Furthering Nursing Scholarship in Today's Postsecondary Institutions: The Legacy of Ernest Boyer

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Recommended Citation
DOI: https://doi.org/10.17483/2368-6669.1038

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Cover Page Footnote

This article is available in Quality Advancement in Nursing Education - Avancées en formation infirmière: http://qane-afi.casn.ca/journal/vol1/iss3/5
In the inaugural issue of this journal, Duncan, Mahara, and Holmes (2014) provided an insightful and thought-provoking description of the experience of the faculty in one Canadian nursing school in developing their scholarship agenda. Their experiences in meeting institutional and discipline-specific expectations for scholarship serve as a guide for schools embarking on this journey, or perhaps as a map for those stalled at the side of the road. Building on the foundation laid by Duncan et al.’s description of their experiences, I attempt in this paper to situate nursing scholarship in the historical context and current climate in post-secondary education. I assert that nursing faculty members in North America are up to the challenge of “confronting the social mandate for nursing scholarship,” as articulated by Duncan et al., and of developing and advancing scholarship in the colleges and universities in which they work.

Why do I believe this? Ten years ago, I became a member of the Canadian Association of Schools of Nursing (CASN) Accreditation Team. As an accreditation team member, and in other consulting roles, I have reviewed nursing education programs in over 20 venues, in seven out of ten provinces in Canada, and internationally. I have visited baccalaureate nursing programs in colleges, in small community-based undergraduate universities with strong teaching foci, and in some of Canada’s most research-intensive universities. In my travels, I have heard two common themes from faculty teaching in baccalaureate programs:

- My institution doesn’t value/support/recognize the kind of scholarship that I do
- I really just want to teach.

Nursing faculty members are often frustrated with, resentful of or intimidated by the research and scholarship requirements expected of them today. In writing this paper, I aim to assist nursing faculty members understand scholarship in the context of the current trends in research and scholarship in North American post-secondary institutions, and encourage them to engage in initiatives and develop partnerships within and beyond their institutions. I also intend to help nurse academics understand what Duncan et al. referenced as the “social mandate for nursing scholarship”. I hope to help new nursing faculty members and those in post-secondary institutions without an historical mandate for research and scholarship to embrace the scholarship agenda through the documenting and communicating of their stories of successful scholarly endeavours in clinical and educational settings. Sharing their experiences through presentations and publications provides opportunities for members of our profession, and others, to use these ideas to improve health care and health professional education today.

What is Scholarship?

The Canadian Association of Schools of Nursing (CASN), and its sibling organization, the American Association of Colleges of Nursing (AACN), base their accreditation expectations for faculty scholarship on the foundational work of Ernest Boyer (American Association of Colleges of Nursing [AACN], 1999; Boyer, 1990; Canadian Association of Schools of Nursing [CASN], 2013). In baccalaureate nursing education accreditation processes in both the United States and Canada, active innovative programs of scholarship are essential indicators of quality programming. Boyer articulated four areas of scholarship: discovery, teaching, integration, and application (Acorn & Osborne, 2013). Each of Boyer’s domains are briefly reviewed here.

The Scholarship of Discovery

Boyer’s scholarship of discovery corresponds with our traditional view of research—the generation of new knowledge. However, Boyer believed that generating research outcomes is
only part of the benefit of the scholarship of discovery. Of equal importance is the process of discovery itself, and the passion generated by the endeavour. For Boyer, sharing the processes and passion as well as the outcomes spawned in the pursuit of discovery is vital to the enhancement of the teaching and learning environment in higher education (Boyer, 1990). Scholarship is a vital part of teaching, and cannot be separated from it.

The Scholarship of Integration

Boyer believed that restricting the accepted definition of scholarship to the generation of new knowledge limits the possibilities of inquiry for academics and fails to recognize other important work done in pursuit of excellence in the academic enterprise (Boyer, 1990). He spoke of the need to recognize and reward the scholarship of integration. Integrative scholarship takes the knowledge generated in various disciplines and connects it in a unified picture that transcends the work of an individual discipline. It seeks to overcome the isolation and fragmentation of the disciplines (Glassick, Huber, & Maeroff, 1997). Bringing new insight to original research, fitting research findings into larger intellectual patterns, and making links between and among ideas is an important part of the educator’s role in assisting students to make sense of the world.

