# MAPPING THE AACN COMMON APRN DOCTORAL COMPETENCIES

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#### PRESENTATION OBJECTIVE

- AT THE CONCLUSION OF THIS PRESENTATION, THE LEARNER WILL:
  - ANALYZE METHODS TO MAP THE AACN'S COMMON ADVANCED
     PRACTICE REGISTERED NURSE DOCTORAL COMPETENCIES TO CURRICULA,
     AS WELL AS COMMON CHALLENGES, AND BENEFITS TO THE PROCESS.

#### **INTRODUCTION & BACKGROUND**

- ADVANCED PRACTICE NURSING CURRICULA
  - ROLE SPECIFIC COMPETENCIES
    - ACCREDITATION
    - FACILITATE CERTIFICATION PASS RATES
    - Ensures minimally competent care for role
- AACN COMMON ADVANCED PRACTICE REGISTERED NURSE DOCTORAL COMPETENCIES
  - 1/2018
  - HIGHLIGHTS COMPETENCY BASED LEARNING OUTCOMES

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### AACN COMMON APRN DOCTORAL COMPETENCIES-DOMAINS

- Domain 1: Patient Care
- Domain 2: Knowledge of Practice
- Domain 3: Practice-Based Learning & Improvement
- Domain 4: Interpersonal and Communication Skills
- Domain 5: Professionalism
- DOMAIN 6: SYSTEMS-BASED PRACTICE
- Domain 7: Interprofessional Collaboration
- Domain 8: Personal and Professional Development

## AACN COMMON APRN DOCTORAL COMPETENCIES-DOMAIN COMPETENCIES

- EACH DOMAIN COMPRISES MULTIPLE COMPETENCIES DESIGNED TO REFLECT THE APRN ROLE
- EACH COMPETENCY PRESENTS PROGRESSION INDICATORS AT TWO POINTS
  - POINT 1 DESCRIBES THE LEVEL OF ACHIEVEMENT WITH INITIATION OF THE FIRST MEANINGFUL CLINICAL EXPERIENCE
  - POINT 2 DESCRIBES THE LEVEL OF ACHIEVEMENT AT COMPLETION OF THE DOCTORAL PROGRAM

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### AACN COMMON APRN DOCTORAL COMPETENCIES-DOMAIN 8

| Competency   | Time 1  | Time 2  |
|--|---|---|
| Demonstrate healthy coping<br>mechanisms to respond to the<br>demands of professional<br>practice.   | Identifies one's own responses to stressful situations and seeks help when necessary. | Routinely incorporates healthy strategies to manage stress and promote one's own wellness.  |
| <ol> <li>Practice flexibility and maturity<br/>in adjusting to rapidly changing<br/>professional environments.</li> </ol>                                | Articulates the need for continuous improvement processes in professional practice.   | Actively seeks opportunities for continuous improvement in professional practice.   |
| <ol> <li>Demonstrate leadership,<br/>trustworthiness, and self-<br/>assurance that inspire the<br/>confidence of patients and<br/>colleagues.</li> </ol> | Exhibits a level of emotional intelligence that instills confidence in others.        | Demonstrates personal and professional behaviors, including leadership, trustworthiness and self- assurance in professional practice. |

#### COMPETENCY BASED ASSESSMENT

#### Competency

a combination of knowledge, skills, abilities

• When acquired, allows a person to perform a function or task at a specifically defined level of proficiency

Common Competency

one that is found in all of the roles in the program of study or profession

### Assessing Common Competencies

Criterion-related assessment

- Competence level and the measurable behaviors have an ELA that can be achieved by all learners.
- Inform learners about expectations.
- Provide guidelines and instructions.

