



DRAFT
Revision of *The Essentials*
of Baccalaureate Nursing Education
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The *Essentials of Baccalaureate Nursing Education* is the framework for the preparation of professional nurses. This document describes the competencies expected of graduates of baccalaureate nursing programs.

The essentials apply to the preparation of professional nurses in all types of baccalaureate programs, including RN to BSN completion, accelerated second-degree, and traditional programs. Program curricula are designed to prepare students to meet the competencies and must evaluate graduates to assure the achievement of described end-of-program competencies.

Operational Definitions

The term *professional nurse*, as used in this document, refers to that individual prepared with a minimum of a baccalaureate in nursing but is also inclusive of one who *enters* professional practice with a master's degree in nursing or a nursing doctorate (AACN, 1998).

Throughout the document the term *patient* is used to describe the recipient of nursing care or services. This term was selected for consistency and in recognition and support of the historically established tradition of the nurse-patient relationship. Patients may be individuals, families, groups, communities, or populations. Further, patients may function in independent, interdependent, or dependent roles, and may seek or receive nursing interventions related to disease prevention, health promotion, or health maintenance, as well as illness and end-of-life care. Depending on the context or setting, patients may, at times, more appropriately be termed *clients* or *consumers* of nursing services (AACN, 1998).

Suggested Integrative Learning Strategies after each Essential are suggestions and therefore are not mandatory. In addition, references after each Essential are citations and are not intended to serve as a resource list or recommended student reading list.

Essential I: Integration of Liberal Education into Baccalaureate Education for Generalist Nursing Practice

Rationale

This essential is important to baccalaureate nursing education because liberal education for nurses prepares graduates with intellectual skills and capacities for current and emergent generalist nursing practice. Liberally educated nurses work with a healthcare team to address important issues in the profession of nursing, question dominant assumptions, and solve complex problems related to individuals and groups, and population-based health care. Nursing graduates with a liberal education, grounded in the arts, sciences, and humanities, exercise appropriate clinical judgment, understand the reasoning behind policies and standards, and accept responsibility for continued development of self and the discipline of nursing.

As defined by the Association of American Colleges and Universities, a liberal education is one that intentionally fosters, across multiple fields of study, wide-ranging knowledge of science, cultures, and society; high-level intellectual and practical skills; an active commitment to personal and social responsibility; and the demonstrated ability to apply learning to complex problems and challenges (AAC&U, 2007, p. 4).

A solid base in the liberal arts (humanities, social sciences, and natural sciences) provides the cornerstone for the study and practice of professional nursing. Study in the liberal arts is conceptualized as an integral component of the full learning experience that prepares the nurse for professional practice. In addition, this study in the liberal arts provides the learner with the capacity to engage in socially valued work and civic leadership in society. A strong foundation in liberal arts includes a general education curriculum that provides broad exposure to multiple disciplines and ways of knowing, along with more in-depth study in at least one area of concentration. Other than the nursing major, some aspects of liberal arts study will be provided as discrete parts of the full educational curriculum; however the rich and diverse perspectives and knowledge embedded in the liberal arts and sciences must be integrated throughout the curriculum as the perspectives are integral to the full spectrum of professional practice.

Successful integration of liberal education and nursing education provides graduates with knowledge of human cultures and the physical and natural worlds to support an inclusive style of practice. The study of history, fine arts, literature and languages are important building blocks for cultural competence and clinical reasoning. Furthermore, the integration of concepts from behavioral, biological and natural sciences throughout the nursing curriculum promotes the understanding of self and others and contributes to safe, quality care. The integration of concepts from psychology, sociology, chemistry, and mathematics, as well as the biological sciences, provides the foundation for understanding health as well as disease processes, and forms the basis for clinical reasoning. As noted by the Carnegie Foundation for the Advancement of Teaching, the sciences are a critical aspect of liberal education for nurses. Natural sciences and social

sciences that are clinically oriented are especially important to the profession of nursing to ensure that graduates have the ability to keep pace with changes driven by research and new technologies (Carnegie Foundation, 2007).

A liberal education for nurses forms the basis for intellectual and practical abilities for nursing practice as well as for engagement with the larger community, both locally and globally. Skills of inquiry, analysis, critical thinking, communication in a variety of modes, including the written and spoken word, prepare graduates to involve others in the common good through use of information technologies, team work, and interprofessional problem solving. Competence in a second language is also of increasing importance to assure that graduates are prepared to provide care that is culturally appropriate.

Strong emphasis on the development of a personal values system that includes the capacity to make and act upon ethical judgments is a hallmark of liberal education. Students educated in a liberal environment are encouraged to pursue meaningful personal and professional goals as well as to commit to honesty in relationships and the search for truth. The development of leadership skills and acceptance of responsibility to promote social justice are expected outcomes of a liberal education.

Liberal education forms the values and standards that allow graduates to cope with twenty-first century changes in technology, demographics including an aging population, diverse family and community structures, and increasing global interdependence, as well as economic and political changes in the United States health care system. Liberal education provides the baccalaureate graduate with the ability to integrate knowledge, skills, and values from the arts and sciences to provide safe quality care; to act as advocates for individuals, groups, and communities; and to promote social justice. Liberally educated graduates practice from a foundation of professional values and standards.

End-of-Program Competencies:

The baccalaureate program prepares the graduate to:

1. Integrate concepts from behavioral, mathematical, and natural sciences to inform practice.
2. Use skills of inquiry and analysis for decision-making regarding practice.
3. Engage in critical reasoning and creative thinking to address practice issues.
4. Use written, oral, and emerging technology methods to communicate effectively.