The Scholarship of Application

Boyer (1990) believed that the scholarship of discovery and of integration “reflect the investigative and synthesizing traditions of academic life” (p. 21). However, it is his description of the scholarship of application that moves scholarship beyond the generation of ideas (discovery), and the intellectual linking of these ideas in a broader intellectual context (integration), to encompass the application of this knowledge to real life problems. Application engages the faculty member with the community at large. This engagement addresses a significant gap between academics and the needs of society. Boyer saw the scholarship of application as providing a link between the academic’s field of expertise and problems in community and society. This engagement is intended to not simply assuage the curiosity of the individual scholar, but for the ultimate benefit of the community and society. The application process is dynamic, with theory and practice entwined. Boyer’s engaged scholars are “reflective practitioners”, in the vernacular of Donald Schon, with theory informing their practice and practice informing theory (Schon, 1983). For Boyer (1990), the scholarship of application is an interactive process that “both applies and contributes to human knowledge” (p. 23). It requires a relationship with the community that informs the need for research, provides an opportunity to implement the findings of research, and allows for evaluation of its success.

Acorn and Osborne (2013) make clear that the scholarship of application is a process of working with the community, not working for them in the traditional paid consultant role of the outside expert. Consultation, policy analysis and program evaluation are all important aspects of the scholarship of application (Allen & Field, 2005). However, Boyer’s view of the relationships surrounding these roles is that of “community as partner”, rather than the “community as client” role that posits the university as the ultimate source of expertise and authority (Mayfield, 2001).

The Scholarship of Teaching

The final domain of scholarship articulated by Boyer is the scholarship of teaching (Boyer, 1990). Boyer viewed teaching as a creative, dynamic process that links theoretical concepts, the teacher’s experience, and the student’s understanding (Acorn & Osborne, 2013;
Allen & Field, 2005; Boyer, 1990). However, Boyer’s initial work on the scholarship of teaching lacked clarity (Acorn & Osborne, 2013). Today, most authors differentiate between scholarly teaching and the scholarship of teaching. Allen and Field (2005) describe the scholarship of teaching as going beyond creative interactions of the individual instructor with students. It develops teaching approaches and resources that transcend the cult of the individual teacher and are available to and replicable by others. It also involves continuous evidence-based evaluation of teaching, learning, curriculum, and administrative policy and processes.

**How Does Scholarly Work Become Scholarship?**

The documentation and public sharing of the creative, active, reflective and critical aspects of scholarly work move it into the realm of scholarship (Acorn & Osborne, 2013; Allen & Field, 2005; Fincher & Work, 2006). The CASN *Position Statement on Scholarship among Nursing Faculty* is clear: In order for scholarly work to be considered scholarship, it must have been made public, must be peer reviewed or critiqued, and must be reproducible by others in building on the work done (CASN, 2013).

Glassick, Huber, and Maeroff (1997) developed standards by which the quality of scholarship could be evaluated. These include the articulation of clear goals; evidence of adequate preparation; use of appropriate methods, chosen wisely, applied effectively and modified thoughtfully as the project evolves; production of significant results; and effectiveness of presentation of outcomes. Diamond and Adam (1993) also developed standards of excellence for evaluating the quality of scholarship endeavours. Their standards include indication that the scholarship activity requires highly developed disciplinary expertise; is innovative, breaking new ground; is documentable (both project and results); is peer reviewable; and has impact (Diamond & Adam, 1993).

This brief summary of the Boyer scholarship framework is intended to aid nurse scholars to think critically about the possibilities for scholarship in their daily lives. However, to fully understand Boyer’s intent, one must know the historical context that provided the impetus for his work, and the relevance of his 1990 work in post-secondary education today.

**Boyer’s Model of Scholarship in Context**

In order to understand Boyer’s model of scholarship, it is important to appreciate the context of higher education at the time he developed it. This knowledge also helps us to connect Boyer’s framework with the current state of scholarship in today’s educational milieu.

