





The Essentials: Core Competencies for Professional Nursing Education calls for profound changes in nursing education with a shift to competency-based education (CBE). Competency-based education is a system of instruction, assessment, feedback, self-reflection, and academic reporting that is based on the learner's ability to demonstrate knowledge, skills, and attitudes appropriate to their level of education. Significantly, CBE shifts focus to the outcomes of education (i.e. what the learner can do with what they know), and away from the inputs of education (i.e. the content that is taught). The Essentials serve as the framework to achieve this transition in nursing education, with the goal of preparing more practice-ready nurses.

KEY CONCEPTS

Each school of nursing's journey to CBE will differ. There are several strategies that will influence your success, including:

1. Message the "WHY":

- Clearly articulate the rationale behind the curricular transition, emphasizing the need to adapt to the evolving healthcare environment:
 - Shifting demographics in patient populations, healthcare inequities, and systemic racism further validate the need for changes in nursing education.
 - Innovations in healthcare technology and new models of practice have reshaped the practice environment.
 - The COVID-19 pandemic has impacted today's work environments and accentuated high levels of nurse burnout and turnover.
 - Practice leaders have expressed concern about skill variability among nurse graduates, with increasing difficulty in transitioning new nurses to the workforce.
 - CBE ties curriculum and coursework to professional expectations, increasing practice readiness.
 - CBE promotes equity by catering to the diverse needs of learners from different backgrounds and with varying learning styles.

2. Engagement Early and Often with Key Institutional Partners (Provost and other university leaders, practice partners, donors, alumni, admissions officers, and students):

- Maintain intentional and transparent communication and collaboration with institutional leaders, keeping them informed of developments and seeking their input.
- Align the goals of the curricular transition with the broader institutional mission and vision.
- Seek input from these key partners to ensure their perspectives are considered in the planning and implementation process.
- Leverage their support to allocate necessary resources and ensure a successful transition.
- Regularly engage with practice partners to understand their needs and expectations.
- Explore innovative faculty practice models as a way to bridge the gap between academia and practice and address workforce needs.

- Create a feedback loop that includes practice partners to identify opportunities for experiential learning.
- Cultivate relationships built on mutual trust and respect.
- Provide support to preceptors and practice partners:
 - Offer ongoing training and resources to preceptors, clinical/adjunct faculty, and practice partners on CBE and the AACN *Essentials*.
 - Foster a supportive environment for preceptors and clinical faculty to effectively mentor and evaluate learners.
- Keep donors, alumni, admissions officers, and students informed about the curricular transition and its impact on the school. Offer talking points from AACN's informational brochures:
 - Guiding Principles on Competency-Based Education & Assessment
 - What Practice Partners Need to Know About the AACN Essentials
 - What Prospective Nursing Students Need to Know About the AACN Essentials
 - What Development Officers Need to Know About the Essentials

3. Enable Ongoing Faculty Development and Engagement:

- Prioritize continuous faculty development on curricular transition, evidence-based teaching strategies, the *Essentials*, CBE, transition of the faculty role to coach and mentor, feedback literacy, formative and summative assessment, fostering a culture of collaboration, and innovation among faculty.
- Develop faculty expertise in designing and facilitating experiential learning opportunities.
- Create opportunities for faculty to contribute their expertise and feedback throughout the transition process.
- Emphasize opportunities for faculty to develop innovative teaching and assessment strategies.



4. Clarify the Structure and Process for Curricular Transition:

- Outline a step-by-step transition plan with clearly defined *Essentials* curricular structure, roles, responsibilities, and timelines.
- Examples of structures for curricular transition may include one school-wide taskforce with leaders and subgroups based on programs, Level 1 and Level 2 subgroup champions, and/or Domain and Concept leaders. Be certain to cast a wide net to include all key partners.
- Provide specific examples of how courses and assessments will change during the transition.
- Establish a mechanism for continuous review, feedback, and improvement throughout the transition.

