DNP Project:

Creating a Seamless Academic Progression from

Undergraduate to Graduate Education in Nursing

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NURS 804: DNP Project Analysis and Dissemination

November 7, 2020

This paper is submitted in partial fulfillment of the requirements for the
Doctor of Nursing Practice degree.

Abstract

In 2011, the Institute of Medicine (IOM) recognized an impending nursing workforce shortage and called on nursing educators to create pathways to promote innovative nursing education. This project was designed to respond to that call by creating a nursing education program that seamlessly progresses students from an undergraduate level of nursing education to the graduate level with a focus on nursing leadership. Research shows that the Academic Progression in Nursing Initiative, started in 2014, identified four pathways to aid in student matriculation: RN to BSN degrees conferred at the community college level, accelerated program options, competency or outcomes-based curriculum, and shared curriculum (Farmer, Gerardi, Thompson, & Hoffman, 2017). These four models were developed to push forward the agenda of seamless academic progression and they serve to meet different needs while having points of intersection. After reviewing the four pathways, this Doctor of Nursing Practice project selected the accelerated option, paired with shared curriculum, as the appropriate pathway to be implemented. The Knowledge to Action (KTA) theoretical framework was applied in the development of this program. The final product deliverables, included a curriculum map and cross walk table, outline a seamless academic program bridging undergraduate and graduate education with a focus on nursing leadership.

Keywords: seamless academic progression, nursing education, not inpatient care

Dedication

This project could not have been completed without the support of my loving and supportive spouse, Joshua Yoder. He has always believed in my ability to succeed and has offered words of encouragement, hours of listening to me process my way through this project, time proof reading my work and a gentle push when needed. To my wonderful children, Andrew and Kaylee Yoder, who have also offered words of encouragement, given of their time listening to me prepare for my oral defense, and who are proud of me for completing this paper and program. To my extended family for your support and encouragement during this journey. I love you all very much and am so grateful for your support and love over the last three years, while our family has balanced work life, school life and precious family time. Thank you!

Acknowledgements

I wish to acknowledge the many people whose friendship, mentoring, expertise, and commitment saw me through this program. I begin with Dr. Laura Wheeler who precepted, mentored, and befriended me throughout the project; thank you to Dr. Brenda Srof, Dr. Jan Kauffman, Dr. Ruth Stoltzfus, and Joanie Deal DNPc, who provided steady encouragement and kindness; Anna Maria Johnson for helping me as my editor; and Dr. Patty Peebles who inspired me to pursue this degree; and to my fellow students in cohort one of this DNP program, with whom I shared friendship, fun, guidance, wisdom and who motivated me throughout this program; the members of the MSN subcommittee for their commitment of time and their role in guiding and critiquing this program development; and lastly, to my gracious colleagues for their support during the last three years.

Executive Summary

Purpose: The goal of the project is to promote seamless educational advancement in nursing from the undergraduate level through graduate level. The program is designed to intentionally equip more nurses with the knowledge and frameworks to view healthcare as a complex system which, as nursing leaders, they can influence through appropriate use of positional and expert power.

Background and Significance: Nursing as a profession faces many challenges: a looming nursing shortage due to nurses retiring and leaving the profession, a population that is aging and creating more patients to care for, and too few nurse educators to support growth in the profession. The Institute of Medicine (IOM) partnered with the Robert Wood Johnson Foundation (RWJF) in 2011 to create the seminal work, *The Future of Nursing: Leading Change, Advancing Health.* Out of this landmark document came the call for nurse educators to make systems-level improvements to remove barriers and actively promote nurses to achieve higher levels of education ([IOM], 2011, p. 163). This calling stems from the understanding that a highly educated nursing workforce will have positive impacts on patient quality of care, patient outcomes, cost savings, and the continued ability to educate the next generation's workforce. Without nurses prepared at advanced educational levels, nursing will not be able to overcome these challenges.

Methods: The Knowledge-to-Action Framework (KTA) created by the Canadian Institutes of Health Research (CIHR) was the overarching framework used to research, plan, implement, analyze, and disseminate the project. The KTA framework focuses beyond clinicians,

considering all stakeholders, making it a very collaborative process. This focus on interprofessional collaboration is in alignment with this program development change project. The first step in this project was to conduct a market analysis and needs assessment. This was done by creating a table to compare and contrast different programs according to their title, delivery format, course selection, credits per program, number of practicum hours, and type of certification obtained post completion (see Appendix A). The curricular component of the Doctor of Nursing Practice (DNP) project design was built on the Structure Oriented Theory of Curriculum Development, in which the focus is on the curriculum components and their interrelationship (Hashimi, 2014). Deliverable One was a curriculum map created to visually correlate courses to the *The Essentials of Baccalaureate Education for Professional Nursing Practice* (American Association of Colleges of Nursing [AACN], 2008) and *The Essentials of Master's Education in Nursing* (AACN, 2011). The second deliverable was a cross-walk table for the program comparing the student learning outcomes to the program learning outcomes of other programs including the *American Association of Colleges of Nursing* (AACN) *Baccalaureate* and *Master's Essentials* in nursing education, American Organization of Nurse Executives (AONE) manager competencies, and Quality and Safety Education for Nurses (QSEN) competencies (see Appendix B). The third deliverable was a table that shows how to incorporate of Pre-Entry into Practice (PIP) elements into an orientation module (see Appendix C).