Ernest Boyer was the president of the Carnegie Foundation for the Advancement of Teaching. He was motivated to write *Scholarship Reconsidered* by his concern for the state of university teaching and lack of attention to the quality of undergraduate education at the time of his writing. Boyer’s concern related specifically to the way in which faculty time was valued, evaluated, and compensated.

Historically, the traditional mandate of universities has been threefold: research, teaching, and public service (Boyer, 1990). According to Boyer, universities in the post-war period were heavily influenced by their research success in producing the technology that ultimately won World War II. As a result, they prioritized research over their teaching and public service mandates. This occurred despite a major growth in student population as military personnel entered higher education following their discharge from service. Thus teaching needs grew at the same time that the focus of universities narrowed to privilege the research agenda. Boyer noted
that the faculty reward system of tenure and promotion also concentrated heavily on research outputs, and paid little attention to excellence in teaching. Faculty were not evaluated as teachers, but as researchers. Students, Boyer noted, were too frequently the losers in this environment (Boyer, 1990).

This preoccupation with research was simultaneous to a decline in relations with the broader community. Higher education institutions at the time of Boyer’s writing were viewed by the public as increasingly irrelevant to the civic, social, economic and moral issues of the day (Boyer, 1996). Boyer challenged the higher education institution to “extend itself more productively into the marketplace of ideas” (p. 15).

Boyer’s four domains of scholarship were intended to widen the academic lens to re-engage scholars with their colleagues, students, the curriculum, and the community. Boyer challenged higher-education institutions to continue to focus on knowledge generation, but to also support their faculty to engage broadly and deeply across disciplines with each other, with their students through a focus on teaching excellence and quality programming, and with their communities to address social, political and environmental issues. For Boyer, failure of universities to develop reward mechanisms that promoted such engagement would result in continued isolation of faculty, a decline in the quality of education, and the increasing irrelevance of post-secondary institutions to the community at large (Glassick, Huber, & Maeroff, 1997).

**What does Boyer’s message mean in today’s world?**

Boyer’s domains of scholarship are highly relevant in the current post-secondary context and to today’s nursing faculty in all educational settings. Current realities demonstrate that his framework was visionary, either predicting or influencing the development of current societal and educational trends within nursing education and beyond. Some of these trends include: the prominence of interdisciplinary and interprofessional practice and research; the community engagement agenda for today’s higher education institutions; the importance of applied research in the college sector today, and the move to baccalaureate education as the entry level education for practice in Canada. In discussing each of these trends, it is my intent to demonstrate that they support the use of Boyer’s domains of scholarship and that nurse educators have experiences in their clinical and classroom roles that provide opportunities for them to participate in such scholarship initiatives.

**The scholarship of integration and today’s emphasis on interdisciplinary and interprofessional practice and research.** The current focus on interprofessional and interdisciplinary interaction is a natural evolution of Boyer’s views on the scholarship of integration. Interdisciplinarity and interprofessionization are current priorities in higher education, and are “…widely recognized and …considered essential for optimizing the level of knowledge and practice” (Carevale, 2014). Such collaborative interaction more effectively addresses the significant complexity of problems than is possible from the perspective of one discipline alone (National Academy of Sciences, 2000; Rhoten & Parker, 2004; Salter & Hearn, 1996). This interaction occurs on several fronts: theory development, research, education, policy, and practice (Jacobs & Frickel, 2009).

Interdisciplinary initiatives have been driven in recent years by federal agencies, private organizations, and universities, which have provided targeted funds for seed pilot projects, interdisciplinary training initiatives, and hiring programs. Canada’s national Tri Council
Agencies (Canadian Institutes of Health Research, Social Science and Humanities Research Council of Canada, and the Natural Sciences and Engineering Research Council of Canada) have sponsored collaborative grant competitions aimed at bringing together academics in interdisciplinary teams (Wilson, 2014). In the United States in 2007, the National Institutes of Health funded research consortia to bring together representatives of different disciplines to address health challenges that had failed to respond to traditional research approaches (Jacobs & Frickel, 2009).

