Master's Essentials Webinar

October 26, 2010

Joanne Warner, PhD, RN
Dean and Professor
University of Portland
Chair**, Task Force on **The Essentials of Master's Education in Nursing

Overview of Presentation

- **Purpose of Webinars**
- **Consensus Building Process**
- **Recent Work of the Task Force**
- **Highlights of the Fifth Draft of the _Master's Essentials_**
- **Overview of the Final Draft Document**
- **Nine Essentials**
- **Timeline**

American Association
of Colleges of Nursing

Task Force Members

Joanne Warner, PhD, *Chair*
   University of Portland
Lynn Babington, PhD, *CCNE liaison*
   Northeastern University
Jean Bartels, PhD
   Georgia Southern University
Joyce Batcheller, DNP, FAAN *practice liaison*
   Seton Family of Hospitals
James Harris, DSN, *practice liaison*
   Dept. of Veterans Affairs
Patricia Martin, PhD
   Wright State University College of Nursing
   and Health

American Association *of* Colleges *of* Nursing

Task Force Members

David Reyes, MN, MPH, *public health*
**   ** *practice liaison,* **Seattle & King County**
Julie Sebastian, PhD, *AACN Board liaison*
**   University of Missouri – St. Louis**
Polly Bednash, PhD, *AACN CEO*
Kathy McGuinn, MSN, *staff liaison*
Joan Stanley, PhD, *staff liaison*
Horacio Oliveira, *staff liaison*

American Association
of Colleges of Nursing

Purpose of Webinars

- **Disseminate the work and thinking that lead to the fifth draft of the *Master's Essentials* to a wide audience**

- **Answer questions from the audience**

- **Obtain feedback from participants**

- **Final comments will be due by November 15, 2010. Send comments to kmcguinn@aacn.nche.edu**

American Association
of Colleges of Nursing

Consensus Building Process

- **Gather and incorporate input from a variety of sources into the document as clear, consistent messages emerge.**

- **Iterative process with changes made and posted on the AACN website.**

American Association
of Colleges of Nursing
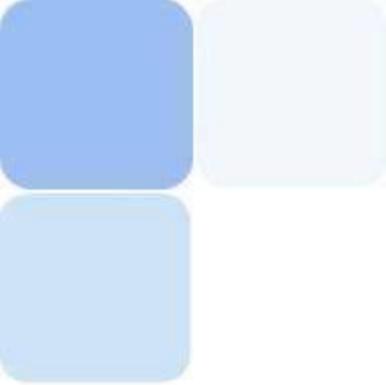
Four Regional Meetings
Fall 2009 – Spring 2010

- **515 participants have attended these meetings**
  - **with 266 schools of nursing,**
  - **7 nursing organizations,**
  - **and 5 practice organizations represented**

American Association
of Colleges of Nursing

Recent Work of the Task Force

- **Fourth Draft posted on February 17, 2010**
- **2 face-face meetings**
  - **April 28-29**
  - **July 27-28**
- **Fifth Draft posted on August 23, 2010**
- **3 Webinars: Sept. 8, Oct. 5, & Oct. 26, 2010**

American Association of Colleges of Nursing

Analysis of Feedback

- **TF analyzed the following feedback to create the Fifth Draft of the *Master's Essentials:***
  - **San Diego/New Orleans Regional Meetings**
  - **Letter from International Society of Nurses in Genetics (ISONG)**
  - **Letter from Council on Graduate Education for Administration in Nursing (CGEAN)**
  - **Cultural Competency Advisory Group Graduate Competencies**
  - **Public Health/Association of Community Health Nurse Educators (ACHNE)**

American Association
of Colleges of Nursing

Highlights of Fifth Draft

- **Added a clear and succinct message to the introduction about what master's graduates are prepared to do:**
  - **Assume accountability for quality care outcomes,**
  - **Navigate and integrate care services across the healthcare system,**
  - **Lead and mentor healthcare team members,**

American Association
of Colleges of Nursing
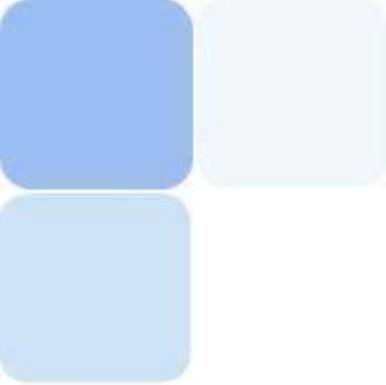
Highlights (cont.)

- – **Collaborate with and build interprofessional care teams,**
- – **Design innovative nursing practices, and**
- – **Facilitate the translation of evidence into practice.**

American Association
of Colleges of Nursing

Highlights (cont.)

- **Deleted Essential IX,** *Advancing Professionalism and Professional Values*

- **Now there are 9 Essentials instead of 10.**

- **Content and competencies from the old Essential IX moved to Essential VII and the new Essential IX**

American Association
of Colleges *of* Nursing

Highlights (cont.)

