MEASURING QUALITY IN HEALTH PROFESSIONALS EDUCATION: NURSING FOR AN “IP” AUDIENCE

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From the Nursing Profession Literature

- Largest component of health care workforce
- Spend most time with patients
- Understand care process across continuum of care
- Evidence links them to high-quality patient care
OVERVIEW

• Part 1
  • Nursing Education (UG/Graduate)
  • Nursing Specialties/Board Certifications

• Part 2
  • Transformational Change
  • Essential Competencies
  • Quality Improvement Education

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NURSING EDUCATION

• Pre-licensure
  • Associates in Science in Nursing
  • Bachelor’s of Science in Nursing

• Masters in Science
  • Post Masters

• Doctorate
  • PhD
  • Doctorate in Nursing Practice
Competency and Training
NURSE EDUCATION

• Pre-licensure programs

• Associate Degree -- Community College
  • Associate of Science in Nursing (ASN) 2-3 yrs
  • Associate Degree in Nursing (ADN) 2-3 yrs

• Bachelor’s of Science in Nursing (BSN) 4 yrs
  • Entry-level to Registered Nurse (NCLEX-RN) Exam
    • National Council of State Boards of Nursing (NCSBN)
    • Evidence-based regulatory excellence for patient safety and public protection

• Accelerated Bachelor's & Master's degree
  • Alternate Entry with an non-nursing baccalaureate Degree
  • ECU - Accelerated (second degree) BSN (campus-based)

• Registered Nurses seeking a BSN
  • ECU – RN to BSN

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BACCALAUREATE EDUCATION FOR PROFESSIONAL NURSING PRACTICE

(AACN, 2008)

• 9 Essentials—Competency-Based

  I. Liberal Education for Baccalaureate Generalist Nursing Practice
  II. Basic Organizational and Systems Leadership for Quality Care and Patient Safety
  III. Scholarship for Evidence-Based Practice
  IV. Information Management and Application of Patient Care Technology
  V. Healthcare Policy, Finance, and Regulatory Environments
  VI. Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
  VII. Clinical Prevention and Population Health
  VIII. Professionalism and Professional Values
  IX. Baccalaureate Generalist Nursing Practice
MASTER DEGREE LEVEL

- Master of Science in Nursing (M.S.N.) degree
- Master of Nursing (M.N.) degree
- Master of Science (M.S.) degree with a major in nursing

- **4 - Advanced practice registered nurses (APRNs)**
  - Clinical Practice and separate certification
    - Clinical Nurse Specialist (CNS)
    - Nurse Anesthetists (CRNA)
    - Nurse Midwife (CNM)
    - Nurse practitioner (NP)

- **Non-credential provider specialty MSN (330)**
  - Accredited by the Commission on Collegiate Nursing Education
  - National League for Nursing Accrediting Commission
  - ECU – Nursing Ed; Nursing Leadership (N. Administration)
ADVANCED PRACTICE NURSE ROLES

• **Nurse practitioners**
  - Conduct physical exams, diagnose, treat common acute illnesses and injuries, manage acute/chronic problems such as high blood pressure and diabetes, order lab / x rays

• **Nurse midwives**
  - Provide prenatal and gynecological care, deliver babies in hospitals and private settings such as homes, and follow up with postpartum care.

• **Clinical nurse specialists**
  - Provide care in specialty areas, such as oncology, pediatrics, and cardiac, neonatal, obstetric/gynecological, neurological, and psychiatric nursing

• **Nurse anesthetists**
  - Administer anesthesia for all types of surgery in operating rooms, dental offices, and outpatient surgical centers.
Masters of Science Prepared Nurses

- **Competencies Document**
  - Essentials of Master’s Educ in Nursing (2011) American Assoc of College of Nursing

- Practice expertise & engage in higher level in multiple settings
- **Culture of excellence thru life-long learning**
- Taught to lead change in **improving quality outcomes**
- Learn to build, participate, and lead collaborative **interprofessional care teams**
- Navigate/integrate care services across healthcare systems
- Design of innovative nursing practices
- **Translate evidence into practice**

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• **9 Essentials** (Revised 2011)
  
  1. Background for Practice Science and Humanities
  2. **Organizational and Systems Leadership**
  3. **Quality Improvement and Safety**
  4. Translating and Integrating scholarship into Practice
  5. Informatics and Healthcare Technologies
  6. Health Policy and Advocacy
  7. **Interprofessional Collaboration for improving patient and Population Health Outcomes**
  8. Clinical Prevention and Population Health for improving health
  9. Master's Level Nursing Practice—Direct patient care
The two types of doctorates,
- Research-focused (PhD)- Nurse Scientist
- Practice-focused-- Doctor of Nursing Practice (DNP)

**Doctorate of Nursing Practice (DNP)**
- Evolution over 20 years from Doctorate in Nursing (DN)
- APRNs-Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Mid-Wives, and Certified Nurse Anesthetists
- Providing education in evidence-based practice, quality improvement, and systems leadership
- DNP is designed for nurses seeking a terminal degree in nursing practice
- Changing demands -nation's complex healthcare environment require the highest level of scientific knowledge and practice expertise to assure quality patient outcomes
- Alignment with Pharmacy (PharmD), Psychology (PsyD), Physical Therapy (DPT), and Audiology (AudD) all offer practice doctorates.
The Essentials of Doctoral Education for Advanced Nursing Practice

I. Scientific Underpinnings for Practice
II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking
III. Clinical Scholarship and Analytical Methods for Evidence-Based Practice
IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
V. Health Care Policy for Advocacy in Health Care
VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
VII. Clinical Prevention and Population Health for Improving the Nation’s Health
VIII. Advanced Nursing Practice

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PART 2 - WHY TRANSFORMATIONAL NURSE EDUCATION CHANGE (14 YRS)?

