAMC. Nurses who participated in the VANA survey reported that exposure to that program directly influenced their decision to return to school to pursue higher education (Pearson et al., 2015).

The advisory board and the close working relationship between the VAMC and the WSU CON facilitated feedback to the VAMC nursing leadership at all levels. Process improvement projects were put into place, starting with student feedback. Nursing faculty were able to meet with the nurse educator to identify and remedy issues that interfered with student educational experiences, thus reducing barriers.

As the program progressed, a commitment to continuing the VBSN program outside of funding was approved by WSU-CON administration. Support from the VAMC and the WSU CON to continue the APP will allow future students who are military veterans to continue to use the site for clinical experiences. The funding necessary to support tutors and academic counseling continues to be supported by the WSU CON. As a result of this project, financial support for the military veterans BSN track has become a priority for the College of Nursing and Wayne State University.

VBSN programs, based on an APP between the WSU CON and the VAMC and its nursing leadership, may be replicable in other parts of the U.S. The partnership between an academic institution and a local VAMC provided a unique educational experience for the VBSN students in multiple ways. Veterans providing care to veterans is one such experience and a major strength of the program. The partnership provided an opportunity for the VAMC nurses to enhance their professional growth following the VANA experience. VBSN graduates have been hired by a variety of institutions in the area, thus moving toward the reduction of the nursing shortage.

The experience was largely successful due to the transparent and collegial communication between WSU CON's and VAMC's leadership and co-coordinators of the project. Commitment to the students provided the groundwork for providing students with clinical experiences meeting the objectives of the courses. The partnership led to procedures designed to diminish the challenge of the unique on-boarding process at the VAMC, allowing for timely communication to faculty and students and avoiding gaps in clinical time. Working with the VAMC nursing leadership, the team was able to change the culture on the units, which enhanced the receptivity to students and offered the nursing staff an opportunity to engage in professional development. Both organizations deemed the project a success and look forward to a continued academic clinical partnership with future cohorts of students.

Appendix A: SWOT Analysis

Questions	Answers
Strengths: What do you see as the major strengths in place to ensure the success of the VBSN program?	<p>Strong partnership between WSU and the VA. Past experiences with academic partnerships. Success in previous implementations.</p>
	<p>Student hands on experience with veterans gain an understanding of the complex co-morbidities of veteran with chronic disease and life factors.</p>
	<p>The ability to have veteran professors/faculty at the helm is a great advantage for the students.</p>
	<p>Having a partnership with the VA affords the students and faculty a unique and rich clinical experience.</p>
	<p>The support of the leadership of each organization has fostered a great collaboration.</p>
	<p>Synergy between the WSU College of Nursing and the John D. Dingell VA Medical Center. Other VBSN schools do not have such a relationship. Educating Veterans to be nurses in a military friendly institute with the help of a VA Medical Center is probably a unique situation. This relationship creates an opportunity for both entities to learn from their individual service to this country. Routinely we hear the words, “thank you for your service” as it relates to our veterans but seldom do we hear “thank you for your service” when speaking of nurses or other service oriented careers. This relationship forges that understanding and demonstrates the value in each of us.</p>
	<p>One of the defining strengths of the relationship between the VAMC and the VBSN program was the VAMC administration’s enthusiasm and interest in the program.</p>
	<p>Leadership at the VAMC frequently sought out feedback from the instructors and director of the VBSN program. They were very accommodating</p>

in getting students into off-unit observation experiences, such as the operating room or in-patient rehabilitation.

The Detroit VAMC provides in-patient and outpatient physical and mental health care, as well as outreach and care for veterans in the community. Given the breadth of practice of the VAMC, the students were able to complete most of their clinicals within the system. Since the students did not have to take the time to orient to a new health system each semester, they were afforded more time for clinical interactions with patients.

Weaknesses: What do you see as the weaknesses (that may hinder the success of the VBSN program?

Lack of formal OB and pediatrics. Although we offer women's health, the program does not take advantage of it.

Nursing lab research integration.

What I see as a clear weakness in competition. The VBSN lets veterans compete against other veterans for 8 spots in a nationally recognized program. We need great quality to keep it competitive. It would be tragic for us to compromise the quality of our College of Nursing to keep 8 spots filled each year. For that reason, I think we need to find greater pools of candidates so that we can clearly select from the best candidates.

Difficulty working within a medical center that was had complicated processes and outdated systems.

Opportunities: What do you see as the opportunities that will increase the success of the VBSN program?

Build on experiences with women's health care and chronic disease management beyond obstetrics.

Enhance experiences in emergency care and procedures.

More use of research opportunities for nursing students related to lab experiences better marketing of services provided an opportunity.

Including the senior/ graduates in future program development

Greater exposure to increase program awareness of the VBSN program in general.

The Forever GI Bill as an opportunity. The time limit on its usage has been lifted so that a service member can take their time after active duty and enter college or university when they are ready. This may bring an older student but probably a better prepared student.

The diversity of the participants.

As veterans, the students were often able to form therapeutic relationships with the patients quickly. Some of the students were able to recognize and respond to patients with post-traumatic stress disorder (PTSD).

The patients in the VAMC have physiological, mental, and social issues that are not seen as frequently in non-federal hospitals. This provided the students the opportunity to work with highly complex patients that they might not have had at other institutions.

Threats: What are the threats that may hinder the success of the VBSN program?

With the exception of personal or community bias, I do not see any at this time.

Mental health and funding. There are many highly qualified, overly experienced combat medics and corpsman that need additional support to feel confident enough to apply to any nursing school. Some spend a year or two just to negotiate their pre-requisite courses as they learn to adjust back to being a civilian and into being a scholar. This time reduces their Educational Benefits and as they enter the College of Nursing, they may run out.

The patients in the VAMC and the continuity of care were not representative of the patients in non-VA hospitals.

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