

Progression Indicators – An Overview

The [*AACN Essentials*](#) provides a competency-based education framework that defines what nurses must know and be able to do across all levels of professional nursing. The framework encompasses 10 Domains and 45 Competencies, which apply to preparing both entry-level (Level 1) and advanced-level (Level 2) nursing programs. The differentiation of the levels is articulated in the sub-competencies that describe the specific behaviors expected at each level.

Although the sub-competencies outline the behaviors expected at the entry or advanced level, not all were written as clearly defined behaviors. Recognizing that effective assessment requires well-defined expectations, the AACN Assessment Expert Working Group established the Progression Indicator Subgroup to develop and build national consensus on specific, observable behaviors for each sub-competency, called Progression Indicators (PIs). This work ensures consistency in assessment and provides both learners and faculty with clear expectations for demonstrating competency.

These indicators were developed with input from the *Essentials* Champions, representing schools of nursing nationwide, the *Essentials* Coaches, and other nursing faculty and practice experts. They were then refined through a national consensus process and reviewed by experts with the Competency-Based Education Network (C-BEN).

Progression indicators (also called behavioral performance indicators) are descriptive, observable behaviors that show a learner's movement from developing to developed behaviors for each sub-competency. They are action-oriented, describe what an assessor would expect to observe and serve as markers of competency development along the continuum. To ensure alignment, the PIs were intentionally written not to extend beyond the scope of each sub-competency, which is why some "developing" indicators may still include knowledge-focused verbs, which are at the beginning of the competency development process.

Faculty determine where in the curriculum learners are expected to demonstrate "developing" and "developed" behaviors for sub-competencies depending on curriculum design. "Developing" indicators would be expected and assessed at earlier points during the curriculum to assure learners are progressing toward competency. Assessment of sub-competency attainment based on the progression indicators across the curriculum also assures that the learner has developed the sub-competencies needed as a foundation for other sub-competencies and for more complex care. Learners should consistently demonstrate the "developed" indicators by the end of their program, whether at Level 1 or 2.

Key Points to Remember:

- Competency-based assessment must focus on integrated practice, not isolated skills.
- Nursing practice touches every *Essentials* domain and involves multiple competencies and sub-competencies simultaneously.
- Clustering competencies and sub-competencies is critical for experiential learning for both formative and summative assessment.
- Assessment is longitudinal: These behaviors are meant to be observed over time, reflecting a learner's ongoing development rather than a single point-in-time evaluation.
- Progression indicators provide faculty and learners with a shared roadmap: they make expectations explicit, support tracking of progress (e.g. meeting developing PIs and on target for attainment of developed PIs), guide feedback, and support observation of growth. They can be used for rubric development for formative and summative assessments.