(Albanese et al., 2008)

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#### WORK GROUP COMPOSITION

- AD HOC GROUP RECRUITED FROM THE GRADUATE NURSING CURRICULUM COMMITTEE
  - PROGRAM COORDINATORS- MSN & DNP PROGRAMS
  - FNP & HINL COORDINATORS
  - CURRICULUM EXPERTS
  - CURRICULUM CHAIR

#### **OUR MAPPING PROCESS**

- BEGAN WITH THE OCTOBER 2017 PUBLISHED DOMAINS, COMPETENCIES AND TIME 1 AND TIME 2 OBSERVATIONS
- YEAR-LONG PROCESS
- AFTER REVIEW OF THE DOMAINS, EACH MEMBER OF THE AD HOC COMMITTEE VOLUNTEERED TO REVIEW ONE OR TWO DOMAINS
  - ACCORDING TO EXPERTISE
  - LOCATED WHERE THE DOMAIN/COMPETENCY AND OBSERVATIONS COULD BE OR WERE ALREADY BEING MADE IN THE CURRENT CURRICULUM

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| Donata Descriptor: Designo, deliciero, manages and evaluates compethenalite patient care. <sup>1</sup> |  |   |  |  |  |
|--|--|---|--|--|--|
|  | Compotency   | Time 1  | Time 2   |  |  |
| 0  | Perform a<br>comprehensive,<br>evidence-band<br>assessment   | Petitems a foruse? successment<br>of a patient with only 1-2<br>pre-sorting guildients, using a<br>template and under tensioned<br>guidance.<br>NGI MES SCAP Places             | Demonstrates compensat and efficient successment of potents with multiple co-morbidities, and such fife-remaind conditions).  NSS AMM SUAP Names   |  |  |
| 23   | Use advanced clinical judgment to diagnose.  | Uses gatient and clinical data to formulate consums healthcare diagnosis (vs) in a patient with only 1-2 presenting problems.  NSG 8611 60AP Some                               | Demonstrates competent and efficient ability to gather and assurped patient and clinical draw to make account diagnossis of the to make account diagnossis) as patients with multiple and competence problems.  NSG-6480 NOOPE Competences |  |  |
| 10   | Synthesian relevant data to devoting a patients construed, evidence-based plan of core.  | Education, evidence-based,<br>partiest-centered plac of marriar<br>commun health profilers for an<br>outle shall patient.<br>NSG mile SOAP Num.                                 | Uses knowledge of infinished and<br>population health to formulate a<br>comprehensive plan of cure.<br>NSO 6668 SCAP Name  |  |  |
| 6)   | Manage care across the bookly<br>continuous including<br>prescribing, indicate, and<br>evaluating throupouts<br>interventions. | Identifies and evaluates the appropriate therapeutic interventions (planmatelogic) and more planmatelogic for the toward-man of contains problems.  NSG) 6066 Proception Totals | Implements, coordinates, and evaluates thempestic aster extenses addressing patients with multiple and complete pathlesses.  NMO 6688 Prosper 5 m de Textument   |  |  |

#### **MAPPING PROCESS**

- After time 1 and 2 observations were identified, we then realized we needed to map the competencies to our EOPSLOs  $\frac{1}{2}$
- IDEALLY, THIS SHOULD HAVE BEEN COMPLETED FIRST
- EACH MEMBER WORKED WITH PREVIOUSLY ASSIGNED DOMAINS
- DRAFTS WERE COMPLETED
- GROUP COLLABORATIVE WORK TO DISCUSS/EDIT AS NECESSARY