- 136 5. Understand human cultures and their contribution to a global society.
137
138 6. Synthesize knowledge of local and global community psychosocial,
139 spiritual, historical, political, and cultural dynamics in the delivery of
140 care. (Cultural Competency Advisory Group, 2007)
141
142 7. Engage in ethical reasoning and actions to promote social justice,
143 advocacy, collaboration, and understanding across cultures.
144
145 8. Value a variety of disciplinary perspectives to engage in
146 interprofessional problem solving.
147
148 9. Commit to attitudes and values of lifelong learning to support excellence
149 in nursing practice.
150

151 **Curricular Threads**

- 152 • Global society
153 • Integration of knowledge and practice
154 • Inquiry, analysis, critical and creative thinking
155 • Emergent technologies
156 • Communication
157 • Environment of inclusion, teamwork, interprofessional understanding
158 • Intercultural competence
159 • Economic and health disparities
160 • Ethical reasoning
161 • Social justice
162 • Advocacy
163 • Collaboration
164 • Lifelong excellence
165 • Values
166 • Professionalism
167

168 **Content**

- 169 • Selected work and concepts from biology, anatomy and physiology,
170 pathophysiology, microbiology, chemistry, statistics, genetics, genomics, and
171 biostatistics
172 • Selected concepts and ways of knowing from literature, history, modern
173 languages, natural sciences, mathematics and the arts.
174 • Course work to move towards competence in a second language.
175 • Selected concepts from the social, anthropologic, economic, psychological,
176 and communication sciences
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Suggested Integrative Strategies for Learning

Interprofessional education is defined as interactive educational activities involving two or more professions that foster interprofessional collaboration to improve patient care (Freeth, Hammick, Koppel, & Reeves, 2002). Interprofessional education is believed to improve collaboration and to indirectly yield better patient outcomes by having graduates enter the workplace with baseline competencies for interprofessional interactions and communication skills. Thus, interprofessional education optimizes opportunities for the development of disciplinary respect and trust.

- Experiences in a variety of cultures, organizations, and communities
- Practice with emergent technologies to solve real world problems
- Engagement in teamwork to build communication and leadership skills
- Involvement in activities to promote ethical reasoning, advocacy, collaboration, and social justice
- Opportunities to reflect on actions, values, and outcomes to promote ongoing self-assessment and commitment to excellence in practice

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Essential II: Basic Organizational and Systems Leadership for Quality Care

Rationale

This essential is important to baccalaureate nursing education because the basic organizational and systems leadership knowledge and skills are critical for preparing graduates to promote high quality and safe patient outcomes. In order to provide high quality health care, knowledge and skills in leadership, communication, interprofessional teamwork, and quality improvement systems are necessary.

To be effective, graduates must be able to practice within an ever changing healthcare system that requires effective leadership and communication skills to work productively with interprofessional teams in various healthcare settings. Basic nursing leadership includes an organizational/systems awareness, particularly at the microsystem level, of power, politics, policy, and regulatory guidelines. To prepare graduates to work with complex systems which include communities, organizations, families, and individuals, baccalaureate nursing curricula must have an a leadership component that emphasizes ethical and critical decision-making skills; initiating and maintaining effective working relationships; utilizing open communication and cooperation within interprofessional teams; and developing conflict resolution strategies.

Safety is defined as the minimization of “risk of harm to patients and providers through both system effectiveness and individual performance” (QSEN, 2007). Research has demonstrated that nurses more than any other healthcare professional, are able to recognize, interrupt, and correct healthcare errors (Rothschild et al., 2006). The baccalaureate graduate implements safety principles and participates with interprofessional and family care teams to create safe and healthy environments for patients and healthcare professionals. These graduates are distinguished by their abilities to identify, assess, and practice in care delivery models that are based in contemporary nursing science, and that are feasible within current cultural, economic, organizational, and political perspectives.

Graduates must be skilled in working within organizational and community arenas and in the actual provision of care by themselves and/or supervising care provided by other non-licensed assistive personnel. They must be able to recognize quality and safety concerns and apply evidence-based knowledge from the nursing profession and other clinical sciences to their practice. Graduates must be able to use and understand quality improvement concepts, processes, and outcome measures with direction from appropriate resources. In addition, graduates must be able to assist or initiate basic quality and safety investigations; assist in the development of quality improvement action plans; and assist in monitoring the results of these action plans.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

- 273 1. Assume a leadership role within one's scope of professional nursing practice in
274 improving quality patient care.
- 275
- 276 2. Apply leadership concepts, skills, and decision making in the coordination of care
277 delivery.
- 278
- 279 3. Demonstrate appropriate teambuilding and collaborative strategies when
280 working with interprofessional teams
- 281
- 282 4. Demonstrate an awareness of organizational complex systems.
- 283
- 284 5. Demonstrate a basic understanding of organizational structure, mission, vision,
285 philosophy, values, and span of control.
- 286
- 287 6. Demonstrate leadership and communication skills to effectively implement patient
288 safety and quality improvement initiatives within the context of the interprofessional
289 team.
- 290
- 291 7. Understand patient safety principles and quality improvement approaches in order to
292 meet individual/family/population needs based on evidence-based findings in the
293 nursing profession, and other clinical sciences, as well as organizational, political, and
294 economic sciences.
- 295
- 296 8. Recognize quality and patient safety as complex system issues which involve
297 individuals, families, and other members of the healthcare team.
- 298
- 299 9. Identify factors that create a culture of safety (e.g. open communication and
300 organizational error reporting systems).
- 301
- 302 10. Apply quality improvement processes to clinical practice and monitor patient
303 outcomes
- 304
- 305 11. Understand nurse sensitive indicators and performance measures within the context
306 of a basic quality improvement initiative.
- 307
- 308 12. Describe national patient safety and quality improvement initiatives.
- 309
- 310 13. Demonstrate accountability for patient safety and quality of healthcare for patients
311 with whom they work.
- 312
- 313 14. Participate in patient safety and quality improvement initiatives in the healthcare
314 microsystem.
- 315
- 316 15. Employ principles of quality improvement and healthcare policy to assist in the
317 development and initiation of effective plans for the microsystem and/or system-wide
318 practice improvements that will improve the quality of health care delivery.