- http://diabetic-suppli
HISTORICAL REASONS FOR NURSING EDUCATION CHANGE

• IOM Reports:
  • 2000: *To Err Is Human: Building a Safer Health System*, errors are caused by faulty systems
  • 2001: *Crossing the Quality Chasm: New Health System for 21st Century*
    • Gaps - new technologies and translation of knowledge into practice
    • Led to an inability to apply these new technologies safely
  • 2008: *Health Professions Education: A Bridge to Quality*
    • Found clinicians were not adequately problem solving, communication, and team building
  • 2010: *The Future of Nursing: Leading Change, Advancing Health*
    • Transforming Nursing Education and Practice

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NURSING SPECIFIC ACTIONS

• Nursing Key Actions
  • 2005: Quality and Safety Education for Nurses (QSEN) - Safety Competencies for safe patient-centered care

  • 2008: American Association of Colleges of Nursing formed the **Essential Patient Safety Competencies** for Professional Nursing Care

  2011: The Future of Nursing: Leading Change, Advancing Health

• Enhanced Computer-based simulation
  • Less resource intensive and effective
  • improves critical-thinking skills

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“Health care improvement requires collaboration between academia and practice to bridge gaps in nurse education and achievement of quality outcomes.” Leslie M. McKeon, PhD, RN

**Examples:**

- Teaching Quality; Enhanced Simulation Programs; Residencies; Mentoring Programs, Increase community health programs (Transitions in Care)

- **NC RIBN Track** (Dual admit to CC & University)
  - 3 yrs at CC; End of 3rd Yr—NCLEX-RN
  - 4th year BSN: University Community Health Nursing

(Note: 65% of new nursing graduates in Associates Degree Programs --only 15% go on to BSNs)
**Childhood obesity:**
- 2-19 yrs -- overweight or obese:
  - 33.0% of boys and 30.4% of girls

[http://www.heart.org/idc/groups/heart-public](http://www.heart.org/idc/groups/heart-public)

**Number of Persons 65+**
- 2010: 40%
- 2020: 55%
- 2030: 72%

Source: Dep of Aging 2011;

**Changes due to:**
**Chronic Conditions**
&
**Prevention/Wellness Needs**

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RWJF: Campaign for Action based on IOM Report: Future of Nursing Leading Change, Advancing Health:

1. Remove scope of practice barriers *

2. Expand opportunities for nurses to lead collaborative improvements *

3. Implement nurse residency programs

4. Increase the proportion of BSN nurses (80% by 2020) *

5. Double # of Doctorates by 2020

6. Ensure nurses engage in lifelong learning

7. Prepare & enable nurses to lead change to advance health *

8. Build infrastructure collection & analysis of workforce *

* NC Supportive Goals
Eg., Quality and Safety Education for Nurses (QSEN) Initiative

• Goal:

• Preparing future nurses knowledge, skills, and attitudes (KSAs) (UG and Graduate)

• Continuously improve the quality and safety of the healthcare systems in which they work

• Six competences defined:
  • Patient-Centered Care
  • Teamwork and Collaboration
  • Evidence-based Practice (EBP)
  • Quality Improvement (QI)
  • Safety
  • Informatics
The Future System:

- Quality care to diverse populations
- Promotes wellness/prevention
- Reliably improves health outcomes
- Diverse populations

How?

- Primary care and prevention
- Interprofessional collaboration
- Care coordination
- Payment rewards value
- Quality care at affordable price
- Redesigning the care delivery system
IP Quality Certification Ideas!

• The Dartmouth Institute Microsystem Academy’s e Coach-the-Coach (eCTC) program, a 5-month program that results in formal certification as a Clinical Microsystems Coach.
  – [http://tdi.dartmouth.edu/initiatives/microsystems1](http://tdi.dartmouth.edu/initiatives/microsystems1)

• Certified Professional in Healthcare Quality (CPHQ)
  – [http://www.nahq.org/certify/content/exam.html](http://www.nahq.org/certify/content/exam.html)

• Certification in Health Care Quality and Management (HCQM) for Physicians, Nurses, and Other Health Care Professionals

• Six Sigma Quality Graduate Certificate
  – [http://www.snhu.edu/online-degrees/graduate-certificates/six-sigma-quality-online.asp](http://www.snhu.edu/online-degrees/graduate-certificates/six-sigma-quality-online.asp)
“The strength of the team is each individual member. The strength of each member is the team.”

Phil Jackson  professional basketball coach and former player