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Next-Level Learning: Integrating Concept-Based Curriculum in MSN Education Programs

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Introduction: The content-laden curriculum found in traditional nursing education programs, often grounded in the systems approach, has created an environment where faculty are challenged to address current-practice competencies while students struggle to gain and retain information. There is a need for a paradigm shift in nursing education, which may be addressed globally with concept-based curriculum (CBC). CBC is a teaching methodology that allows students to think critically by linking knowledge gained in the didactic setting or from previous experiences to skills and competencies in clinical experiences. By using concepts, learners group material in coherent ways, apply new knowledge within the frame of the concept, and analyze information in present and future applications. Work for this project was conducted with Perkins Leadership Grant and Nursing Innovation Grant funding from the Texas Higher Education Coordinating Board, resulting in the development of CBC for Associate Degree in Nursing (ADN), Bachelor of Science in Nursing (BSN), and Master of Science in Nursing (MSN) education programs.

A shift to population and global health, chronic disease management, and health promotion motivated educators to reexamine traditional MSN curricula. Nurses practice conceptually by focusing on the patient regardless of the medical diagnosis, grouping information between patients. Faculty facilitate this process by correcting misconceptions and providing direction to link concepts. The literature on CBC for undergraduate education reveals that the faculty impetus for considering implementation of CBC was a concern to reduce curricular overload, to encourage students to develop new ideas or concepts based on current and past knowledge, to incorporate student-centered interactivity, and to incorporate innovative curricular constructs in a collaborative environment.

Problem Statement/Purpose: While CBC is currently implemented in some under-graduate nursing education programs across the United States, a literature search did not reveal its use in any reported graduate nursing education programs. This presentation will focus on the work-to-date of the development and integration of MSN CBC curriculum into graduate nursing education programs.

Methods: The development of concept-based curriculum into MSN courses considered student, course, and program outcomes to meet Institute of Medicine (IOM) findings. Additionally, each of the courses were placed on a curriculum matrix to crosswalk the outcomes with the Commission on Collegiate Nursing Education Essentials for MSN (CCNE), National Organization of Nurse Practitioner Faculty (NONPF), and Quality and Safety Education for Nurses (QSEN) competencies for MSNs.

Implementing Change/Results: Lewin's Change Model (unfreezing, changing, and refreezing) is suggested as a framework for effecting change. For example, change is not easy as there is a comfort level in the familiar and faculty must adapt to CBC development and integration. Faculty need to be retrained and the curriculum must be redesigned to increase the level of abstraction associated with concepts that encourages organization and processing, which is unfreezing. Instructional strategies should include a variety of interactive methods in didactic and practice settings. The benefits for a graduate program to transition to CBC include: the content is more reasonable in volume for the class time available; faculty use concepts to build on the increasing complexity of clinical situations; students are better prepared for critical reasoning and are able to transfer what they know from practice to new situations; graduates are better-prepared for the ever-changing world where knowledge and evidenced-based practice are constantly changing; and faculty are innovators and front-runners with the evolutionary changes in nursing education as they accept that changing times and concept-based approach is a feasible prospect.

Concepts are derived from a health continuum that incorporates wellness, health promotion, and acute and chronic illnesses based on all age groups, health, and the environment. Faculty decide which concepts represent contemporary nursing practice and address attributes of the nursing education program while providing clear, understandable concepts for students. Concepts are not derived from theory, but reflect trends in healthcare. A benchmark approach may be used to validate and finalize the selection of concepts. For changing to occur, faculty may identify how current courses can be transitioned. Using a stepped approach, the curriculum is changed over the course of the program. For example, the transition begins with Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacotherapeutics, moving to Management Across the Lifespan (FNP I, FNP II, FNP III). A timeline can be used to monitor progress, course-by-course and semester-by-semester, facilitating the integration of additional courses into the program. For refreezing, Advanced Practice Registered Nurse (APRN) standardized testing during the program may be used to assess student learning and application of the concepts to clinical situations. Faculty should share didactic and clinical exemplars, course evaluations, and lessons learned to solidify CBC teaching/learning methods across the curriculum. Each faculty member should have a grasp of the program curriculum to provide students with opportunities to expand knowledge.

Conclusions: CBC is a teaching methodology that enables learners to link and apply new knowledge, skills, and competencies with prior learning. Practice skills evolve through life-long learning. MSN CBC incorporates relevant, available, and shared knowledge to address learning styles and acknowledge the experiences of nurses returning for their MSNs by building on the students' past experiences. The MSN CBC exemplars were developed to facilitate program transition from systems-based curricula to CBC. Lewin's Change Model was used to frame steps for implementing the MSN CBC.

Title:

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References:

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Abstract Summary:

Concept-based curriculum in model Master-level nursing education courses was developed and is presented so that it can be utilized globally. Each course has been placed on a curriculum matrix to crosswalk outcomes with the CCNE Master Essentials, NONPF, and QSEN.

Content Outline:

- Introduction
 - Need for paradigm shift in nursing education
 - Concept-based curriculum (CBC) and model undergraduate (ADN/BSN) and graduate courses (MSN)
- Advantages of Concept-based curriculum
 - Concept-based curriculum is currently utilized in some undergraduate programs in the United States
 - Concepts are applicable to multiple scenarios
 - Concepts can be applied to multiple clinical learning experiences
 - Concepts can be applied to case studies
- Why are concepts important?
 - Concepts are abstract ideas, which allow a range of information to be made available
 - Similarities and differences within concepts
 - Previous knowledge can be linked to new learning
 - Pertinent information and knowledge are applied without needing to know all of the details
- Teaching strategies
 - Interactive methods in didactic and practicum Learner participation- demonstrations, presentations
 - Engaging experiences- debriefing
 - Class discussions and activities- peer teaching, compare and contrast client care scenarios
 - Relate content to previous learning- recall and application
- Faculty barriers
 - Faculty must change to adapt to MSN CBC.
 - Faculty must locate or create materials to support new approaches.
 - Concern that students will not get enough content
- Benefits of CBC
 - Focus is on learning and applying new knowledge rather than on volume of content.
 - Concepts build on the increasing complexity of clinical situations.
 - Students are better prepared for critical reasoning and able to transfer learning to new situations.
 - CBC prepares the graduates for the ever-changing world where knowledge and evidenced-based practice are constantly changing.
 - Faculty are innovators and front-runners with the evolutionary changes in nursing education proposed in *The Future of Nursing* (IOM, 2011).
- Conclusion
 - Templates for MSN CBC courses
 - Matrices
 - Questions and Answers

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