16. Analyze the effectiveness and financial implications of microsystem or organizational quality improvement initiatives.

Curricular Threads

- Leadership
- Cultural awareness
- Human interface
- Communication
- Ethics
- Quality
- Safety
- Systems

Content

- Principles of interpersonal interactions/communication
- Understanding healthcare systems (structure and finance) and organizational structures particularly at the microsystem level mission/vision/philosophy, span of control etc.
- Departmental collaboration/challenges
- Beginning teamwork skills: Effective teams/characteristics, dysfunctional teams, application to patient care teams, team process, conflict resolution, delegation, supervision, collaboration, leadership theory/ traits, etc.
- Patient Safety Principles: safety standards, organizational safety process, reporting process, departmental responsibility, ownership, national initiatives, financial implications
- Quality Improvement (QI): History, elements, Continuous Quality Improvement (CQI) models, concepts, principles, benchmarking, processes, tools, departmental ownership, roles/responsibility, methodologies, regulatory requirements, organizational structures for QI, outcomes, monitoring, Quality Assurance (QA) vs. QI, beginning resource need assessment, resource identification, acquisition, and evaluation
- Leadership: Theory, behaviors, characteristics, contemporary approaches, leadership development, styles of leadership, negotiation techniques/ strategies
- Leadership skills (negotiating, collaborating, consultation, coordination) and decision making to impact patient care
- Communication: Elements, channels, levels, barriers, models, organizational communication, communication skills, workplace communication, conflict resolution, optimizing patient care outcomes, chain-of-command
- Use QI process techniques, e.g., benchmarks, basic statistics, root cause analyses and Failure Mode Effects Analysis (FMEA) in the quality improvement process
- Change theory
- Organizational political climates
- Principles of nursing care delivery management and evaluation

Suggested Integrative Strategies for Learning

- Provide experiences in a variety of organizations, and communities
- Engage in practice settings to build communication and leadership skills
- Practice with leadership and communication techniques to solve real nursing practice problems
- Involvement in quality improvement/ patient safety activities to promote an understanding of the organizational process and unit application
- Participate in quality improvement activities and required regulatory reporting systems

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Essential III: Beginning Scholarship and Analytical Methods for Evidence-Based Practice

Rationale

This essential is important to baccalaureate nursing education because professional nursing practice is grounded in the analysis and application of evidence for practice. Beginning scholarship for the graduate involves identification of practice issues; evaluation and application of evidence; and evaluation of outcomes. Dissemination is a critical element of scholarly practice. As practitioners at the point of care, baccalaureate nurses are uniquely positioned to monitor patient outcomes and identify practice issues. Evidence-based practice models provide a systematic process for the evaluation and application of scientific evidence surrounding practice issues (Institute of Medicine, 2003b).

Baccalaureate education provides a basic understanding of how evidence is developed, including the research process, and applied to practice. This basic understanding serves as a foundation for more complex applications at the graduate level (AACN, 2006a).

Baccalaureate nurses integrate reliable evidence to inform practice. In collaboration with others, graduates participate in documenting and interpreting evidence for improving patient outcomes (AACN, 2006b).

Ethical and legal precepts guide research conduct to protect the rights of patients eligible for or participating in investigations. Professional nurses safeguard patient rights in situations where an actual or potential conflict of interest, misconduct, or the potential for harm are identified.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Explain the relationships among evidence, nursing actions, and patient outcomes.
2. Understand basic elements of the research process and models for applying evidence to practice.
3. Describe ethical and legal principles for the protection of human subjects in the conduct of research
4. Evaluate sources of evidence and clinical practice guidelines for specific patient care.
5. Integrate best evidence, clinical judgment, and patient preferences in planning care.
6. Participate in the continued improvement of practice based on new evidence.

7. Apply principles of information literacy to retrieve and synthesize evidence.
8. Document information relevant to evaluating quality outcome indicators.
9. Participate in the collection and interpretation of patient outcome data.
10. Disseminate results of scholarly work through a variety of methods.

Curricular Threads

- Research process
- Evidence-based practice
- Information literacy
- Ethical and legal conduct of research
- Quality improvement

Content

- Principles and models of evidence-based practice
- Nurse Sensitive Quality Indicators, performance measures
- Research process
- Methods for evaluating related health research literature
- Basic applied statistics
- Basic designs, corresponding questions, analytical methods related to research questions, limits on implications of findings e.g. causal vs. relational
- Ethical conduct of research
- Linkages among practice, research evidence, patient outcomes, and cost containment
- Forces driving research agendas
- Locating and evaluating sources of evidence
- Database search strategies
- Systematic application of information
- Levels of evidence: Textbooks, case studies, reviews of literature, research critiques, controlled trials, evidence-based clinical practice guidelines (www.guideline.gov), meta analyses, systematic reviews (e.g., the Cochrane Database of Systematic Reviews)
- Differentiation of clinical opinion from research and evidence summaries
- Scholarship dissemination methods: Poster presentation, powerpoints, newsletters/articles, etc.

Suggested Integrative Strategies for Learning

- Evaluate sources of information for lay and professional use
- Identify credible sources of evidence
- Search and synthesize current knowledge about practice

- Apply evidence-based practice models to assess the applicability and feasibility of new findings to practice
- Cite sources of evidence for planned interventions
- Review patient outcome data for a patient assignment and make recommendations on modifying practice, based on this review
- Link nursing actions to quality indicators.

