

Developing Competency in Quality and Safety: Tools for Meeting the *Essentials*

Barb Tassell, DNP, RN, NP-D-BC, EBP(CH)
Elizabeth M. Byrd, PhD, RN, CCNS



1

The Prelicensure Crosswalk Team

Tracey Dick, PhD, RN, CNE, COI,
Assistant Professor, University of Alabama at Birmingham, School of Nursing;
VA Quality Scholars Postdoctoral Fellow, Birmingham VA Health Care System

Elizabeth M. Byrd, PhD, RN, CCNS,
Assistant Professor, University of Alabama at Birmingham, School of Nursing;
VA Quality Scholars Postdoctoral Fellow, Birmingham VA Health Care System

Shannon S. Layton, DNP, RN, CNL, CWCN, NEA-BC, LICSW, PIP,
Assistant Professor, University of Alabama at Birmingham, School of Nursing

Rebecca S. (Suzie) Miltner, PhD, RN, CNL, NEA-BC, FAAN,
Professor, University of Alabama at Birmingham, School of Nursing;
Donna Brown Barton Endowed Professor in Nursing

Mary Dolansky, PhD, RN, FAAN,
Sarah C. Hirsch Endowed Professorship in Nursing
Associate Professor, Frances Payne Bolton School of Nursing
Advisor, National VA Quality Scholars Program (VAGS)

2

2

The Graduate Crosswalk Team

Brittany Hay, DNP, APRN, ANP-BC, FNP-BC
Director FNP and AGPCNP Concentrations, Assistant Professor
University of South Florida, Tampa, Florida

Deana Hays DNP, APRN, FNP-BC
Assistant Professor

Oakland University Rochester, Michigan

Barb Tassell DNP, RN, NP-D-BC, EBP(CH)
Research Associate/Education Consultant
Case Western Reserve University

Cindy Zellefrow, DNP, MSED, RN, LSN, PHNA-BC, EBP-C
Director, Academic Care at Full Institute for Evidence-Based Practice,
Assistant Professor Clinical Nursing
The Ohio State University College of Nursing, Columbus, OH

Kerry Milner, DNSc, RN, FNP-BC, EBP (CH)
Professor
Davis & Henley College of Nursing
Sacred Heart University

3

3

Objectives



Describe the process used to Crosswalk the QSEN Competencies with 2021 AACN Essentials



Identify key aspects of alignment between the QSEN Competencies and the 2021 AACN Essentials.



Apply teaching strategies that align with both QSEN competencies and AACN *Essentials: Core Competencies for Professional Nursing Education* (2021).

4

4

Are the QSEN Competencies well represented in the new Essentials and if so, where are they?

If I aligned coursework to the QSEN competencies in the past, how can I preserve some of my work?



GOAL: Comprehensive crosswalk

Prelicensure Team
5 nurse faculty members

Graduate Team
5 nurse faculty members

Variety of experience within nursing education and clinical practice

Process: Individual and Small Group Review

Group divided by areas of QSEN expertise

Individuals aligned QSEN statements to corresponding Essentials sub-competency

Reviewed in pairs (consensus or forwarded to group review)

Full Group Review until consensus

5

6

Assumptions

Each QSEN statement can **stand alone** as a competency.

Pre-licensure: Some QSEN statements **may support more than one** Essential

Graduate: A **best fit** alignment exists for each QSEN statement and one sub-competency within an AACN Domain.

A crosswalk ought to **honor QSEN** competency statement domain if possible, so the core statement carried more weight than the verbs used.

QSEN competencies are **best aligned** at the level they will be demonstrated and assessed.

7



8

Crosswalk Tool Design

QSEN Competencies and KSA Statements are along the left side:

Essential's Domains, Descriptions, and Competencies are along the top:

First Tab = Full Tool

Next Tab = Each Domain

Crosswalk indicates the Essential sub-competency statement where the QSEN statement aligns

9

Quality Improvement

Safety

- You will need a copy of AACN *Essentials* for reference to understand the sub-competencies for each domain
- For ease of use, the document is color coded based on competency/domain

10

- Locate the QSEN Competency that you are interested in
- Highlight that row (using the highlight tool)

11

AACN Domain 4: Scholarship for the Nursing Discipline; Sub-competency 4.2: Integrate best evidence into nursing practice; b: Evaluate appropriateness and strength of the evidence

- Scroll to the right until you reach text
- Reference the AACN *Essentials* documents for more information concerning the sub-competency (if needed)

12

A Closer Look

Legend:
 Peach = See Prelicensure Tool
 ** = Started as Duplicates
 White = Aligned on This Tool

Evidence-Based Practice
Definition: Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

AACN Essentials: Domain 1: Knowledge for Nursing Practice
 Develops integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and humane and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.