- **Clarified that the nine *Essentials* represent new core outcomes for all master's programs.**
- **The Master's programs encompassing these *Essentials* prepare graduates with additional knowledge and skills; however, may or may not prepare graduates for specific roles.**
- **Based on education for different roles, additional coursework may be necessary.**

American Association
of Colleges of Nursing
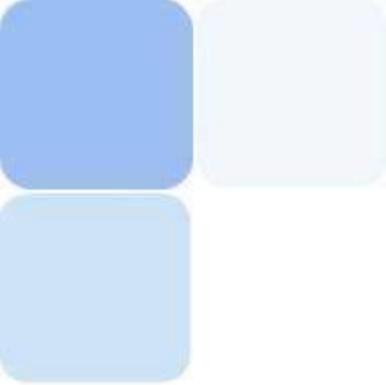
Highlights (cont.)

- **Added an Executive Summary and Summary to the document**
- **Integrative Learning Strategies will not be a part of the final document; they will be in a tool kit**

American Association
of Colleges of Nursing

Highlights (cont.)

- **Language on 3P's moved from the old Essential X to Essential I:**
  - **Master's students being prepared for direct-care roles will have graduate-level content that builds upon an undergraduate foundation in health assessment, pharmacology, and pathophysiology.**
  - **Having master's-prepared students with a strong background in these three areas is seen as imperative from the practice perspective.**

American Association
of Colleges of Nursing

Highlights 3P's (cont.)

- **Graduate-level content in the 3P's is required for individuals being prepared for direct-care roles; however, it is recommended that for these students, the Master's curriculum include three separate graduate-level courses in these three areas.**

- **The inclusion of these three separate courses facilitates the transition of these master's program graduates into the DNP specialty programs.**

American Association of Colleges of Nursing

Highlights (cont.)

- **CGEAN Feedback**
  - Graduate-level content in the 3P's is not needed for preparation in management or administration (non-direct) roles
  - Management or administration curricula must focus on systems (micro-, meso-, & macro)
  - Definitions of administration, leadership and management added to the glossary, using the CGEAN definitions

American Association
of Colleges of Nursing

Highlights (cont.)

- **There is a role for master's preparation for population-focused practice at the master's level**

- **Population-focused Practice and the 3P's**
  - **If graduates are being prepared for a practice with populations/aggregates (non-direct roles), graduate-level content in the 3P's are not required**
  - **If graduates are being prepared for taking care of individuals in the community (direct-care roles), graduate-level content in the 3P's are required**

American Association
of Colleges of Nursing

Highlights (cont.)

- **Genetic/Genomics strengthened in content, competencies, and Integrative Learning Strategies in fifth draft in the following Essentials:**
  - **Essential I**
  - **Essential VIII**
  - **Essential IX**

American Association
of Colleges of Nursing

Highlights (cont.)

- **Cultural competency concepts strengthened throughout the document**
  - **Definitions of Cultural Competency and Diverse Populations from the Cultural Competency Advisory Group were added to the glossary**
  - **Cultural competency concepts were strengthened in Essentials I, II, III, IV, & IX**

American Association
of Colleges of Nursing

Highlights (Cont.)

- **Clinical Educator:**
  - **Preparation across all nine Essential areas, including graduate-level preparation in an area of clinical practice**
    - **If that clinical practice is in direct care, then students need graduate-level content in the 3P's**

American Association
of Colleges of Nursing

Highlights (Cont.)

- **Clinical Educator (cont.)**
  - **Additional preparation in curriculum design and development, teaching methodologies, educational needs assessment, and learner-centered theories and methods.**

American Association
of Colleges of Nursing

Overview of Final Draft Document

- ***All components of fifth draft have been revised from the fourth draft***
  - **Executive Summary**
  - **Introduction**
  - **Context for Nursing Practice**
  - **Nine Essentials**

American Association
of Colleges of Nursing

Overview of Draft Document (cont.)

- **Clinical/Practice Learning Expectations for Master's programs**
- **Summary**
- **Glossary**
- **References**

American Association
of Colleges *of* Nursing

Overview of Nine Essentials

Each Essential includes:

- **Rationale**

- **Outcomes: what the graduate is able to do, know, and value at the end of the program**

- **Sample Content: key points/concepts**

- **Examples of Integrative Learning Strategies (will not be part of final document; will be in tool kit)**

American Association
of Colleges of Nursing
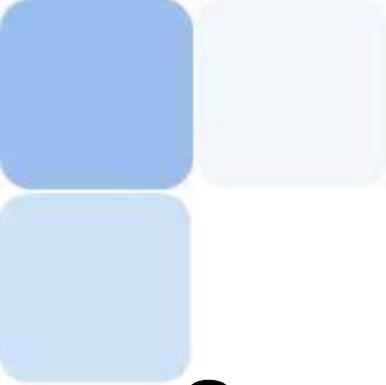
Content

Some content is noted multiple times due to the synergistic nature of the essentials and therefore the relevance of some content for >1 essential.