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Essential IV: Information Management and Patient Care Technology within the Practice of the Baccalaureate Generalist

Rationale

This essential is important to baccalaureate nursing education because the knowledge and skills in information and patient care technology are critical in preparing graduates to deliver quality patient care in a variety of healthcare settings. Graduates manage information, knowledge, and technology to communicate effectively in a healthcare team; provide safe patient care; and use clinical evidence and research to base and validate practice decisions. Graduates must have basic competence in the use of information technology, including decision support systems, to gather evidence to guide practice. Graduates must be aware that often new technology requires new workflow and changes in practice approaches to patient care.

Course work and clinical experiences should provide the graduate with knowledge and skills to deliver safe patient care within the context of technology as a tool to facilitate care. In addition, graduates should have exposure to information systems that provide data about quality improvement and required regulatory reporting through information systems. Course work and clinical experiences should expose graduates to a range of technologies that facilitate clinical care including patient monitoring systems, medication administration systems, and other technologies to support patient care. Integral to the basic skills is an attitude of openness to continual learning, as information systems and patient care technologies are constantly changing.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Use information technology and patient data for clinical decision making in providing patient care.
2. Use a range of technologies that facilitate clinical care.
3. Evaluate technologies used in patient care with attention to diversity.
4. Protect the privacy of patients in relation to the use of information technology.
5. Use safeguards embedded in technology and information systems to create a safe practice environment.
6. Demonstrate knowledge of regulations that impact the use of technology in patient care.

7. Use technologies to assist in effective communication in a variety of healthcare settings.

Curricular Threads

- Communication
- Systems thinking
- Ethics
- Human interface
- Cultural awareness/competence
- Diversity responsiveness and global awareness
- Workflow
- Process improvement
- Safety
- Information Literacy

Content

- Use of technology and information systems for clinical decision making
- Computer skills, that may include basic software, spreadsheet and healthcare databases
- Information management for patient safety
- Regulatory requirements through electronic data monitoring systems
- Legislative issues related to informatics (e.g. copyright issues)
- Ethical and legal issues related to the use of information technology
- Privacy and confidentiality issues in the use of technology
- Retrieval information systems, including access, evaluation of data and application of relevant data to patient care
- Technological resources for evidence-based practice
- Web-based learning; online literature searches
- Technology and information systems safeguards (e.g., patient monitoring equipment, patient identification systems, drug alerts and IV systems, bar-coding)
- Interstate practice regulations, (e.g., licensure, telehealth)
- Laws that regulate information sharing (e.g., HIPAA)
- Technology for virtual care delivery and monitoring
- Principles related to nursing workload measurement/resources and information systems
- Information Literacy

Suggested Integrative Strategies for Learning

- Experiences in using information and patient care technology to communicate effectively with members of the healthcare team
- Engage in using clinical evidence and research to base and validate practice decisions
- Participate in quality improvement activities and required regulatory reporting through information systems

- Experiences in a range of technologies that facilitate care, including electronic health and medical records, patient monitoring systems, medication administration systems, and other technologies that support patient care

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Essential V: Health Care Policy, Finance, and Regulatory Environments

Rationale

This essential is important to baccalaureate nursing education because health care policies, including financial and regulatory policies, directly and indirectly influence the nature and functioning of the health care system. These policies shape responses to organizational, local, national, and global issues of equity, access, affordability, and social justice in health care. They also are central to any discussion about quality and safety in the practice environment.

The baccalaureate-educated generalist nurse must have a solid understanding of the broader context of health care, including how services are organized and financed, and how reimbursement is structured. Regulatory agencies define and establish the limits of nursing practice, and graduates need to understand the scope and role of these agencies. Entry-level nurses also must understand how health care policy is both developed and changed, and how that process can be influenced through the efforts of both lay and special advocacy groups. Patient advocacy is recognized as an essential responsibility of the nurse at the point of care; however, the professional nurse needs to serve as an advocate not just for individual patients, families, and communities, but also for underserved populations, the goal of social justice, and the future of the nursing profession itself. Since health care policy shapes the nature, quality, and safety of the practice environment, all professional nurses have the responsibility to participate in the political process.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Discuss local, national, and global trends in health policy and regulation.
2. Describe how health care is organized and financed, including the impact of the business model on health care delivery.
3. Describe the benefits and limitations of the major forms of reimbursement for health care services.
4. Incorporate knowledge of patient and system cost factors into care delivery.
5. Identify the economic, legal, and political factors that may influence healthcare delivery.
6. Describe primary legislative and regulatory processes in health care
7. Identify the roles and responsibilities of the major regulatory agencies and how they impact patient care quality, workplace safety, and the scope of nursing practice.

- 774
775 8. Examine the impact of health care policy on issues of access, equity, affordability,
776 and social justice in health care delivery.
777
778 9. Use an ethical framework to evaluate the impact of social policies on health care,
779 especially for vulnerable populations such as the elderly and underserved.
780
781 10. Participate in political processes and grassroots legislative efforts to influence
782 healthcare policy and advocate for consumers and the nursing profession.
783

784 **Curricular Threads**

- 785 • Advocacy
786 • Health disparities
787 • Social justice
788 • Quality and safety
789 • Ethics
790 • Global health
791 • Underserved and vulnerable populations
792

793 **Content**

- 794 • Policy development and the legislative process
795 • Policy development and the regulatory process
796 • Licensure and regulation of nursing practice
797 • Social policy/public policy
798 • Policy analysis and evaluation
799 • Health care financing and reimbursement
800 • Economics of health care
801 • Consumerism and advocacy
802 • Political activism and professional organizations
803

