

Master's Essentials Task Force Dialogue

AACN's Annual Meeting
March 20, 2011

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



American Association
of Colleges of Nursing





Overview of Presentation

- **Task Force Members**
- **Work of the Task Force**
- **Consensus Building Process**
- **Highlights of the Final Draft of the *Master's Essentials***
- **Overview of the Final Draft Document**
- **Overview of the Nine Essentials**
- **Timeline**





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, FAAN *practice liaison*

Dept. of Veterans Affairs

Patricia Martin, PhD, FAAN

**Wright State University College of Nursing
and Health**





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*





Work of the Task Force to Date

- **Review of the Literature**
- **Presentation/Discussion at Master's Education Conference**
 - Feb 20, 2009, Feb 25, 2010, Feb 24, 2011
- **Stakeholders' Teleconferences**
 - March 5, 2009: 10 Stakeholders Participated
 - March 6, 2009: 7 Stakeholders Participated
- **Presentation/Discussion at AACN Annual Meetings**
 - March 15, 2009,
 - March 21, 2010
 - March 20, 2011





Invited Stakeholders



- **American Organization of Nurse Executives**
- **Council on Graduate Education for Administration in Nursing**
- **National Council of State Boards of Nursing**
- **Joint Commission Nursing Advisory Council**
- **Dartmouth Institute for Health Policy and Clinical Practice**
- **American Association of Critical Care Nurses**

- **Association of American Medical Colleges**
- **American Nurses Association**
- **American Academy of Nurses Expert Panel on Aging**





Invited Stakeholders (cont.)

- **Quad Council of Public Health Nursing Organization**
- **End-of-Life Nursing Education Consortium**
- **American Association of Colleges of Pharmacy**
- **Alliance for Nursing Informatics**
- **Council on Social Work Education**
- **Cultural Competency Advisory Group**
- **National Nursing Staff Development Organization**
- **American Holistic Nurses Association**
- **National Human Genome Research Institute**
- **National Council of Ethnic and Minority Nurses Association**
- **Health Resources and Services Administration**





Work of Task Force (cont.)

- **Selection of a Framework**
 - Parallels the *Essentials of Doctoral Education for Advanced Nursing Practice* and the *Essentials of Baccalaureate Education for Professional Nursing Practice*
 - Includes core competencies from 2003 Institute of Medicine's (IOM) Report, *Health Professions Education: A Bridge to Quality*





Work of Task Force (cont.)

- **IOM Core Competencies: Patient-Centered Care, Teamwork and Collaboration, Quality Improvement, Informatics, Evidence-based Practice**
- **Leveling of Master's Competencies between Baccalaureate and DNP Competencies**





Work of Task Force (cont.)

- **Six draft documents posted on the AACN website:**
 - **1st draft on 9/04/09**
 - **2nd draft posted on 11/11/09**
 - **3rd draft posted on 1/11/10**
 - **4th draft posted on 2/17/10**
 - **5th draft posted on 8/23/10**
 - **6th final draft posted on 2/7/11**

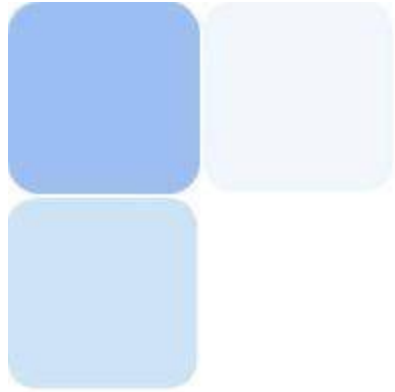




Consensus Building Process: Four Regional Meetings Fall 2009 – Spring 2010

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

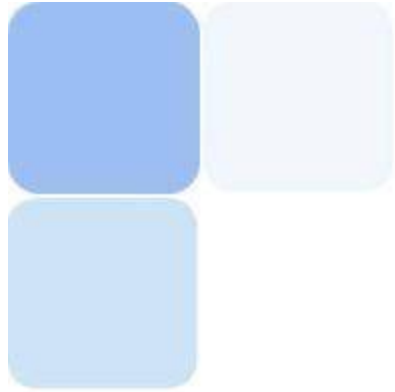




Regional Consensus-Building Process

- **Gather and incorporate input into the document as clear, consistent messages emerge.**
- **Iterative process with changes made between regional meetings and posted on the AACN website.**

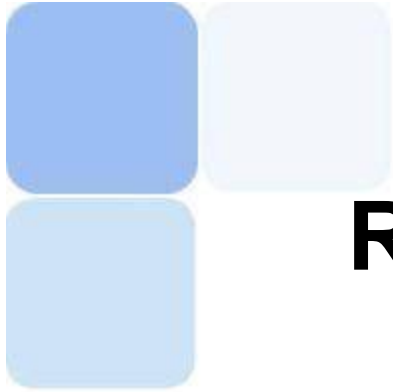




Regional Consensus-Building Process

- **Less clear or consistent messages are tracked and reviewed for incorporation following completion of regional meetings.**





Recent Work of Task Force

- **3 Webinars: Sept 8, Oct 5, & Oct 26, 2010**
- **Public comments accepted until November 15, 2010**
- **Face-face meeting: December 8, 2010**





Highlights of Final Draft

- **Revised a clear and succinct message in the introduction about what master's graduates are prepared to do:**
 - **Lead change to improve quality outcomes**
 - **Advance a culture of excellence through lifelong learning**
 - **Build and lead collaborative interprofessional care teams**





Highlights (cont.)

