



Clinical Safety & Effectiveness Cohort # 9

Integration of IOM Content into the Nursing Curriculum



Financial Disclosure

Suzanne Yarbrough, PhD, has no relevant financial relationships with commercial interests to disclose.

Gemma Kennedy RN, PhD, has no relevant financial relationships with commercial interests to disclose.

Andrea Berndt, BS, MS, PhD, has no relevant financial relationships with commercial interests to disclose.

Carole White, PhD, has no relevant financial relationships with commercial interests to disclose.

The Team

CSE Participants

- Andrea Berndt
- Gemma Kennedy
- Suzanne Yarbrough
- Carole White

Other Team Members

- Lisa Cleveland
- Margit Gerardi
- Rosalie Tierney-Gumaer

Facilitator

- Amruta Parekh

Sponsor Departments

- Carol Reineck, Health Restoration and Care Systems Management
- Adrienne Linton, Family and Community Health Systems

AIM STATEMENT

To increase, **10% above baseline**, the perceived extent of content integration of **IOM competencies** into all courses in the undergraduate and graduate programs by **School of Nursing faculty** at UTHSCSA School of Nursing, by Spring 2012

Background



School of Nursing

Undergraduate: upper division BSN Accelerated and Traditional pre-licensure tracks

Masters Program: Nurse Practitioner Majors, Administrative Management, Clinical Nurse Leader, and RN to MSN track

Doctoral Programs: PhD and DNP (approved 2012)

Total Student body 800 (500+ UG; 250+ Graduate)

18% Male; 54% Hispanic, Black, Native American, & Asian

More than 10,000 alumni since start in 1969

90% - 100% pass NCLEX & certification exams

90% employment

85-90% graduation rate 8/25 in state

Background

Faculty

105 faculty of which 55% are PhD prepared

All NP have a faculty practice

Two Centers of Excellence

Academic Center for Evidence Based Practice

Center for Community Based Health Promotion - Women & Children

Simulation Center

New 7,281 Sq. foot Simulation Center (18 beds: Pedi & Adult ICU, ER, Same Day Surgery, Mother Baby, & Home care)

Background

IOM (created in 1970)

- Mission to improve health through unbiased, evidence based and authoritative information and advice
- Helped in the creation of NINR – evolution of EBP & improvement science
- Restructuring of health care with emphasis on IPE & quality
- Quality Chasm series and subsequent reports *(Finkelman and Kenner, 2009)*

American Association of Colleges of Nursing

Essentials of Nursing Education Series

Commission on Collegiate Nursing Education

Standards for Education based on improvement science principles

Carnegie Foundation for the Advancement of Teaching

Benner, P., Sutphen, M., Leonard, V. & Day, L. (2010). Educating Nurses: A call for radical transformation. Stanford, CA: Jossey- Bass

Background

2008

- New Dean
- Revision mission, vision, goals & strategic plan
- Revisions begun on BSN curriculum- increase enrollments
 - New accelerated track – students with prior BS
 - Incorporation of IOM and essentials of BSN into both pre-licensure tracks
- Review of Grad programs
 - Addition of CNL and initiation of application for DNP

Background

SON has initiated changes to mission, vision, goals and curricula in keeping with IOM competencies