5. Set a Realistic Timeline:

• Collaboratively set a realistic and flexible timeline that accommodates mapping and gapping, full faculty discussion of changes, approvals (internal and external), and continuous quality improvement.

6. Map Current Curriculum and Identify Gaps:

- Analyze the existing curriculum and identify areas that align to the sub-competencies being developed or demonstrated.
- Identify gaps and redundancies and plan for revisions using the backward design process.
- Identify where assessments are currently done, including type and format.

7. Follow Backward Design:

- Develop/Revise end-of-program outcomes:
 - Create program outcomes that align with the 10 Domains and the individual school's mission, vision, and values to clearly articulate the desired results. *This may be ongoing with mapping and gapping*.
 - These outcomes should serve as a shared framework for measuring the graduate's practice readiness and overall competence.
 - From these outcomes, work backwards to develop the assessments and then the learning experiences as seen in Figure 1.

1. Identify desired results.



2. Determine acceptable evidence.



3. Plan learning experiences and instruction.

Figure 1.

- Design and revise courses with the end goals in mind, focusing on what learners will be able to *do* with what they *know*.
 - Develop clear course objectives or outcomes/learner outcomes as competency statements that directly align with program outcomes.
 - Ensure that each course objective or outcome/learner outcomes is linked to the subcompetencies and serves a purpose in achieving course/program goals.

Figure 1: Wiggins, G. P., & McTighe, J. (2005). Understanding by Design. ASCD.

8. Identify Valid Assessments:

- Identify valid assessments and utilize AACN's Guiding Principles for CBE and Assessment.
- Select and develop formative and summative assessments that effectively demonstrate learner competency, in keeping with AACN's *Essentials*.

9. Develop Content and Experiential Learning Opportunities:

- Create content and experiential learning opportunities that align with both learning outcomes and assessments.
- In addition to the simulation lab and clinical rotations, create opportunities for experiential learning in the classroom such as: virtual simulations, standardized/simulated patient encounters, bringing simulators to the classroom, unfolding case studies, and role play/practice of new concepts.
- Ensure that the content and format are engaging, relevant, and diverse to cater to the needs of a wide range of learners, supporting inclusivity and equity.
- Ensure scaffolding of competencies across the curriculum.
- Provide developmental feedback frequently and in a psychologically safe environment.

10. Create an Ongoing Quality Monitoring Plan:

- Implement a robust and continuous quality monitoring process that includes regular evaluations and feedback loops.
- Seek feedback from key partners on practice readiness of graduates.
- Use data and feedback to drive ongoing curriculum refinement and adaptation.

These strategies can serve as a foundation for a successful curricular transition to CBE and implementation of the 2021 *Essentials*. Nursing programs must remain responsive to evolving needs and standards in nursing education to ensure a more practice-ready graduate.

CURRICULAR COACHES GROUP

Dawn Mueller-Burke, PhD, Assistant Professor, University of Maryland, Curricular Coaches Co-Lead

Jacquelyn McMillian-Bohler, PhD, Assistant Clinical Professor, Duke University

Mary Fey, PhD, Adjunct Faculty, Drexel University

Jackie Barber, EdD, Dean of Nursing, Morningside University

Brittany Hay, DNP, Associate Dean of Graduate Clinical Programs, University of South Florida

Kristin Ashford, PhD, Associate Dean, University of Kentucky

Dana Tschannen, PhD, Clinical Associate Professor, University of Michigan

Gerry Altmiller, EdD, Professor, The College of New Jersey

Kate Vincent, PhD, Associate Professor Emerita, University of Illinois Chicago

Susan Corbridge, PhD, Chief Essentials Program Officer, AACN, Staff Liaison

Joan Stanley, PhD, Chief Academic Officer, AACN, Staff Liaison

THE ESSENTIALS

For more tools related to the AACN Essentials, strategies for engaging practice partners, and approaches to moving to CBE, visit:

www.aacnnursing.org/essentials