QSEN Module Implementation (2009)

AACN Essential Domain 1: Knowledge for Nursing Practice

The EBP QSEN Domain (a concept in the Essentials) aligned strongly with Essential Domain 1 (Knowledge)

13

What did we find?

Two Crosswalks to support movement from QSEN→Essentials or Essentials→QSEN

14

QSEN Alignment with New AACN Essentials

Bob Fassell DNP, RN, NPD-CE, EBP(CH) 2021
 Graphic Design: Fabienne Alexander BA

QSEN Competencies

1. Patient-Centered Care
2. Assessment & Collaboration
3. Evidence Based Practice
4. Quality Improvement
5. Safety
6. Informatics

AACN Re-envisioned Essentials Domains

1. Knowledge for Nursing Practice
2. Professionalism and Leadership Development
3. Population Health
4. Scholarship for Nursing
5. Quality and Safety
6. Interprofessional Partnerships
7. Systems-Based Practice
8. Informatics and Healthcare Technologies
9. Professionalism
10. Personal, Professional, and Leadership Development

AACN Re-envisioned Essentials Concepts

- Clinical Judgment
- Communication
- Compassionate Care
- Diversity, Equity, and Inclusion
- Ethics
- Evidence-Based Practice
- Health Policy
- Social Determinants of Health

15

What else did we find?

Many QSEN statements initially written at the Graduate level are now normal practice/education and so were aligned at the Entry level.

129 QSEN Statement initially (2009) at Grad level:

- 59 were on both Pre/Grad levels. Both levels needed to develop that competency
- 70 were only aligned at the entry level

68 were aligned at the advanced level.

16

What about the pre-licensed level?

Many Graduate QSEN statement are now aligned with the Entry level Essentials.

154 QSEN Statement initially (2007) at Pre-license level:

- 59 were on both Pre/Grad levels. Both levels needed to develop that competency
- 70 were added from the Graduate level

229 are now aligned at the entry level.

17

Where did they go?

	2009 Total	Shared	Moved to Entry Level	Unchanged	2007 Total	Total Aligned to Entry Level
Informatics	22	0	12	11	17	29
Safety	31	10	14	7	20	34
Quality Improvement	33	7	14	12	19	33
Evidence-based Practice	26	6	10	10	21	31
Teamwork and Collaboration	38	21	5	12	37	42
Patient Centered Care	45	14	15	16	40	55

18

And what could it mean?

- When initially written, many competencies were new to both levels
- We have done a GREAT JOB. These competencies are now fundamental to entry level education
- Many current QSEN resources now support Entry level Essentials
- New teaching/evaluation strategies might be needed for Advanced level Essentials