In addition to the creation of collaborative funding opportunities, structural changes have occurred in universities to facilitate interdisciplinary collaboration. The development of research centers within and between universities has provided researchers with interdisciplinary environments that transcend the confines of the traditional department and faculty structures and provide opportunities for teams to lend their skills and disciplinary knowledge to solving applied social, political, environmental and health problems (Jacobs & Frickel, 2009).

Nowhere is interdisciplinarity more central to the scientific agenda than in the health sciences. Interaction between health science disciplines moves beyond the development of theory and research initiatives, to encompass the professional practice setting (Barrett, Curran, Glynn, & Godwin, 2007). The World Health Organization focuses on two aspects to optimize health team functioning: promoting collaborative practice, and building a foundation of collaboration through interprofessional education (Barrett et al., 2007; Gilbert, Yan, & Hoffman, 2010). In Canada, the 2003 Health Accord and the 2004 10-Year Plan both contained strong commitment to interprofessional teams as a major component of renewal of healthcare services (Barrett et al., 2007).

Much attention has been focused on interprofessional education of health professionals. In 2005, Health Canada initiated the Interprofessional Education for Collaborative Patient-Centered Practice program, which provided funding for the development, implementation and evaluation of collaborative practice projects that developed mechanisms for ongoing communication for team members, optimized team clinical decision making, and fostered respect for all health care providers (Wilson, 2014).

The focus on interprofessional education and collaborative practice is important for nurses and nursing. Nurses are leaders in all aspects of interdisciplinary/interprofessional research, education and practice in the health sciences. The Canadian Nurses Association (2011) position statement on interprofessional collaboration states:

Nurses collaborate with other health professionals to develop a moral community and to maximize health [sic] benefits to clients, recognizing and respecting the knowledge, skills and perspectives of all. Shared decision-making, creativity and innovation allow healthcare professionals to learn from each other and enhance the effectiveness of their collaborative efforts. (p. 2)

Nurses also play a key role in research about interprofessional practice and education. A Medline database search of the literature conducted February 8, 2015, using the search terms interprofessional education and interprofessional practice revealed that, of the 25 most recent research papers published in 2014, 15 had nurses as first authors.

The interprofessional focus in health care is the current embodiment of Boyer’s scholarship of integration. Teams of professionals, each with their own disciplinary and
professional view of health, illness, individuals, and communities, work together in connected, interpretive and integrative ways to contribute to a whole that is greater than the sum of its parts. What Boyer envisioned as integrative scholarship has extended beyond research to encompass collaborative practice and interprofessional education. Nurses, as the largest group of health care professionals and the coordinators of many of the health care teams, are essential to the success of interprofessional education and collaborative practice. As nurse educators we are actively involved in creating, implementing and evaluating interprofessional education and collaborative practice initiatives. Documenting these initiatives and disseminating our lessons learned provide many opportunities for us to contribute to the scholarship of integration.

The scholarship of application and the community engagement agenda of today’s higher education institutions. Boyer’s scholarship of application domain is all about community engagement. His vision was a response to the distance between university and community. This “town and gown” view of the separation between the university and the public at large depicts entities which, at best, tolerate each other, but under other circumstances have strained and adversarial relations (Breznitz & Feldman, 2012; Mayfield, 2001). Members of the public often view universities and their academics as irrelevant and elitist, having little to offer the “real world”. Boyer’s view of the scholarship of integration was one of engaging with communities in meaningful, mutually beneficial, capacity building ways.

Still, our outstanding universities and colleges remain…one of the greatest hopes for intellectual and civic progress in this country. I’m convinced that for this hope to be fulfilled, the academy must become a more vigorous partner in the search for answers to our most pressing social, civic, economic, and moral problems, and must reaffirm its historic commitment to what I call the scholarship of engagement. (Boyer, 1996)

Community engagement may simply be about solving practical problems, or it may address significant issues of social justice. Actions to address immediate, problem-based, solution-focused issues are discussed in detail in the next section of this paper. This section addresses the broader context of community engagement for social change. Such engagement is focussed on social justice, public health and wellbeing, advocacy, and community development. Engaged universities, harnessing the intellect and energy of professors and students, directly confront community social problems. Such service is not lip service, nor an “add-on”, but an integral part of how teachers teach and research, and how students learn (Bridger & Alter, 2006). Social change occurs while students become engaged citizens, community leaders and self-aware individuals (Hollister, 2015).