Essential ≠ Course

American Association
of Colleges of Nursing

Essential I

- **Scientific Background for Practice**
  - **Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.**

American Association
of Colleges of Nursing

Essential II

- **Organizational and Systems Leadership**
  - **Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.**

American Association of Colleges of Nursing

Essential III

- **Quality Improvement and Safety**
  - **Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.**

Causes For Medications Not Being Delivered On-Time

American Association
of Colleges *of* Nursing
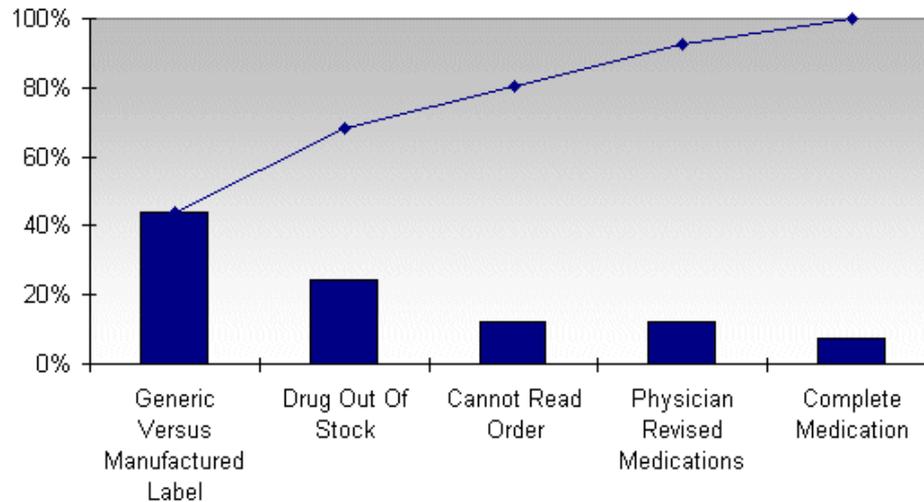
Essential IV

- **Translating and Integrating Scholarship into Practice**

    - **Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.**

American Association of Colleges of Nursing
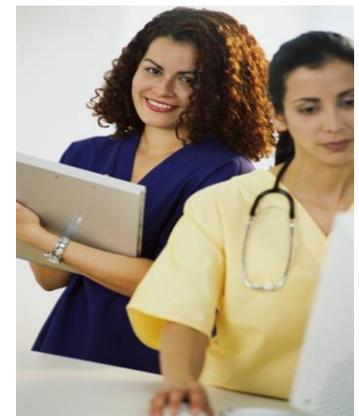
Essential V

- **Informatics and Healthcare Technologies**
  - **Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.**

American Association of Colleges of Nursing

Essential VI

- **Healthcare Policy and Advocacy**
  - **Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.**

American Association
of Colleges of Nursing

Essential VII

- **Interprofessional Collaboration for Improving Patient and Population Health Outcomes**
  - **Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.**

American Association
of Colleges of Nursing

Essential VIII

- **Clinical Prevention and Population Health for Improving Health**
  - Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, communities, and aggregates/clinical populations.

American Association
of Colleges *of* Nursing
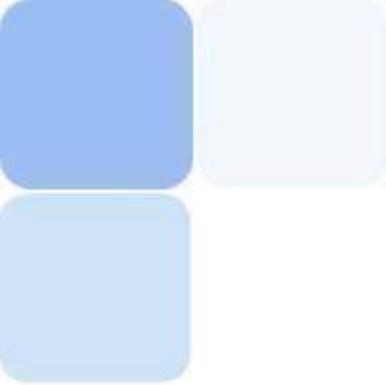
Essential IX

- **Master's-Level Nursing Practice**
  - **Recognizes that master's-prepared nursing practice is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems Master's-level nursing graduates must have an advanced level of understanding of nursing and related sciences. Nursing practice interventions include both direct and indirect care components.**

American Association of Colleges of Nursing
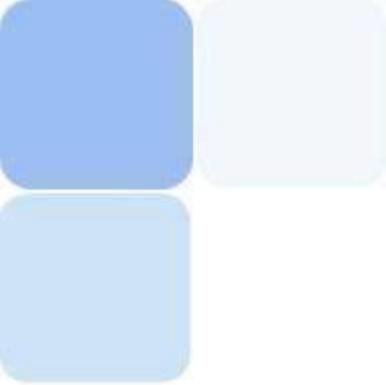
Timeline

- **December 2010**   **Task Force Meeting**
- **January 2011**   **Submitted to AACN Board for Approval**
- **March 2011**   **Submitted to AACN Membership for endorsement**

American Association
of Colleges of Nursing

**Final comments will be due
by November 15, 2010.
Send comments to
kmcguinn@aacn.nche.edu**

American Association
of Colleges of Nursing