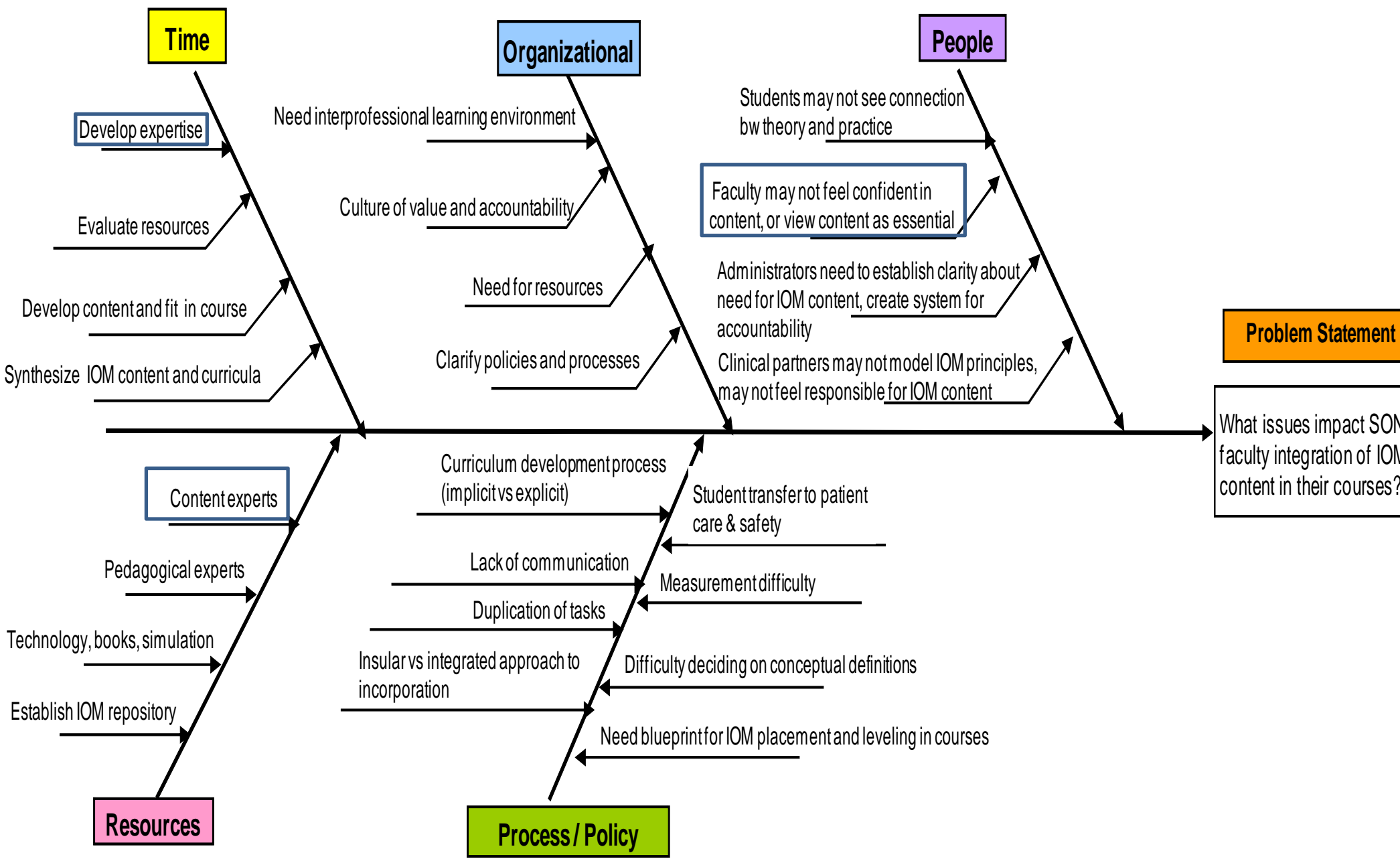
Now we need to assure that faculty are ready to incorporate those concepts fully into the curriculum

Project Milestones

- Team created Sept 2011
- AIM statement created Sept 2011
- Bi-weekly team meetings Sept 2011-Feb2012
- Background data, brainstorm sessions,
workflow and fishbone analyses Oct 2011-Nov2011
- Pre-intervention data collection Dec 2011
- Pre-intervention data analysis Dec 2011
- Interventions implemented Jan 2012
- Post-intervention data collection Jan 2012
- Post-intervention data analysis Feb 2012
- CS&E Presentation Feb 2012

Selected Process Analysis Tools

- Brainstorming
- Literature Review
- Fishbone
- Force Field Analysis



Force Field Analysis

Goal: To increase, **10% above baseline**, the perceived extent of content integration of **IOM competencies** into all courses in the undergraduate and graduate programs by **School of Nursing faculty** at UTHSCSA School of Nursing, by Spring 2012

Driving Forces

- Changes in Health Care
- AACN Essentials of Education
- CCNE accreditation
- Publication - Educating Nurses, A Call for Radical Transformation
- Publication IOM - Teaching to IOM Competencies
- Publication of IOM Future of Nursing Report
- Increase BSN and higher degree graduates
- Revised mission, vision, and strategic plan
- Academic Center for EBP
- Administrative support
- Revisions to nursing curriculum