804 **Suggested Integrative Strategies for Learning**

- 805 • Observe a state board of nursing hearing and reflect on how the state practice act
806 protects the welfare and safety of the citizens
807 • Participate with national or state nursing associations in activities such as “lobby
808 day.” Review state registries and provide written comments on legislation
809 affecting health care, Attend national or state congressional hearings.
810 • Design clinical activities to facilitate the student’s understanding of the “business
811 of health care.”
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Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes

Rationale

This essential is important to baccalaureate nursing education because the complementary activity of health professionals is no longer sufficient to adequately provide patient-centered care. All health professionals should be educated to deliver patient-centered care as members of an interprofessional team, emphasizing communication, evidence-based practice, quality improvement approaches, and informatics (Institute of Medicine, 2003a). Collaboration among health care professionals is associated with delivering high quality and safe patient care (Barnsteiner, Disch, Hall, Mayer, & Moore, 2007). Collaboration is interdependence requiring complementarity of roles for improved patient outcomes (Schmalenberg, Kramer, King, & Krugman, 2005).

Interprofessional education enables the graduate to enter the workplace with baseline competencies and confidence for interactions and communication skills, thus yielding better patient outcomes. An essential component for the establishment of collegial relationships is recognition of the unique disciplinary practice spheres. Fundamental to effective interprofessional and intra-professional collaboration is a definition of shared goals; clear role expectations of members; a flexible decision-making process; and the establishment of open communication patterns and leadership. Thus, interprofessional education optimizes opportunities for the development of disciplinary respect and trust.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Contrast the roles and perspectives of the nursing profession with other health care professions.
2. Uses both interprofessional and intraprofessional communication and collaboration skills to deliver evidence-based, patient-centered care.
3. Participate in providing leadership to interprofessional teams to optimize patient outcomes.
4. Demonstrate appropriate teambuilding and collaborative strategies when working with interprofessional teams.
5. Use conflict resolution strategies when working in interprofessional teams.
6. Use effective communication techniques to produce positive interprofessional and intraprofessional working relationships.

7. Advocate for high quality and safe patient care as a member of the interprofessional team.

Curricular Threads

- Ethics/professionalism
- Communication
- Leadership
- Interpersonal collaboration
- Evidence-based practice

Content

- Interprofessional communication/collaboration/socialization
- Teamwork/concepts of teambuilding /cooperative learning
- Knowledge of professional roles/knowledge translation/role boundaries and diverse disciplinary perspectives
- Relationship building
- Navigating the complex system, system facilitation
- Positive independence/interconnectedness/common goal/resource sharing
- Individual accountability/shared accountability
- Advocacy
- Ethical codes/behaviors of different healthcare professions
- Autonomy
- Safety
- Scopes of practice
- Conflict management
- Participatory decision-making

Suggested Integrative Strategies for Learning

- Engage in case study discussions/dialogue with other health care professionals
- Participate in interprofessional collaboration (e.g., grand rounds, community coalition meetings)
- Work in interprofessional and intraprofessional teams on course projects/assignments
- Engage in interprofessional and intraprofessional care in simulation labs
- Develop interprofessional community projects
- Assess group dynamics of an interprofessional or intraprofessional group or team

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Essential VII: Clinical Prevention and Population Health for Optimizing Health

Rationale

This essential is important to baccalaureate nursing education because health promotion and disease prevention at the individual and population level are necessary to improve population health (American Nurses Association, 2007; Institute of Medicine, 2003; U.S. Preventive Services Taskforce, 2006). Because lifestyle, environmental, and genetic factors are major determinants of illness, disease, disability, and death (Allen et al., 2004; Allen, Stanley, Crabtree, Werner, & Swenson, 2005; U.S. Department of Health and Human Services, n.d.), acute care and disease-based episodic interventions are inadequate for improving health. Health promotion and specific disease prevention, early diagnosis and treatment, and managing the disease or problem to maximize health are essential elements of baccalaureate nursing practice at the individual and population level. In clinical prevention and population health, nurses are knowledge workers who often practice in interprofessional teams (Porter-O'Grady, 2003). In individually focused clinical prevention, nurses collaborate with other healthcare professionals and patients in health promotion and disease prevention across the lifespan. "Knowledge about the expected growth and development of individuals across the lifespan is essential" (American Association of Colleges of Nursing, 1998, p.12).

In population-focused nursing, the group, community, or population is the unit of care (American Association of Colleges of Nursing, 1998; Quad Council of Public Health Nursing Organizations, 2004). Because population-focused care is fundamental to nursing practice, and because a baccalaureate degree in nursing is the recommended minimal educational credential for population-focused care, baccalaureate programs prepare graduates for population health as well as clinical prevention (American Association of Colleges of Nursing, 1998; American Public Health Association, 1980). Quad Council of Public Health Nursing Organizations, 2004; United States Department of Health and Human Services, (1985).

Population-focused nursing involves working with the population as a partner, identifying determinants of health, prioritizing primary prevention when possible, actively identifying and reaching out to those who might benefit from a benefit or service, and using available resources to assure best overall improvement in the health of the population (American Nurses Association, 2007). While population-focused nursing interventions are directed at individuals, families, groups, communities, or populations, planning of population-focused interventions is always based on community assessment, and evaluation of population-focused nursing interventions is always at the aggregate level. Baccalaureate graduates collaborate with other healthcare professionals and populations to promote conditions and healthy behaviors to improve population health.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Assess protective and predictive factors that influence the health of individuals, and populations.
2. Demonstrate an understanding of the relationship of genetics and genomics to health, prevention, screening, diagnostics, prognostics, selection of treatment, and monitoring of treatment effectiveness. (Consensus Panel, 2005, p. 11)
3. Conduct basic environmental exposure history to identify current and future health problems.
4. Use evidence-based clinical prevention practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral, and follow-up for patients from birth to death.
5. Use information and communication technologies in preventive care.
6. Collaborate with other health care professionals and patients to provide culturally appropriate prevention strategies.
7. Assess the health, health care, and preparedness needs of a population including identification of sub-populations, families, and individuals who would benefit from health promotion, or who have heightened risk of illness, injury, disability, or premature death.
8. Develop, with a patient, an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death, as well as individual and community preparedness.
9. Implement population-focused interventions with attention to effectiveness, efficiency, and equity.
10. Participate in evaluations to determine the extent to which clinical prevention and population-focused interventions impact the health status of individuals and populations.
11. Use evaluation results to influence the delivery of care, deployment of resources, and development of policies to promote health and prevent disease.
12. Articulate professional roles and responsibilities in organizational disaster preparedness plan.

