



# ***Revising Curricula for the New Master's Essentials***

**May 26, 2011**

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# Revising Curricula for the New *Master's Essentials*

**AACN Webinar**

**March 26, 2011**

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College of Nursing  
University of Missouri-St. Louis

**Member, Task Force on *The Essentials of  
Master's Education in Nursing***  
**Chair, *Master's Essentials* Tool Kit Task Force**



# Plan for the Webinar

- **Presentation by J. G. Sebastian on new *MSN Essentials (AACN, 2011)* and frequently asked questions**
- **Presentation by J. F. Karshmer, University of San Francisco, Implementation of 2011 *MSN Essentials***
- **Presentation by B. Jackson, University of Texas Health Science Center, San Antonio, Implementation of 2011 *MSN Essentials***



# **MSN Essentials Task Force Members (2009-11)**

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**Northeastern University**

**Jean Bartels, PhD**

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**Dept. of Veterans Affairs**

**Patricia Martin, PhD, FAAN**

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# **MSN Essentials Task Force Members (2009-11)**

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**Polly Bednash, PhD, *AACN CEO***

**Kathy McGuinn, MSN, *staff liaison***

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**Horacio Oliveira, *staff liaison***



# **Task Force Members, *MSN Essentials* Tool Kit (2011)**

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**University of Missouri – St. Louis**

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**Doreen Harper, PhD, University of Alabama,  
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# **Task Force Members, *MSN Essentials* Tool Kit (2011)**

**James Harris, DSN, FAAN *practice liaison***

**Dept. of Veterans Affairs**

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**Polly Bednash, PhD, AACN CEO**

**Kathy McGuinn, MSN, *staff liaison***

**Joan Stanley, PhD, *staff liaison***

**Horacio Oliveira, *staff liaison***



# Highlights of the *MSN Essentials* (2011)

- The nine *Essentials* represent the core for all master's programs.
- Graduate preparation expands upon BSN Essentials (2008).
- The emphasis is on outcomes, rather than roles.
- Additional coursework is needed for role preparation or for in-depth preparation in an area of practice.





# Conceptual Organization of MSN Education (pp. 8-9)

- **Graduate nursing core**
  - Nine essentials
- **Direct care core**
  - 3 P's
- **Functional area content**
  - Didactic and clinical experiences for roles or functions defined by professional nursing organizations & certification bodies
  - Students must have sufficient supervised practice experiences to demonstrate mastery of the essentials



# Direct Care Core – 3 P's

- Graduate-level content in the 3P's (Physiology/Pathophysiology, Pharmacology, and Health Assessment) is required for individuals being prepared for direct-care roles.
- It is recommended that for these students, the Master's curriculum include three separate graduate-level courses in these three areas.
- Inclusion of three separate courses facilitates the transition of master's program graduates into the DNP specialty programs.



# Indirect Care Practice Roles

- Graduate level content in the 3P's is **NOT** required for individuals being prepared for indirect care practice roles: those that focus on aggregates, systems, and organizations, such as
  - Administration
  - Public Health
  - Informatics



# Nurse Educator Preparation

- The master's-prepared nurse educator is a direct care clinical role, so ***graduate-level content in the areas of health assessment, physiology/ pathophysiology, and pharmacology is required.***



# Nurse Educator Preparation

- **Master's students who aspire to faculty roles in baccalaureate and higher degree programs are advised that additional education at the doctoral level is needed (AACN, 2008)**





# 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





# Content

**Some content is noted multiple times due to the synergistic nature of the Essentials and the relevance of some content for more than one Essential.**

**Essential  $\neq$  Course**



# Essential I

- **Background for Practice from Sciences and Humanities**
  - **“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” (2011, p. 4).**