Restraining Forces

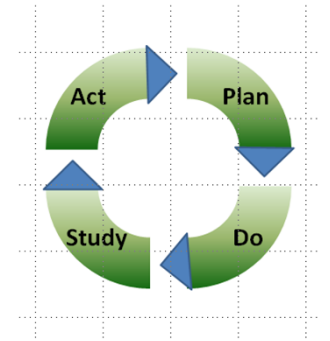
- Differing levels of exposure/education among nursing faculty
- Time to integrate content while revising curricula
- Limited technology and expertise with technology
- Integrating course teams
- University and system influences that impact IPE team work
- Lack of awareness of resources
- Lag between intervention and implementation in practice

Assumptions in Undertaking this Project

- Both the undergraduate, graduate, and doctoral curricula will thread IOM content through all courses based on the fact that AACN Essentials for all nursing education emphasizes this content;
- The specific approach or focus of IOM content will differ from undergraduate level in terms of leveling and population focus;
- Familiarity and comfort with quality and safety content may vary among faculty relative to their areas of expertise and preparation.

Intervention

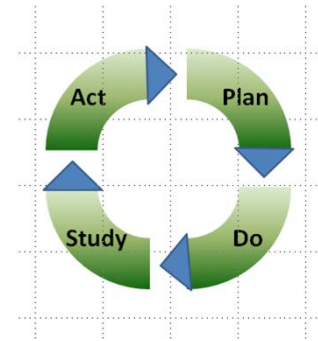
Plan



- Obtain baseline assessment on all faculty in regards to perceived extent of content integration of IOM competencies in the curricula and individual faculty courses
- Obtain baseline assessment on perceived facilitators and barriers to integration of IOM content

Implementing the Change

Do



11. What are the primary facilitators for integrating the competencies in your course (s)

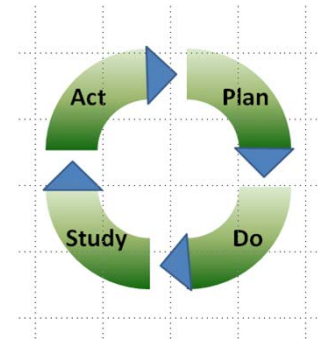
[check all that apply?]

- | | |
|--|---|
| <input type="checkbox"/> Access to subject-matter experts | <input type="checkbox"/> Meeting the school's expectations |
| <input type="checkbox"/> Administrative support | <input type="checkbox"/> Observed student use/understanding of competency (ies) |
| <input type="checkbox"/> Campus resources (e.g., ACET, IT) | <input type="checkbox"/> Positive student reactions / feedback |
| <input type="checkbox"/> Comfort teaching competency (ies) | <input type="checkbox"/> Prior applied experience (s) |
| <input type="checkbox"/> In-house resources (e.g., ACE) | <input type="checkbox"/> Prior teaching experience (s) |
| <input type="checkbox"/> Knowing it's the right thing to do | <input type="checkbox"/> Support from course team |
| <input type="checkbox"/> Knowledgeable in competency (ies) | <input type="checkbox"/> Support from other faculty |
| <input type="checkbox"/> Local conferences addressing the competency (e.g., Summer Institute on EBP) | |

Other (please specify)

Results/Impact

Check/Study



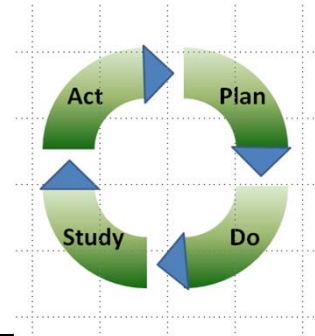
- 54 faculty responded to the baseline survey
 - (Response Rate = 51%, 54 of 105)

Program	% _a	Years teaching in SON	%	Highest Degree	%
Undergraduate	78	Less than 1 year	9	Masters in Nursing	61
Graduate	30	1 to 7 years	66	Doctorate in Nursing	24
Doctorate	19	More than 7 years	25	Doctorate (other field)	15

a. Program percentage exceeds 100 because faculty members teach in multiple programs.