Creating community, whether geographic, social, functional or political, entails direct interaction, investigation and application of knowledge, expertise and experience. These interactions result in knowledge generation on the part of the educational institution, and increased capacity within the community (Bridger & Alter, 2006).

What does community engagement look like? It involves increased engagement of students in service learning; creation of service and community-based research centers; strategic investments in underserved neighborhoods, and revised tenure, promotion and merit processes that recognize faculty engagement activities (Breznitz & Feldman, 2012; Sandemann, Saltmarsh, & O'Meara, 2008).

Many universities have articulated vision statements for community engagement, and developed the required structures and processes to support such engagement. In Canada,
community engagement is a major focus for many universities. A Google search conducted February 9, 2015, using the search term university community engagement produced engagement vision statements and descriptions of engagement units at 18 Canadian universities. Interestingly, of these 18, nine were members of the U15 Group, the 15 leading research intensive universities in Canada (U15 Group of Canadian Research Universities, 2015). This demonstrates Boyer’s contention that the domains of scholarship need not be mutually exclusive. Universities that are focussed on and highly successful in the scholarship of discovery are equally successful at prioritizing university community engagement, and the scholarship of application.

Nursing as a profession is imbedded in the community, and has its origins in social justice, service, and advocacy. Falk-Raphael (2005) notes that, as practitioners situated at the intersection of public institutions and personal lives, nurses are “ideally suited and morally obligated to include political advocacy and efforts to influence public policy in their practice” (p. 212). Major nursing organizations worldwide have produced position statements, standards of care and codes of ethics that specifically address nursing’s role in relation to social justice, equity, advocacy, and the social determinants of health (AACN, 2013; Canadian Nurses Association, 2009; International Council of Nurses, 2006). Nurses in practice have the opportunity to act daily to improve the health of vulnerable populations (Gillis & MacLennan, 2013). In the words of the National League for Nursing “Nursing is social justice advocacy” (National League for Nursing, 2015).

Nursing education programs can effectively support the engagement mission. This is true for two reasons. Nursing programs have well-established relationships with the community and curricula that address issues of social justice, from both theory and practice perspectives.

Nursing education, with its extensive clinical and community-based experiential student learning, is perhaps the university-based discipline most broadly and deeply engaged with its community. Faculty members and students interact with community partners and clients regularly. Nursing programs must be in tune with their clinical, community and professional stakeholder groups in order to meet service needs and the professional and regulatory requirements of educational programs.

In addition, nursing curricula provide opportunities for students to explore, in theory and in practice, issues of social justice. In community settings students design, engage in and evaluate programming directed at community development and improving access to the social determinants of health for individuals and communities. Educating students with knowledge and skills related to community engagement, advocacy, political and social action is an integral aspect of Canadian baccalaureate nursing education programs (CASN, 2011).

Because of their engagement in clinical and community settings, nurse educators have significant opportunities to meaningfully address social justice issues. Documenting their initiatives and sharing their experiences in public and peer reviewed forums are logical next steps. Such activities not only meet the requirements for individual faculty members’ involvement in scholarship, but share innovations and findings that will strengthen nursing education and meet community needs.

The scholarship of application and the applied research agenda of today’s Canadian colleges. Much of the focus of this article has been on the history and current trends in university settings. It is also important to recognize the changes in expectations of institutions in the Canadian college sector. These changes have moved scholarship to a place of prominence in the
strategic directions of these organizations. For the purposes of this discussion, Fisher`s (2010) definition of college is used to refer to Canadian non-university institutions including “…community colleges, colleges of applied arts and technology, technical institutes, university-colleges, institutes of technology and advanced learning, polytechnic institutes, and, in Quebec… (CEGEPS)” (p. 1). There are currently 38 colleges in Canada engaged in accredited baccalaureate nursing programming as of July 2015 (CASN, 2015).