| DNP EOPSLOS   | APRN Competencies  | Assessment Criteria                                | Measure  |
|---|--|--|--|
| Evaluate     advanced knowledge     and theories from     nursing and related     disciplines for     advanced practice     nursing at the     highest level. | Domais 2: Knowledge of Practice  Competency 1: Demonstrate an investigatory, analytic approach to clinical situations.  Competency 2: Apply science-based theories and concepts to guide one's overall practice.   | Time 1: 80% of students will score<br>80 or higher | Time 1 (Domain 2): NSG 6691<br>Bare Bones Proposal   |
|   |  | Time 2: 100% of students will pass<br>(PrF)        | Time 2 (Domain 2): NSG 8840<br>Completed DSP   |
| Design quality,<br>cost effective and<br>innovative nursing<br>cars models based<br>on the knowledge of<br>interrelationships<br>among nursing.               | Domain 1: Patient Care  Competency 4: Manage care across the health continuum including prescribing, ordering, and evaluating therapeutic interventions.  Domain 6: Systems-Based Practice  Competency 1: Coffaborate in the development, implementation, and evaluation of systems level strategies to reduce errors and optimize sals, effective healthcare delivery.  Competency 2: Demonstrate stewardship of financial and other resources for the delivery of quality care that is effective and affordable.  Competency 3: Shape healthcare policy of local, state, and national levels to certifize access to seed | Time 1: 80% of students will score<br>80 or higher | Time 1 (Domain 1):<br>NSIG 6565 Preceptor# aculty<br>Evaluation Time 1 (Domain 6):                                     |
| organizational.<br>publical, and<br>economic sciences.  |  |  | NSG 8826 Discussion Board<br>#3: Healthcare Policy Analysis  |
|   |  | Time 2: 80% of students will score 80 or higher    | Time 2 (Domain I): NSG 6680 ProcuptorFaculty Evaluations  Time 2 (Domain 6): NSG 8804 Healthcare Policy Analysis Paper |

#### **FINDINGS**

- THE MAJORITY OF COMPETENCIES WERE MEASURABLE THROUGH EXISTING ASSIGNMENTS IN MSN AND DNP COURSES.
- THE SEPARATE POINTS OF EVALUATION (TIME 1 AND TIME 2) GENERATED DISCUSSION
  - SEQUENCING OF SKILLS/KNOWLEDGE
  - Progression of Skills/knowledge
- CURRICULUM GAPS WERE IDENTIFIED RELATED TO DOMAIN 8: PERSONAL AND PROFESSIONAL DEVELOPMENT

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### FINDINGS: CURRICULUM GAPS AND NEW ASSIGNMENTS

- Domain 8: Personal and professional development
  - COMPETENCY I: DEMONSTRATE HEALTHY COPING MECHANISMS TO RESPOND TO THE DEMANDS OF PROFESSIONAL PRACTICE
    - TIME 1: IDENTIFIES ONE'S OWN RESPONSES TO STRESSFUL SITUATIONS AND SEEKS HELP WHEN NECESSARY
    - Assignment created: Legal/Ethical discussion in NSG 6670 Role Synthesis seminar

### FINDINGS: CURRICULUM GAPS AND NEW ASSIGNMENTS

- Domain 8: Personal and Professional Development
- COMPETENCY I: DEMONSTRATE HEALTHY COPING MECHANISMS TO RESPOND TO THE DEMANDS OF PROFESSIONAL PRACTICE
  - TIME 1: ROUTINELY INCORPORATES HEALTH STRATEGIES TO MANAGE STRESS AND PROMOTE OWN'S OWN WELLNESS
  - Assignment created: Healthy strategies for professional practice discussion in NSG 8810 DNP synthesis I: project development

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### NEXT STEPS: COMMON APRN DOCTORAL COMPETENCIES

- Mapping has been approved through curriculum and graduate nurse faculty groups
- BEGIN DATA COLLECTION TO TRACK ACHIEVEMENT RATES
- IDENTIFY AREAS WHERE STUDENTS STRUGGLE TO ACHIEVE COMPETENCIES
- BOLSTER CURRICULUM WHERE NEEDED

#### CONCLUSION

- NOTHING TO FEAR!
- VALUABLE QI PROCESS
- APPROACH THE PROCESS OBJECTIVELY
- LAY OUT A PLAN
- IDENTIFY STEPS TO THE PLAN
- BE PATIENT WITH AND HAVE CONFIDENCE IN THE COLLABORATIVE PROCESS



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#### **REFERENCES**

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