Results/Impact

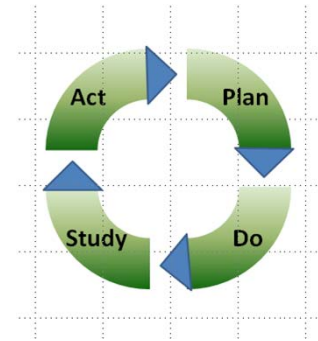
Check/Study



Baseline Assessment				
Extent to which IOM Competency Content is Integrated in Curricula	Don't Know	Barely/ Somewhat	Quite a lot	Fully
Evidence-Based Practice	9%	24%	46%	21%
Informatics	11%	65%	20%	4%
Patient-Centered Care	9%	28%	39%	24%
Quality Improvement	9%	57%	20%	15%
Safety	9%	25%	22%	44%
Teamwork/Collaboration	9%	39%	26%	26%

Results/Impact

Check/Study

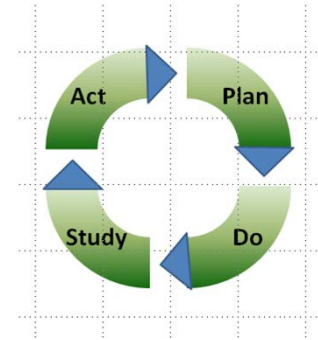


Baseline Assessment

Extent to which IOM Competency Content is Integrated in Your Courses	Don't Know	Barely/ Somewhat	Quite a lot	Fully
Evidence-Based Practice	2%	13%	64%	20%
Informatics	2%	65%	29%	4%
Patient-Centered Care	2%	24%	42%	31%
Quality Improvement	2%	47%	36%	16%
Safety	2%	18%	38%	42%
Teamwork/Collaboration	2%	29%	42%	27%

Results/Impact

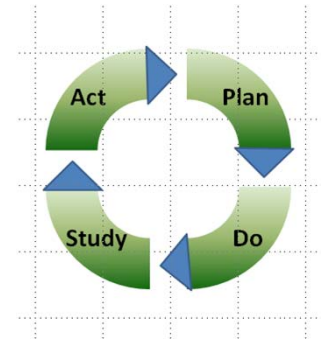
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Baseline Assessment			
Primary Facilitators	%	Primary Barriers	%
Access to subject-matter experts	46%	Insufficient knowledge of competency	20%
Campus resources	41%	Lack of administrative support	19%
Knowing it's the right thing to do	59%		
Meeting the school's expectations	43%		
Prior teaching experience	37%		

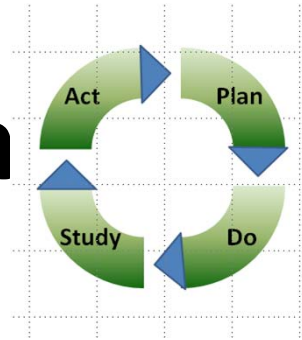
Intervention

Plan



- Provide faculty with resources for the integration of IOM core competencies into nursing curriculum
- Follow-up data collection
- Small changes to survey based on baseline data collection

Expansion of Our Implementation

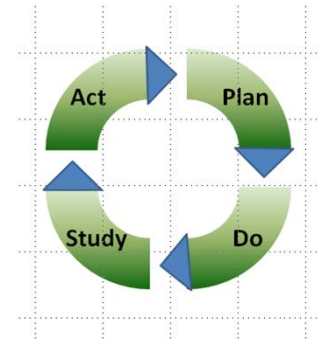


Do

- Books distributed to faculty
 - Educating Nurses: A Call for Radical Transformation (Benner et al.)
 - Teaching IOM (Finkelman & Kenner)
- Faculty Development Day with Anita Finkelman on January 6, 2012 (attended by 65 faculty)
- Conducted follow-up survey