Traditionally, college mandates centered on education for employment and economic development (Fisher, 2010). The 21st-century focus on a knowledge-based economy has resulted in pressure on these institutions to adopt a research focus—specifically, an applied research agenda. Applied research is simply research directed at solving practical problems (Association of Canadian Community Colleges, 2013). Federal initiatives have pushed Canadian colleges to adopt applied research agendas “…driven by the need to accelerate the evolution of a national knowledge-based economy in a globally competitive marketplace” (Fisher, 2010, p.1).

Nowhere is the transition to the role of applied research organizations more evident than within Polytechnics Canada, a group of eleven post-secondary institutions that have evolved from trades and technology pre-employment-focused organizations to become degree-granting institutions. These institutions have retained their commitment to industry responsiveness, but have added degree granting and applied research roles to their mission statements (PolytechnicsCanada, 2015). Polytechnics in Canada are intermediaries between universities and the traditional colleges, “bridging the gap between research and commercial needs” (p. 1).

A significant number of Canadian college-based organizations beyond the Polytechnics Canada group have also adopted an applied research mandate. In 2011-12, 98 college-level institutions had established applied research divisions, an increase of 4% from 2010-11 (Association of Canadian Community Colleges, 2013). However, even colleges without the formal applied research mandate at this time are exploring ways to engage in the applied research agenda. Applied research activities result in partnerships with companies and agencies, and engage students in applied research initiatives (Association of Canadian Community Colleges, 2014).

Boyer’s model of scholarship provides important guidance to colleges assuming an applied research mandate. This is particularly true of the scholarship of application. Boyer’s description of engagement to address community problems directs the attention of institutions to working closely with their industry and community partners to find solutions to the everyday problems which they face.

The applied research agenda requires an expanded focus at colleges where education has been their major focus historically. Nursing programs in these institutions can take an active role in the development of applied research projects. Many college nursing faculty continue to be present on a regular basis in clinical and community settings through the supervision of student practice. They have very close relationships with clinical and community partners, and firsthand experience with the practice issues that require solutions. Within practice settings faculty are often involved in developing and implementing quality improvement programs, evidence-based practice initiatives, policy development and program evaluation—all of which provide opportunities for the scholarship of application (Limoges, Acorn, & Osborne, 2015). In addition, college nursing programs, with their history of long standing, well-developed advisory
committees made up of representatives from their stakeholder communities, are well positioned to engage in applied research projects in partnership with these stakeholders.

The era when colleges in Canada focussed solely on teaching to meet market demand is rapidly ending. Nursing faculty members in colleges must recognize that their employing organizations are moving in the applied research direction, even if they are not yet there. With faculty members’ well-established network of clinical and community partners, and their front-line expertise with practice issues, nursing faculty in colleges are well positioned to participate in initiatives in this area.

The scholarship of teaching and learning, and the move to baccalaureate nursing education as the entry to practice in Canada. Nursing in Canada has a solid educational foundation. Canadian nursing programs have historically had strong curriculum frameworks and well-developed learning objectives. Professional regulatory requirements for nursing education programs require the development of well-defined and organized curricula.

The move to baccalaureate entry to practice in Canada and the simultaneous development of collaborative baccalaureate nursing education programs between universities and colleges resulted in nursing programs being the first in many college-level institutions to offer baccalaureate programming. Baccalaureate programming requires different approaches to teaching and learning. Baccalaureate education is not simply “more of the same”. Moving to baccalaureate level programming from technical diploma-based programs requires students to develop more complex skills and knowledge in a wider array of subjects. The CASN statement on baccalaureate education states that pedagogical approaches in baccalaureate education must respond to the increasingly complex nature of nursing and health care, the exponential rate of growth of knowledge, rapid changes in technology, the need for lifelong learning, the requirement for public accountability when carrying out safe, competent, ethical and effective professional practice, and the need to understand professional practice within diverse social, political and cultural contexts (Canadian Association of Schools of Nursing, 2011). Critical thinking, independent decision making, ability to communicate positions clearly and articulately and argue one’s position, and appreciation of the nuances and critically appraise and utilize evidence are all essential aspects of baccalaureate education (Council of Ministers of Education, Canada, 2007). As a result of these changes in entry level education, college based nursing faculty developed innovative ways of teaching and evaluating learning of these new and expanded concepts.