# Essential II

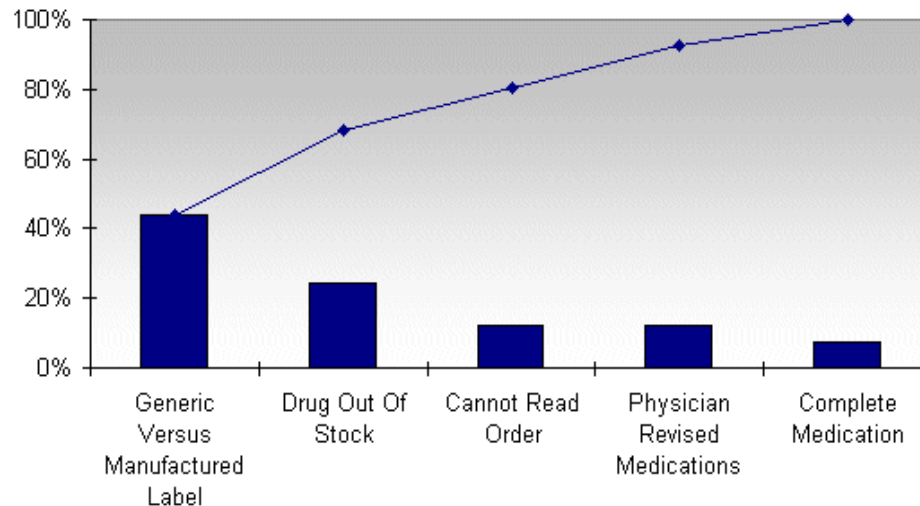
- **Organizational and Systems Leadership**
  - **“Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective” (2011, p. 4).**



# 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” (2011, p. 4).**

Causes For Medications Not Being Delivered On-Time



# 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” (2011, p. 4).**



# 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” (2011, p. 5).**



# 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” (2011, p. 5).**



# 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” (2011, p. 5).**



# 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” (2011, p. 5).**



# 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” (2011, p. 5).**





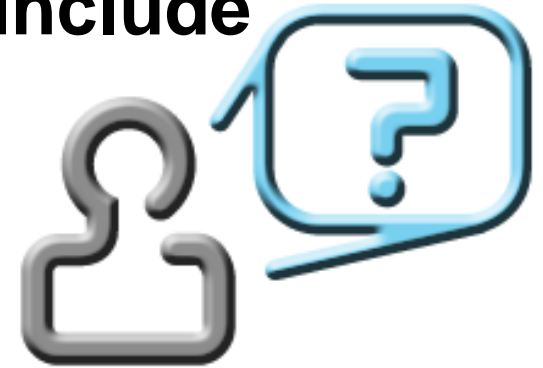
# Frequently Asked Questions

- **How can we fit all of this content into our programs?**
  - **Content relevant to the essentials can be integrated into curricular and course designs that faculty think best for their schools;**
  - **Opportunities for innovation are inherent – courses do not need to mirror the structure of the nine essentials ;**
  - **Faculty are likely already including much of the new content in curricula.**



# FAQS

- **Where can we go for resources or suggestions?**
  - **An MSN Resource Site is available on the AACN web pages;**
    - **<http://www.aacn.nche.edu/MSNessentials.htm>**
  - **An Online MSN Tool Kit will include ideas for integrated learning strategies.**



# FAQs

- **How might we organize clinical experiences?**
  - Opportunities exist for rethinking clinical experiences with practice partners, particularly in light of IOM *Future of Nursing* (2010), new directions with health care reform, and changing population health needs;
  - Webinars, interactive sessions, and conferences provide opportunities for sharing across schools;
  - Ideas will be suggested in the integrative learning strategies.