Results/Impact

Check/Study



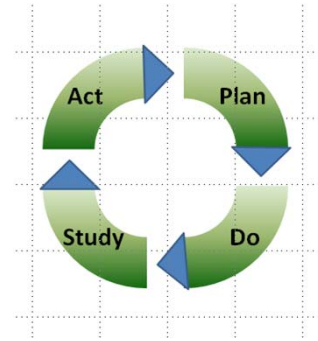
- 32 faculty responded to the post-test survey
 - Of these 32, 21 had baseline responses and attended the IOM seminar
 - Overall response rate = 30%, 32 of 105
 - Pre-post response rate = 39%, 21 of 54

Program	% _a	Years teaching in SON	%	Highest Degree	%
Undergraduate	67	Less than 1 year	0	Masters in Nursing	55
Graduate	29	1 to 7 years	71	Doctorate in Nursing	35
Doctorate	29	More than 7 years	29	Doctorate (other field)	10

a. Program percentage exceeds 100 because faculty members teach in multiple programs

Results/Impact

Check/Study

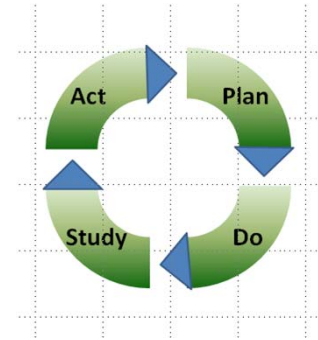


Post-test Assessment

Extent to which IOM Competency Content Integrated in Curricula	Don't Know	Barely/ Somewhat	Quite a lot	Fully
Evidence-Based Practice	0%	20%	55%	25%
Informatics	0%	60%	25%	15%
Patient-Centered Care	0%	25%	35%	40%
Quality Improvement	5%	45%	35%	15%
Safety	0%	25%	45%	30%
Teamwork/Collaboration	0%	35%	35%	30%

Results/Impact

Check/Study

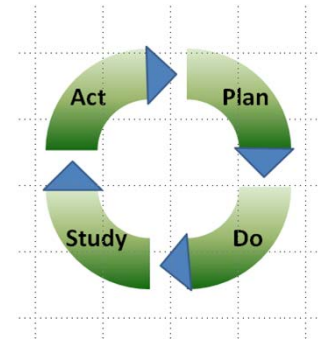


Post-test Assessment

Extent to which IOM Competency Content is Integrated in Your Courses	Don't Know	Barely/ Somewhat	Quite a lot	Fully
Evidence-Based Practice	0%	20%	40%	40%
Informatics	0%	65%	20%	15%
Patient-Centered Care	0%	25%	30%	45%
Quality Improvement	5%	30%	40%	25%
Safety	0%	15%	40%	45%
Teamwork/Collaboration	0%	16%	53%	32%

Results/Impact

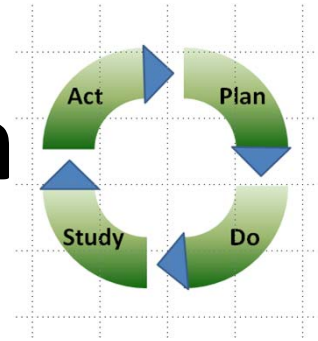
Check/Study



Post-test Assessment

Primary Facilitators	%	Primary Barriers	%
Access to subject-matter experts	62%	Insufficient knowledge of competency	10%
Campus resources	57%	Lack of administrative support	10%
Knowing it's the right thing to do	71%		
Meeting the school's expectations	57%		
Prior teaching experience	52%		

Expansion of Our Implementation Act



- Content validity study of new undergraduate program underway
- Task force is reviewing graduate program
- DNP (based on IOM) has been newly approved – defining query projects which are focused on integration of IOM core competencies into care

Return on Investment

Investment in Intervention

- Faculty taking CS & E course (60 hours * 4 faculty) and time to design and execute project
- Investment in books for 105 faculty (~ \$1000)
- Investment in workshop (~1500+)

Returns on Investment

- Integration of IOM core competencies into the curriculum should:
 - increase NCLEX pass rates and certifications
 - result in cost-savings for our community of interest as graduates better integrate core competencies into their care

Return on Investment

Return on Investment: PRICELESS

For everything else there is



Conclusion/What's Next

- Disseminate results to nursing faculty
- Publish results
- Use project as template for other schools to integrate IOM core competencies into curriculum

Thank you!



Educating for Quality Improvement & Patient Safety