- **Navigate and integrate care services across the healthcare system**
- **Design innovative nursing practices**
- **Translate evidence into practice**






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.





Highlights 3P's (cont.)

- Graduate-level content in the 3P's (Physiology/Pathophysiology, Pharmacology, and Health Assessment) 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.





Highlights (cont.)

- **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, e.g.**
 - Administration
 - Public Health
 - Informatics





Highlights (cont.)

- **Clarified Role of Nurse Educator:**
 - **The master's prepared nurse educator differs from the BSN nurse in depth of his/her understanding of the nursing discipline, nursing practice, and the added pedagogical skills**





Highlights (Cont.)

- **Clarified Role of Nurse Educator:**
 - **The master's-prepared nurse educator builds on baccalaureate knowledge with *graduate-level content in the areas of health assessment, physiology/pathophysiology, and pharmacology***





Highlights (Cont.)

- **Clarified Role of Nurse Educator:**
 - **Those master's students who aspire to faculty roles in baccalaureate and higher degree programs will be advised that additional education at the doctoral level is needed (AACN, 2008)**





Highlights (cont.)

- **New Section on Master's Nursing Education Curriculum and New Diagram: Important Concepts**
 - Graduate nursing core
 - Direct/Indirect Care (definitions in glossary)
 - APRN definition added to glossary
 - Diagram clarifies the requirements for the 3Ps related to direct/indirect care





Highlights (cont.)

- **Essential I:**
 - **Title Change: Background for Practice from Sciences and Humanities**
 - **Added Competency 8: Analyze nursing history to expand thinking and provide a sense of professional heritage and identity (AAHN)**





Highlights (cont.)

- **Essential VIII:**
 - **Added language on theory to rationale: Mastery of these concepts based on a variety of *theories* is essential in the design and delivery (planning, management, and evaluation) of evidence-based clinical prevention and population care and services**
 - **Added Nursing Theories to sample content**





Highlights (cont.)

- **Cultural Competence**
 - **“Culturally responsive”** was the suggested language instead of **“competence”**





Overview of Final Draft Document

– Introduction

- **Master's Education in Nursing and Areas of Practice**
- **Context for Nursing Practice**
- **Master's Nursing Education Curriculum**

– Nine Essentials





Overview of Draft Document (cont.)

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





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**



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.**





Essential II

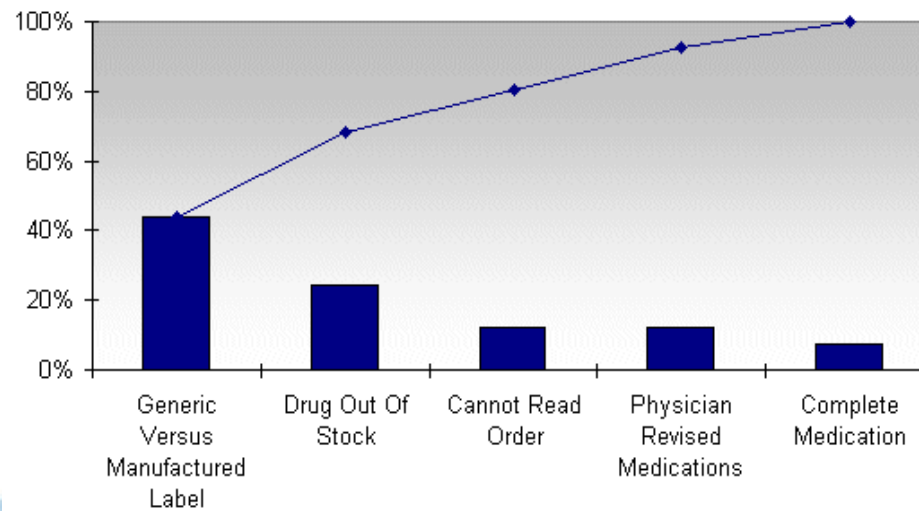
- **Organizational and Systems Leadership**
 - **Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.**



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



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.**



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.





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.**



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.**





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.**





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.





Content

Some content is noted multiple times due to the synergistic nature of the Essentials and the relevance of some content for more than 1 Essential.

Essential \neq Course





AACN Board Actions at the January Meeting

- Approved the *Essentials of Master's Education in Nursing*
- Approved the development of a faculty tool kit to accompany the new *Master's Essentials* document





Tool Kit

- **Integrative Learning Strategies**
- **FAQs**
- **Crosswalk of the *Master's Essentials* with the new report from the *Initiative on the Future of Nursing: Leading Change, Advancing Health* (IOM, 2010)**
- **Crosswalks with the *Baccalaureate and DNP Essentials***





Tool Kit

- **Talking points for various audiences**
- **Task Force's final PowerPoint presentation to the membership**
- **Detailed discussion of roles**
- **Links to relevant competencies of stakeholders**





Timeline

- **March 2011**

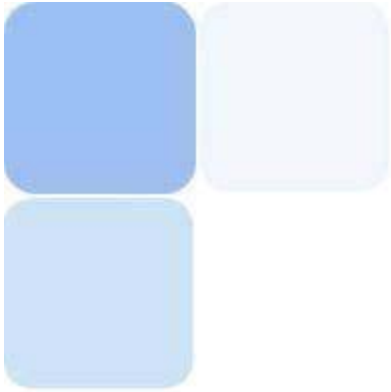
**Submit to AACN
Membership for
Endorsement**

If endorsed ...

- **September 2011**

Tool Kit Completed





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