1092 13. Advocate for social justice, including commitment to the health of vulnerable
1093 populations and the elimination of health disparities.
1094

1095 **Curricular Threads**

- 1096 • Prevention (primary, including health promotion, secondary, and tertiary)
- 1097 • Interprofessional and community collaboration
- 1098 • Cultural dimensions of practice
- 1099 • Health literacy
- 1100 • Patient education
- 1101 • Human growth and development
- 1102 • Methods for evaluating health research literature
- 1103 • Genetics/genomics

1104 **Content**

- 1105 • Prevention and harm reduction
- 1106 • Fundamentals of epidemiology, biostatistics (distribution, incidence, prevalence,
1107 rates, risk factors, health status indicators, and control of disease in populations)
- 1108 • Ecological model as framework for understanding determinants of health
- 1109 • Public health principles
- 1110 • Communicable disease and population-focused infection control
- 1111 • Environmental health
- 1112 • Environmental contaminants
- 1113 • Global health
- 1114 • Occupational health
- 1115 • Evidence-based clinical prevention practices
- 1116 • Complementary and alternative therapies
- 1117 • Individual and population-focused nursing interventions (e.g., weight control,
1118 nicotine management)
- 1119 • Health surveillance
- 1120 • Health disparities and vulnerable populations
- 1121 • Screening
- 1122 • Counseling
- 1123 • Immunization
- 1124 • Chemoprevention
- 1125 • Communicating and sharing health information with the public (including knowledge
1126 brokering)
- 1127 • Risk communication
- 1128 • Outcome measurement
- 1129 • Population assessment
- 1130 • Ethical implications of population health
- 1131 • Public health preparedness and disaster management including self protection
- 1132 • Using technology in population focused care and clinical prevention
- 1133 • Health literacy
- 1134 • Principles of patient education and health counseling
- 1135

- Psychosocial and spiritual principles related to health promotion

Suggested Integrative Strategies for Learning

- Utilization of clinical practice guidelines for planning and evaluating clinical prevention interventions.
- Participation in population-focused activities including community or population-focused assessment, planning of population-focused interventions, e.g., helping communities develop plans and policies to prevent and effectively prepare for disasters, including protecting vulnerable populations during disasters; helping organizations and communities create healthy environments such as smoke free workplaces; improving health literacy and educating vulnerable populations about avoiding environmental risks such as fish from polluted waterways; and helping institutions, such as day care centers or homeless shelters, develop and implement policies to minimize transmission of communicable diseases.
- Participate in individually focused clinical prevention activities including teaching about and providing immunizations, improving adherence to tuberculosis chemoprophylaxis through health teaching and directly observed therapies, providing health counseling regarding smoking cessation, teaching about and encouraging cancer screening, conducting basic environmental exposure history regarding pesticides, identifying and referring high risk individuals to genetic services, assessing a home environment and health counseling to prevent falls in older adults, and identifying and intervening in elder abuse.

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Essential VIII: Professionalism and Professional Values

Rationale

This essential is important to baccalaureate nursing education because professionalism and professional values are foundational to the discipline of nursing. Professionalism is: “consistent demonstration of core values evidenced by nurses working with other professionals to achieve optimal health and wellness outcomes in patients, families and communities by wisely applying principles of altruism, excellence, caring, ethics, respect, communication and accountability.” (Interprofessional Professionalism Measurement Group, 2007).

Professional nursing has earned a long tradition of high respect from the public (Gallup Poll, 2006). Throughout nursing history, nurses have provided care for patients within a context of privileged intimacy and recognize that clinical reasoning is directed by values and ethics in addition to science and technology (AACN, 1997). Nurses must be prepared for the numerous dilemmas that will arise in practice and must be able to make and assist others in making ethical decisions within a professional ethical framework.

Understanding the values that patients and other health professionals bring to the health care relationship is critically important to providing quality patient care. Professional nursing requires a balance between evidence-based knowledge, skills, and attributes with professional confidence, maturity, caring, and compassion. As advocates for access to care for all, nurses must be knowledgeable and active in political and regulatory processes affecting health care delivery. Nurses also must actively commit to personal and professional growth.

Ethics is an integral part of nursing practice and has always involved respect and advocacy for the rights and needs of patients regardless of setting. Patient populations are increasingly diverse thus essential to the care of diverse populations is the need for evidence-based knowledge and cultural sensitivity to variables such as age, gender, culture, health disparities, socioeconomic status, race, and spirituality. Nurses must be especially prepared to care for older adults and other at-risk patients and to assist patients with decision-making about end-of-life and genetic technologies and treatments within the context of their values.

Baccalaureate education for the nurse generalist should include the development of professional values and value-based behavior. Values are beliefs or ideals to which an individual is committed and which are reflected in patterns of behavior. Professional values are the foundation for nursing practice and guide interactions with patients, other health care professionals, and the public. Values provide the framework for commitment to patient care and the public’s image of the discipline of nursing. Nurses must be prepared for professional and social responsibility to advocate for improving the image of nursing through clear communication about the essence of nursing practice as highly skilled knowledge work and that caring and compassion also require significant knowledge, skills, and attributes. Caring and compassion includes integration of all aspects of the patient’s biopsychosocial, spiritual, economic, and cultural needs.