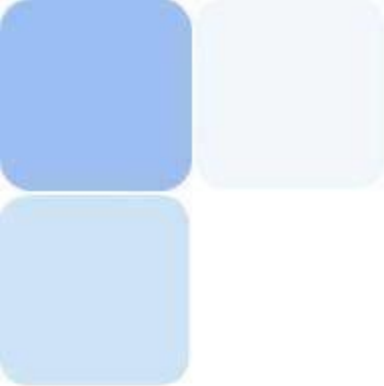


# FAQs

- **What might be needed to prepare students for selected roles?**
  - **Additional competencies are delineated by professional nursing organizations and certification bodies;**
  - **Additional didactic and clinical learning experiences will be needed, depending on the role;**

**Detailed discussion of roles will be included in Online MSN Tool Kit.**





American Association  
of Colleges of Nursing





School of Nursing

# Essentials of Master's Education in Nursing Webinar

**Judith F. Karshmer,  
Ph.D., PMHCNS-BC**



# Updating MSN Curricula

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- X Institutional Vision, Mission, Values
- X School/Program Goals
- X Constituencies
  - 📌 Students
  - 📌 Faculty
  - 📌 Employers
  - 📌 Patients
- X Healthcare in the 21<sup>st</sup> Century



# Converting Obstacles to Assets

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- X Personal Questions → Answers
- X Faculty Opposition → Support
- X Administration Concerns → Assurances
- X Student Confusion → Clarity
- X Employers Reluctance → Enthusiasm
- X Process Burden → Streamlined Next-steps
- X Support of IOM Recommendations  
→ Action




# UT Health Science Center – San Antonio

School of Nursing  
Revision of MSN Program  
2008–2011

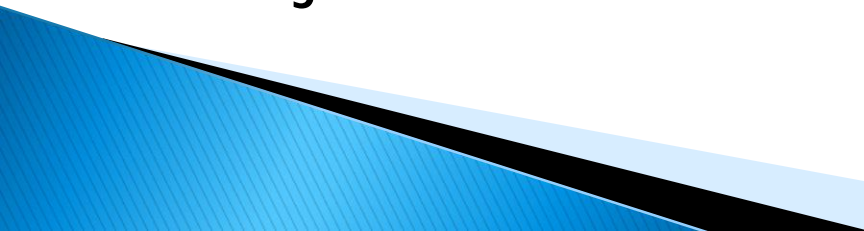
**Brenda S. Jackson, PhD, RN**



# Strategic Planning

- ▶ Up coming CCNE re-accreditation visit 2011
  - ▶ New BSN Essentials
  - ▶ Proposed new MSN Essentials
  - ▶ Adoption of Consensus Model
  - ▶ Planning for post masters DNP + BSN to DNP
  - ▶ Changing needs in our community of interest
- 


# Programmatic Changes

- ▶ Phase out CNS majors: Med-Surg/Critical Care
  - ▶ Administration in Community and Health Care Systems in Nursing – phase out
  - ▶ Revision– Administrative Management– designed to meet proposed AACN MSN Essentials and AONE guidelines
  - ▶ New Clinical Nurse Leader Major
  - ▶ Revise Early Masters Program– RN to MSN majors
- 


# Programmatic Changes

- ▶ Move Primary Care NP(FNP, PNP, FPMHNP) tracks to DNP programs and post masters option, phase out ACNP program
- ▶ Alternate Entry MSN – RN (associate degree/diploma graduates) transitions courses to move students through AACN BSN Essentials to majors: Administrative Management or Clinical Nurse Leader

# Emphasis on MSN Essentials

- ▶ Leadership: direct care and systems/ revised existing Nursing Leadership & Health Policy core course: Leadership for Quality, Safety & Health Policy
  - ▶ Evidence-Based Practice: Using Research for the Practice of Nursing, and Financial and Economic Evidence in Healthcare
  - ▶ Information Systems—eliminated Informatics minor. Added Core course: Healthcare Information Systems and Patient Care Technology
- 

# Community of Interest

- ▶ South Texas region—travel time and work issues
  - ▶ Part-time/full-time options
  - ▶ Web-enhanced
- 

# Thank you for your interest!

- ▶ Healthcare = complex adaptive systems
- ▶ Nursing Education Change = Challenging but we can do it!

Juntos Podemos!