19

	<p>Analyze own strengths, limitations and values as a member of a team.</p> <p>Analyze impact of own advanced practice role and its contributions to team functioning.</p> <p>Describe scopes of practice and roles of all health care team members.**</p> <p>Analyze strategies for identifying and managing overlaps in team member roles and accountability.</p> <p>Analyze strategies that influence the ability to initiate and sustain effective partnerships with members of nursing and inter-professional teams.</p> <p>Analyze impact of cultural diversity on team functioning.</p> <p>Analyze differences in communication style preferences among patients and families, advanced practice nurse and other members of the health team.**</p> <p>Describe impact of own communication style on others.**</p> <p>Describe examples of the impact of team functioning on safety and quality of care.**</p> <p>Analyze authority gradients and their influence on teamwork and patient safety.</p> <p>Identify system barriers and facilitators of effective team functioning.**</p> <p>Examine strategies for improving systems to support team functioning.**</p> <p>Demonstrate awareness of own strengths and limitations as a team member.**</p> <p>Continuously plan for improvement in use of self in effective team development and functioning.</p> <p>Act with integrity, consistency and respect for differing views.**</p> <p>Function competently within own scope of practice as a member of the health care team.**</p> <p>Assume role of team member or leader based on the situation.**</p> <p>Guide the team in managing areas of overlap in team member functioning.</p> <p>Solicit input from other team members to improve individual, as well as team, performance.**</p> <p>Empower contributions of others who play a role in helping patients/families achieve health goals.</p> <p>Initiate and sustain effective health care teams.</p> <p>Communicate with team members, adapting own style of communicating to needs of the team and situation.**</p> <p>Communicate respect for team member competence in communication.</p> <p>Initiate actions to resolve conflict.**</p> <p>Follow communication practices that minimize risks associated with handoffs among providers, and across transitions in care.**</p> <p>Choose communication styles that diminish the risks associated with authority gradients among team members.**</p> <p>Agree on position/perspective and supporting evidence in discussions about patient care.</p> <p>Lead or participate in the design and implementation of systems that support effective teamwork.</p> <p>Engage in state and national policy initiatives aimed at improving teamwork and collaboration.</p>
Knowledge	
Teamwork and Collaboration	
Definition: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.	
Skills	

20

Crosswalk Tool Application

To download the crosswalks- <https://qsen.org/qsen-aacn-crosswalks/>



21

Teaching EBP search strategies...

- Your course excels in teaching graduate students how to become experts at searching the literature.
- You are starting the work of mapping your current course to the 2021 Essentials and wonder where your awesome teaching strategies and activities fit best.



22

Teaching and Evaluation Strategies for the QSEN Graduate competency: *Identify efficient and effective search strategies to locate reliable sources of evidence.*

Competency	Essential	Strategies	Evaluation
1.1e Translate evidence from nursing science as well as other sciences into practice.	1.1e	Use evidence-based practice (EBP) to identify and evaluate research evidence, clinical practice and patient preferences.	Use evidence-based practice (EBP) to identify and evaluate research evidence, clinical practice and patient preferences.
	4.2f	Use diverse sources of evidence to inform practice.	Use diverse sources of evidence to inform practice.

Supports development of Essential 1.1e and 4.2f

23

Realize you need an additional teaching strategy for a specific essential...

Use the Crosswalk tool in reverse:

- Find the Essential
- Find the related matches
- Scan across to the QSEN domain

Essential	Competency	Strategies	Evaluation
1.1e	1.1e	Use evidence-based practice (EBP) to identify and evaluate research evidence, clinical practice and patient preferences.	Use evidence-based practice (EBP) to identify and evaluate research evidence, clinical practice and patient preferences.
4.2f	4.2f	Use diverse sources of evidence to inform practice.	Use diverse sources of evidence to inform practice.

24

QSEN.org/strategies

Strategy Content

- Competency Domains
 - Evidence-Based Practice
 - Informatics
 - Person-Centered Care**
 - Quality Improvement
 - Safety
 - Teamwork and Collaboration
- Learner Level
 - Continuing Education
 - Faculty Development/Instructors
 - Graduate Students**
 - New Graduates/Transition to Practice
 - Pre-Licensure ADN Diploma
 - Pre-Licensure BSN
 - RN to BSN
 - Staff Development
- Learner Setting
 - Classroom
 - Clinical Setting
 - Skills or Simulation Laboratories

25

Review and select strategies

Strategy Search Results

Strategy Title	Submission Number	Submission Date	Strategy Search	Strategy Search Results
...

"Elder" Centered Care: Flipping the concept map

Submitter Information

Author: Barbara Gray-Carter, PhD
 Title: Associate Professor of Nursing
 Institution: Christendom College
 Email: bgray@christendom.edu

26

Mr. Potato Head: A LEAN, Mean Quality Improvement Teaching Machine!