Caring is a concept central to professional nursing practice. There are a variety of definitions and applications of caring; some are broad, others are specific and specialized. Caring, related to this essential, encompasses the nurse's empathy for and connection with the patient, as well as the ability to translate these affective characteristics into compassionate, sensitive, and appropriate care.

The following values and behavioral examples epitomize the caring, professional nurse. Nurses, guided by these values, demonstrate professional nursing ethical behaviors in patient care. The list is not mutually exclusive; rather meant to illustrate certain core values and sample behaviors in the provision of patient care.

Altruism is a concern for the welfare and well being of others. In professional practice, altruism is reflected by the nurse's concern for the welfare of patients, other nurses, and other health care providers.

Autonomy is the right to self-determination. Professional practice reflects autonomy when the nurse respects patients' rights to make decisions about their health care.

Human Dignity is respect for the inherent worth and uniqueness of individuals and populations. In professional practice, human dignity is reflected when the nurse values and respects all patients and colleagues.

Integrity is acting in accordance with an appropriate code of ethics and accepted standards of practice. Integrity is reflected in professional practice when the nurse is honest and provides care based on an ethical framework that is accepted within the profession.

Social Justice is acting in accordance with fair treatment regardless of economic status, ethnicity, age, citizenship, disability, or sexual orientation.

Honesty and acting ethically are two key elements of professional behavior that have a major impact on patient safety. Dishonest or unethical behavior, such as not reporting an error for fear of repercussions, or withholding information, can contribute to an unsafe healthcare system. Therefore, *The Essentials of Baccalaureate Nursing Education* must emphasize professionalism and professional values.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Demonstrate the professional standards of moral, ethical, and legal conduct.
2. Promote the image of nursing by modeling professional values and articulating the knowledge, skills, and attributes for nursing practice.

- 1314 3. Maintain professional dress, demeanor, and boundaries in the practice
1315 environment.
- 1316 4. Demonstrate maturity, emotional stability, and stress and anger management in all
1317 professional interactions.
1318
- 1319 5. Practice compassionate nursing care..
- 1320 6. Recognize the impact of stereotypes and biases (e.g. racism, gender and ageism)
1321 on health care.
1322
- 1323 7. Demonstrate an appreciation of the history of nursing and its impact on current
1324 nursing practice.
1325
- 1326 8. Engage in reflective practice about one's own beliefs and values related to
1327 professional practice.
1328
- 1329 9. Recognize one's own and others attitudes, values, and expectations and their
1330 impact on the care of the very young, older adults and other vulnerable
1331 populations.
1332
- 1333 10. Demonstrate understanding of one's scope of practice and limitations in
1334 knowledge and skill to assure that patients are safe.
1335
- 1336 11. Protect patient privacy and confidentiality of patient records and other related
1337 communications.
1338
- 1339 12. Communicate to the patient and health care team one's personal bias on difficult
1340 health care decisions that are in conflict with one's moral beliefs.
1341
- 1342 13. Articulate appropriate access to access interprofessional ethical resources when
1343 trying to resolve ethical dilemmas.
1344
- 1345 14. Understand the need to report errors and near misses in order to improve systems
1346 and professional practice.
1347
- 1348 15. Demonstrate the ability to take action to prevent or limit unsafe, illegal, or
1349 unethical health and nursing care practices by others.
1350
- 1351 16. Participate in professional organizations working to support agendas that enhance
1352 both high quality, cost effective health care and the advancement of the
1353 profession.
1354
- 1355 17. Articulate the value of pursuing lifelong learning in order to foster professional
1356 growth and development.

- 1357
1358 18. Recognize the relationship between self renewal and the ability to deliver
1359 sustained quality care.
1360

1361 **Curricular Threads**

- 1362 • Ethics
1363 • Communication
1364 • Diversity
1365 • Patient safety
1366 • Leadership
1367 • Social justice
1368 • Health disparities
1369 • Advocacy
1370 • Health policy
1371 • Interprofessional relationships
1372 • Genetics and genomics
1373

1374 **Content**

- 1375 • Nurse Practice Acts, Scope of Practice
1376 • ANA *Code of Ethics*
1377 • AACN *Hallmarks of the Professional Nursing Practice Environment*
1378 • Ethical frameworks
1379 • Communication
1380 • Interprofessional teams and team building concepts
1381 • Conflict resolution
1382 • Cultural awareness and humility
1383 • Health disparities
1384 • History of nursing
1385 • Appreciative inquiry
1386 • Professional accountability
1387 • Stereotypes and biases: Gender, racism, age
1388 • Impact of burnout
1389 • Human rights
1390 • Informed consent
1391 • Socialization
1392 • Privacy, confidentiality
1393 • Image
1394

1395 **Suggested Integrative Strategies for Learning**

- 1396 • Directed experiences with writing and talking publicly about nursing practice and
1397 effects on health care
1398 • Participation in ethical review committees
1399 • Community-based activities that involve promotion of advocacy and access to
1400 care for underserved populations

- Simulated vignettes that address ethical, legal and moral patient care situations

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Essential IX: Baccalaureate Generalist Nursing Practice

Rationale

This essential is important to baccalaureate nursing education because the nursing program graduate is the human interface between the patient and a complex and evolving healthcare environment and as such, provides compassionate care informed by a scientific base of knowledge. Knowledge acquisition related to health and wellness, illness, and disease management is core to nursing practice. In addition, acquisition of communication and psychomotor skills is critical to practice. Integration of this knowledge and skills with a liberal education, through critical reasoning within the context of patient-centered care, forms the basis for nursing practice that reflects ethical values. Practice occurs across the lifespan and in the continuum of healthcare environments. Direct care may be delivered in person or virtually and that care is based on a shared understanding with the patient and the healthcare team. This base of knowledge and skills situates the graduate for practice as a member of the interprofessional healthcare team.