Development of new approaches to pedagogy is not restricted to college-level nursing faculty. University-based faculty who have taught in baccalaureate programs for years also face new challenges in teaching and learning. The growth of simulation to teach clinical skills and judgement, the increase in expectation that all health professional students receive organized interprofessional educational experiences in both classroom and clinical settings, increased use of educational technology, creation of new, non-traditional clinical and community student placements, and the expanded use of distributed and blended learning modalities are only a few of the educational trends which challenge nurse educators to increase their knowledge and skills in a variety of pedagogical approaches, and find new ways to evaluate the effectiveness of these approaches. As previously noted, the focus on interprofessional education resulted in many new educational projects and innovations. Such initiatives provide nursing faculty members with many opportunities to describe their innovative projects and share their pedagogical lessons learned in scholarly presentations in academic forums and peer reviewed publications.
Scholarship in nursing—some exciting examples

In recent years, I have witnessed an abundance of innovative and exciting scholarly work in the nursing programs I have visited. In a number of these situations, nursing faculty took the opportunity to present and publish about the creative work that they were undertaking. But all too often, they simply engaged in these projects, and moved on. Even their program administrators and colleagues were often unaware of the innovative work that they were doing in their classrooms and clinical settings. Examples of such innovations, with a brief discussion of how they could have been conducted to meet scholarship requirements are provided here.

- An interprofessional group of students from Kinesiology, Medicine, and Nursing engaged in a pediatric clinical placement in an inner-city high school, focussing on wellness assessments and the implementation of physical activity programs for at-risk adolescents. (This project provided opportunities for scholarship in the domains of both integration and teaching. To meet the standards for scholarship outlined by Glassick et al. (1997) and Diamond and Adam (1993), those involved in the project could have documented its origins and described the rationale for its development. Interviews or surveys could have been done with students, faculty and school representatives pre and post implementation to determine changes resulting from the project. Modifications to the project as a result of feedback could have been described, including rationale. The impact of the project could have been discussed, in relation to all involved. Further plans could then have been described. Sharing of these experiences through peer-reviewed presentations and publications would have resulted in opportunities for replication).

- A nursing program with a larger than average number of male students developed an all-male student medical-surgical group clinical experience, led by a male faculty member. Throughout their clinical rotation, the group members explored their experiences as men in a gendered profession, as well as the reactions of patients and staff. (This project provided excellent opportunities for scholarship in the area of teaching and learning. It could have been documented in ways similar to the previous project, with involvement of patients and unit staff).

- Faculty members in a school of nursing planning to increase its engagement in interprofessional education led an institutional initiative to develop a manual to guide the development process. This manual included an extensive review of the literature from a number of fields, both health related and non-health related. It outlined a comprehensive review of current Canadian models for organizing and delivering interprofessional education, and highlighted a series of highly successful approaches that could be considered best practices in the field. The manual included a document synthesizing their findings and outlining the model of interprofessional education ultimately developed by their organization. (This is an example of the scholarship of integration. If this manual had been peer reviewed and published as a monograph, it would have served a valuable purpose in assisting other programs on their interprofessional education journey).

- A faculty member who had strong professional connections with a provincial child safety agency enlisted students in a community health class to review existing guidelines on children’s bicycle helmet safety. The students examined the guidelines, systematically reviewed the literature on the issue, and proposed revisions to the guidelines. The students then worked with the community agency to successfully lobby the provincial
government to adopt the revised guidelines. (This project is an example of scholarly work that could become scholarship of application, applying knowledge to real life problems and engaging with communities to meet their needs for knowledge and expertise. This project could have been described in the literature and presentations in processes similar to that noted in the previous examples).

- A nursing program in a university with a focus on engagement with Indigenous communities developed a unique model of community engagement on which they based their programming initiatives. (This project is another example of an opportunity to document and disseminate information and to contribute to the scholarship of application).