November 15, 2014 / QSEN Institute

Submitter Information

Author: Beth Murphy MS, Department of Health
 Title: Medical Director
 Institution: University of Massachusetts Memorial Hospital and University of Massachusetts Medical School
 Email: beth.murphy@umassmemorial.org
 Coauthors: Eric Ayers, Michael Eric Dickson, MD (Fellow)

Competency Category
 Person-Centered Care, Quality Improvement, Safety, Teamwork and Collaboration

Learner Level
 Continuing Education, Graduate Students, New Graduates/Transition to Practice, Pre-Licensure ADN, RN to BSN, Staff Development

Learner Setting
 Classroom, Skills or Simulation Laboratories

Strategy Type
 Clinical Strategy

Learning Objectives

Strategy Objectives:

- Participants will understand concepts of Lean Process Management including "waste" (non-value added work, elimination of non-value added tasks in work process, "waste" of the system) in quality and improvement of lean-based care.
- Participants will understand steps in a PDCA cycle.
- Participants will understand that with small changes systems both quality and efficiency can be improved.
- Applying insights gained from this interactive and fun exercise, participants will be energized to bring new Quality Improvement skills and knowledge back to their clinical settings to begin or enhance improvement efforts.

27

Crosswalk for Potato Head

QSEN Competency Statement	AACN Domain	AACN Competency	AACN Sub-competency
Analyze principles of consensus building and conflict resolution (Knowledge)	Person-Centered Care	2.9 Provide care coordination	2.9.f Evaluate communication pathways among providers and other across settings, systems, and communities
Select and use tools (such as control charts and run charts) that are helpful for understanding variation (Skill)	Quality and Safety	5.1 Apply QI principles in the delivery of care	5.1.k Integrate outcome metrics to inform change and policy recommendations
Provide leadership in building consensus or resolving conflict in the context of patient care (Skill)	Interprofessional Partnerships	6.1 Communicate in a manner that facilitates a partnership approach to quality care delivery	6.1.l Demonstrate the capacity to resolve interprofessional conflict

28

Prelicensure QSEN Teaching Strategy Example

Using Gamification to Validate the Need for Evidence Based Practice: The Marshmallow Challenge

- Low fidelity simulation game
- Diverse practice settings
- High or low resource
- <https://qsen.org/using-gamification-to-validate-the-need-for-evidence-based-practice-the-marshmallow-challenge/>

29

Marshmallow Challenge

30

QI Competency Crosswalk

- QI Tab on bottom/ Find QI- Attitudes row 1 and 2/ Scroll Across to Find the aligned Essentials

Essential	Competency	Alignment
5.1a	Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals.	QI
7.3b	Value own and others' contributions to the outcome of care in the local setting.	QI

31

Marshmallow Challenge Strategy

QSEN Competencies

QI

- A-1 "Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals."
- A-2 "Value own and others' contributions to the outcome of care in the local setting."

AACN Essential

- **Quality & Safety**
 - 5.1a,
- **System Based Practice**
 - 7.3b
- **Professionalism**
 - 9.3d, 9.5a

32

Questions/Comments



33

References

- American Association of Colleges of Nursing [AACN]. (2019, January). *AACN's vision for academic nursing*. <https://www.aacnursing.org/Portals/42/News/White-Papers/Vision-Academic-Nursing.pdf>
- American Association of Colleges of Nursing (2021). *The Essentials: Core Competencies for Professional Nursing Education*. <https://www.aacnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf>
- Cronenwett, L., Sherwood, G., Barnsteiner, J., Disch, J., Johnson, J., Mitchell, P., Sullivan, D. T., & Warren, J. (2007). Quality and safety education for nurses. *Nursing Outlook*, 55(3), 122-131. <http://doi.org/10.1016/j.outlook.2007.02.006>
- Cronenwett, L., Sherwood, G., Pohl, J., Barnsteiner, J., Moore, S., Sullivan, D. T., Ward, D., & Warren, J. (2009). Quality and safety education for advanced nursing practice. *Nursing Outlook*, 57(6), 338-348. <http://doi.org/10.1016/j.outlook.2009.07.009>
- Quality and Safety Education for Nurses (QSEN) Institute. (n.d.). *Graduate QSEN competencies*. <https://qsen.org/competencies/graduate-ksas/>
- Quality and Safety Education for Nurses (QSEN) Institute. (n.d.). *Pre-licensure QSEN competencies*. <https://qsen.org/competencies/pre-licensure-ksas/>

34

Thank you

35