Graduates must be prepared to care for patients across the lifespan, however special attention should be paid to changing demographics. Among these demographics are the increasing numbers of older adults and related concerns regarding chronicity and illness co-morbidity. There is clear evidence that the largest group seeking and receiving healthcare services is the older adult population. Moreover, the increasing diversity of this nation's population mandates an attention to cultural diversity in order to provide safe, high quality care. The graduate must understand the variations of care inherent in caring for older adults or diverse populations.

The graduate must have knowledge and skills that prepare the individual for a long-term career in a changing practice environment. The increased prevalence of chronic illness is a result of an increasingly older adult population, environmental threats, lifestyles that increase risk of disease, and enhanced technological and therapeutic interventions, which prolong life. In addition to primary prevention, the graduate provides support for management of chronic illness, health education, and patient-centered care in partnership with the patient and the interprofessional team. Patients and their families are more knowledgeable about health care and as such, the graduate must be able to communicate with these consumers and appreciate the importance of the care partnership.

Graduates translate, integrate, and apply knowledge that leads to improvements in patient outcomes. With knowledge that is complex and changing rapidly, baccalaureate graduates cannot know everything required for high quality clinical practice. Therefore baccalaureate graduates should focus on self-evaluation and lifelong learning.

Although this essential includes a discreet list of practice-focused competencies, the graduate must have the opportunity to integrate the competencies delineated in Essentials I - IX into a full expression of the nursing role.

End-of-Program Competencies

The baccalaureate program prepares the graduate to:

1. Integrate knowledge, skills and attitudes embodied in Essentials I – VIII into the nursing care of individuals, families, and populations in a variety of settings.
2. Conduct comprehensive and focused biopsychosocial, economic, cultural, spiritual, and environmental assessments of health and illness parameters in patients, using culturally sensitive approaches.
3. Implement patient-centered care that reflects an understanding of the pathophysiological, pharmacologic, medical, and nursing management of providing holistic care in common acute and chronic illnesses.
4. Implement evidence-based nursing interventions as appropriate for managing the patient experience and promoting health (e.g., mobility, nutrition, skin care, oral, hydration, elimination, etc).
5. Deliver patient-centered teaching that reflects appropriate developmental stages across the lifespan, cultural, literacy, and health literacy considerations.
6. Incorporate strategies for addressing adherence/compliance issues into patient centered care.
7. Manage symptoms, (e.g., acute or chronic pain) effectively using evidence-based strategies.
8. Demonstrate a beginning knowledge base of the pharmacologic agents used for common acute and chronic illnesses and identify and manage their side effects.
9. Develop an awareness of complementary modalities and their usefulness in promoting health.
10. Deliver patient-centered, evidence-based, end-of-life care that reflects patient and family preferences.
11. Communicate effectively with patients, their support network, nurses and other members of the interprofessional healthcare team.
12. Demonstrate the application of psychomotor skills for the efficient, safe delivery of patient care..
13. Demonstrates effective decision making regarding the delegation and monitoring of care by unlicensed personnel.

- 1538 14. Implement patient-centered discharge planning that reflects an understanding of
1539 the caregiver's knowledge of care requirements with particular attention to the
1540 older adult.
1541
1542 15. Recognize and manage common geriatric syndromes in older adults.
1543
1544 16. Understand their role and participate in disaster planning and response with an
1545 awareness of environmental factors and the risks they pose to self and patients.
1546
1547 17. Demonstrate clinical judgment, systems thinking, and accountability for patient
1548 outcomes when delegating to and supervising other members of the healthcare
1549 team.
1550
1551 18. Provide nursing care that contributes to safe and high quality patient outcomes
1552 within the healthcare microsystems.
1553

1554 **Threads**

- 1555 • Cultural assessment/awareness/competence
- 1556 • Human interface
- 1557 • Communication
- 1558 • Ethics
- 1559 • Evidence-based practice
- 1560 • Information technology
- 1561 • Genetics/genomics
- 1562

1563 **Content**

- 1564 • Nursing care management
- 1565 • Prioritization of patient care needs
- 1566 • Principles of delegating and monitoring care
- 1567 • Management of acute and chronic physical and psychosocial conditions
- 1568 • Care across the lifespan with an emphasis on care of older adults
- 1569 • End-of-life care
- 1570 • Health promotion
- 1571 • Leadership
- 1572 • Pharmacology
- 1573 • Advocacy
- 1574 • Disparities
- 1575 • Genetics/genomics
- 1576 • Information management systems
- 1577 • Nutrition
- 1578 • Resource management
- 1579 • Complementary and alternative therapies
- 1580 • Spirituality
- 1581
- 1582

Suggested Integrative Strategies for Learning

- Experiences in patient-centered care provision across the lifespan to include the end of life, symptom management, co-morbidities and their interaction with illness, care transitions, and critical thinking
- Practice with assessment, administration and management of pharmacologic agents, computer technology, documentation, problem-solving processes, time management, synthesizing knowledge and data
- Participate in analyzing case studies in order to gain a clear understanding of the patient's medical condition, pathophysiology, and therapeutic interventions
- Engage in decision-making and interpersonal relations, consulting with other professionals regarding care management, translating health literature into practice, patient education, and transition to practice
- Coordinate and manage care for a group of individuals in order to maximize health, independence, and quality of life

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