- A faculty member with a strong background in infection control was asked by the clinical agency in which the individual supervised students to review agency infection control guidelines and to chair a multidisciplinary committee to revise the guidelines in keeping with current knowledge and practice. The faculty member then engaged students in a teaching and learning course to provide professional development and orientation to staff regarding the new policies and procedures as a credit assignment in their course. Managers were enlisted to evaluate the effectiveness of the students’ teaching plans and their implementation. (This project is another example of a project with potential in the area of the scholarship of application, as well as the scholarship of teaching).

- Leaders in a school of nursing were concerned about the number of student appeals they were experiencing. They undertook an extensive review of the nature of the appeals, and developed additional supports for students who were determined to be at risk. They revised their orientation program and clarified lines of communication for students in an attempt to make expectations of students more clear, and to provide more formal and informal opportunities for low level resolution of issues. They worked very closely with student leaders at the program and institution level to determine what the underlying issues were behind many of the appeals. They developed a positive, comprehensive evidence-based framework for student support and engagement in their school. (This is an example of a project that could contribute to the scholarship of teaching at a policy level, rather than directly in relation to pedagogy).

- A faculty member who was part of a research team addressing homelessness in the local community engaged undergraduate students as part of their community health class to survey homeless people with respect to their needs, to work with the research team to identify appropriate programming to meet these needs, and to develop an evaluation plan to assess the outcomes of these interventions. A subsequent class of students in the same course implemented the proposed programs. In the following year, the students in the same course undertook the evaluation of the programs implemented, analyzed the results and made recommendations around further programming. (This is an example of project that, with documentation, peer review, and dissemination, would contribute to the scholarship of application, through its community engagement and social justice focus. It would also serve as an exemplar in the area of the scholarship of teaching).

These initiatives are innovative and creative. They contributed directly to program and policy development in clinical and community health settings. Some of them engaged the students, faculty members, and leaders within the school and institution in important social
justice initiatives in the community. The students directly involved in these initiatives benefitted greatly. However, broader program and policy changes could have been made, clinical practice improved, or community-based initiatives built on this innovative work, if this work had been critiqued and shared in the public domain. If the nursing faculty and administrators involved in these innovations had described how these projects were developed and evaluated, their innovative nature in relation to current practice, what their outcomes were, and the impact of these outcomes, and had presented them at conferences and published articles about them in peer-reviewed journals, our profession and discipline could have been strengthened, health care and nursing education improved, and the broader community could have benefitted from the examples provided (Diamond & Adam, 1993). We have much to contribute to the scholarship agenda and to the social mandate of nursing scholarship that Duncan et al. referenced. We are engaged in scholarly work, as the above examples demonstrate. We must now commit to documenting our initiatives, subjecting them to expert review and critique, and publicly sharing them with others in ways that allow others to use and build on the work that we do.

Conclusion

As faculty teaching in baccalaureate nursing education programs in higher education institutions today, we cannot separate scholarship from our educator roles. Our roles as nurses, educators and academics afford us unique opportunities to engage with other professions and disciplines, and with clinical, community and patient partners, to address the problems that face us in practice and in society. Located as we are in institutions of learning—whether these institutions are highly research intensive traditional universities, small undergraduate universities, or colleges that are newly assuming applied research—we have many opportunities to engage with others. These opportunities allow us to generate new knowledge, integrate and synthesize knowledge from multiple disciplines in ways that are accessible and useful to all, work closely with our community partners, and teach our students in innovative and exciting ways. As faculty members we must embrace the opportunities provided us in our roles, and describe and disseminate our work arising from these roles in ways that can be publically and expertly critiqued and replicated by others. We also need to engage in research to better understand the knowledge and attitudes of nursing faculty members toward scholarship and its integral part in our roles as educators.

It is also important that we actively engage in the committees and processes in our institutions that develop and revise the standards for performance evaluation, tenure, promotion, merit and workload assignment to ensure that these standards reflect Boyer’s broad view of scholarship and all of its domains. This requires commitment at all levels in the institution toward building a culture of scholarship and to matching underlying institutional policy to that cultural direction.
References


