



# Curriculum Revision and Innovation: Collaborative Change in a Hybrid PMHNP-DNP Program

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## Background



Hybrid DNP + Specialty Course Model



Blended teaching model with a distance cohort



Established University wide benchmarking process



Pre-existing competency-based model of graduate nursing education

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# Purpose



Update Competency Based Curriculum



Design and initiate an iterative and collaborative process of improvement



Increasing fidelity to Quality Standards

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# Significance



AACN Essentials



Outdated Curriculum



Accountability to the University



CCNE Accreditation



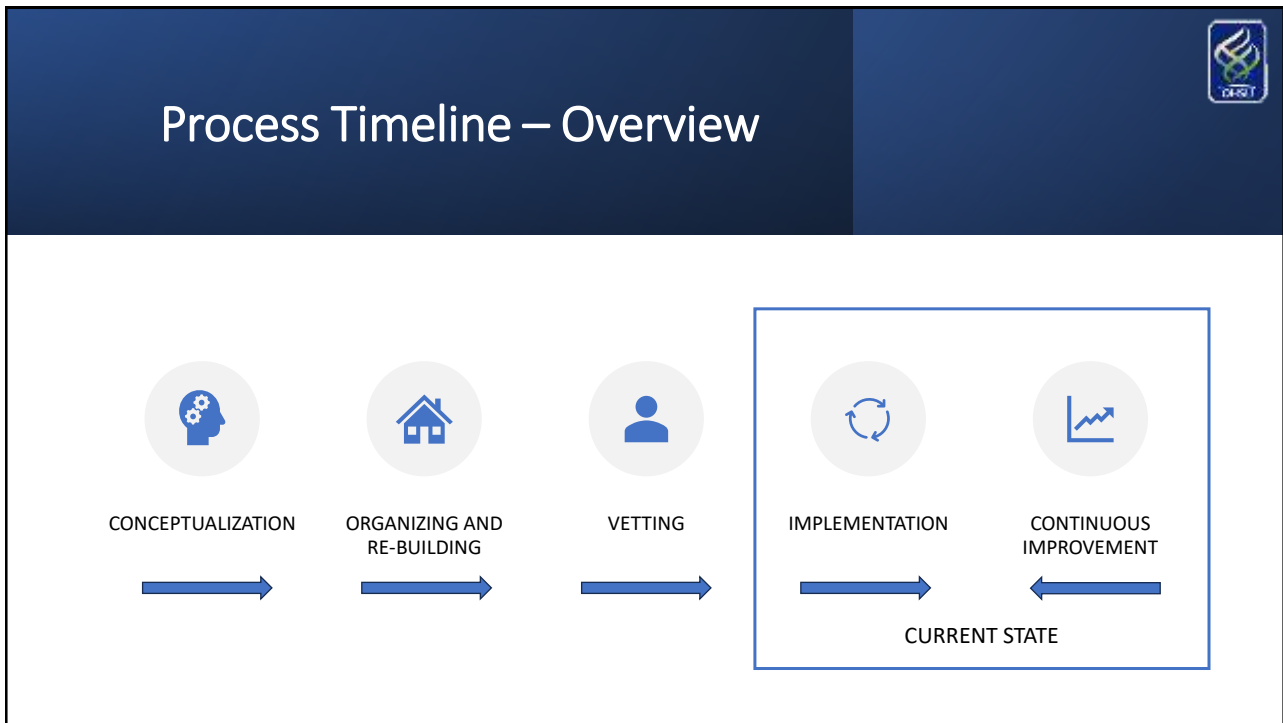
Feedback from Stakeholders (Students, Community Partners)

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# Value

- We found an unhurried and intentional process
- We were able to update the curriculum
- We addressed the needs of our stakeholders
- We have buy-in
- We are now involved in a collaborative and iterative process of improvement that we are excited about!





## Conceptualizing

- **WORDS**
  - Domain → Program Outcome
  - Competency → Course Outcome
  - Sub-Competency → Course Outcome + Clinical Competency
- **Identifying Gaps**
- **Program Outcome Revision**

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## Process Check

- **What we have**
  - Conceptual understanding
  - High level desired result
  - Feedback from students and stakeholders
- **What we need**
  - Address identified gaps
  - Alignment of competency
- **What is next**
  - Organizing and re-building



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## Organizing and Re-building

- **Program of Study**
  - Creation of NEW Foundations Courses
    - Year 1: scaffolding and leveling the playing field
    - Year 2: decompressing and filling gaps
    - Year 3: increase focus on integration – how?
- **Course Outcomes and Descriptions**
  - Creating a system of accountability and a road map
- **Clinical Outcomes**
  - Alignment with program outcomes
  - Re-building our Clinical Evaluation Tool

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## Vetting



### Faculty Lead Governance

- APRN Committee
- SON Graduate Council
- University wide Education Committee



### Provost

Provost's Education Council



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## Indicators of Process Success

All changes approved for implementation without revision

Approval to implement NOW

Additional FTE allocation

Requested for consultation

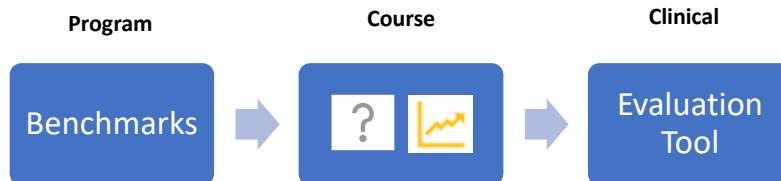
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## Next Steps



### • Implementation – In Process

- Course Development
- Design competency testing and match to measures at the **course level**



- Develop evaluation process (survey, etc.) for each stakeholder – student, preceptor, faculty

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## Next Steps – Cont'd



- **Evidence Driven Improvement – Continuous**
  - Ongoing collaboration with stakeholders
    - National regulatory groups
    - University – assessment council
    - Students
    - Preceptors
  - Tracking implementation
    - Curriculum mapping using information technology



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## Limitations/Considerations

- Cohort models can make seamless transition difficult
- DNP curriculum remains
- Complex initiatives require dedicated workload
- Variability in university expectation and state board regulation
- May or may not be extrapolated to undergraduate nursing education



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# Conclusions

- **Early adoption facilitates effective engagement in action-oriented learning;**

- Value process over outcome – the process IS the product
- Devote adequate time to mapping and decision making
- Plan your groups well – start small and then expand sequentially
- Involve faculty and students at appropriate stages
- Start by conceptualizing broadly and then fine tune
- Prioritize stakeholder needs to facilitate buy in

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Questions

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