Findings: The Masters of Science in Nursing subcommittee served as the program review panel. They used the American Nurses Association (ANA) Leadership Competency Framework (2018) as a tool to rate the Doctor of Nursing Practice (DNP) Project of the development of an

Associate Degree in Nursing (ADN) to Master of Science in Nursing Leadership track success in

achieving three leadership competencies: first, leading oneself; second, leading others; and third,

leading the organization. According to the ANA Leadership Competency Framework (2018),

leading yourself includes the following concepts: adaptability, executive image, initiative,

integrity, learning capacity and self-awareness. Using a Likert scale, 66.7% of reviewers rated

the program's curriculum as demonstrating *extremely strong evidence* and 16.7% rated it

strong in evidence of building and educating on this set of concepts. Leading others includes the

following concepts: communication skills, conflict management, engaging diversity, employee

development, and relationship building. Using a Likert scale, 66.7% of reviewers rated the

program's curriculum as demonstrating *extremely strong evidence* and 33.3% rated it as having

strong evidence of building and educating on this set of concepts. Leading the organization

includes the following concepts: business acumen, change management, decision making,

influence, problem solving, system thinking, vision and strategy, and project management. Using

a Likert scale, 83.3% of reviewers rated the program's curriculum as demonstrating *extremely*

strong evidence and 16.7% rated it as having *strong evidence* of building and educating on this

set of concepts.

Conclusion: This program development project demonstrates that seamless education can be

created, that there is a market for nurses with leadership skills, and that the program

demonstrates strong or very strong evidence of preparing nurses to demonstrate the three

competency areas established by the ANA as leadership competencies.

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Toward a More Seamless Academic Progression in Nursing

Educational progression within the nursing profession has been fragmented. Fragmentation is a barrier to nurses pursuing further educational degrees and hinders the profession's sustainability (Pittman, Kurtzman, & Johnson, 2014, p. 329). Nursing has many different educational points of entry such as: licensed practical nurse or licensed vocational nurse programs, diploma programs, associate degree in nursing (ADN), and even Bachelor of Science in nursing (BSN) degree programs. Yet many healthcare professions have just one standardized professional point of entry into professional practice which is at the doctoral level of education. As a result, practicing nurses are unequally prepared to be providing care for patients. Therefore, this Doctor of Nursing Practice (DNP) project is working to remove barriers and create a pathway that nurses can follow to advance their education to the master's level and subsequently, be prepared for doctoral work. Of note, the following key educational documents *The Essentials of Baccalaureate Education for Professional Nursing Practice* (2008) will be referred to as the *BSN essentials* and *The Essentials of Master's Education in Nursing* (2011) will be referred to as the *MSN essentials* throughout this paper.

Statement of the Issue

Nursing as a profession faces many challenges: a looming nursing shortage due to nurses retiring and leaving the profession, fragmentation in the paths to educational advancement, and a shortage of educators to support growth in the profession. The problems associated with shaping the supply and preparation of the nursing workforce have ramifications for the provision of quality nursing care, both now and into the future. Building an effective nursing work force will require a response from the nursing profession to include the development of

seamless progression through educational tiers and the promotion of advanced degrees in nursing.

The major impetus for developing a plan of action for the future of nursing derives from the work of the Institute of Medicine (IOM). The IOM created their 2011 work, calling for advancements in nursing education. The (IOM) partnered with the Robert Wood Johnson Foundation (RWJF) in 2011 to create the seminal work, *The Future of Nursing: Leading Change, Advancing Health.*

Out of this landmark document came the call for nurse educators to make systems-level improvements which remove barriers and actively promote nurses to achieve higher levels of education (Institute of Medicine [IOM], 2011, p.163). This calling stems from the understanding that a highly educated nursing workforce will have positive impacts on patient quality of care, patient outcomes, cost savings, and the continued ability to educate the next generation's workforce. Without nurses prepared at advanced educational levels, nursing will not be able to overcome these challenges.

Project Goal and Desired Outcome

The goal of the project was to promote seamless educational advancement in nursing from the undergraduate level to graduate level. The program is designed to intentionally equip nursing leaders with the American Nurses Association Leadership Competency Framework (2018) and a framework to view healthcare as a complex system which, as nursing leaders, they can influence through appropriate use of positional and expert power. This project aims to reduce fragmentation and thus remove barriers to advanced education for nurses.

Congruence with Organizational Strategic Plan

The DNP project proposed in this paper is intended for implementation in a small liberal arts college in the Midwest, and will be referred to within this paper as the institution. The institution is in the process of creating a strategic plan. It is known that the institution's nursing department is valued and will be a priority for renovation and reinvestment. The nursing department has the largest number of faculty in any program on the campus and the highest number of students focused on one career path. The institution's vision statement includes references to personal growth and purpose, as well as, striving in life, leadership and service. The mission statement refers to transformation of communities through courageous, creative and compassionate leaders. Two of the institution's core values directly align with the project as well: servant leadership and life-long learning. Given the institution's commitment to leadership and education, combining these core values into a seamless academic track from the associate's degree to master's with a focus on nursing leadership appears to be congruent with the vision, mission, and core values.

Relevance to Nursing Practice

Creating a seamless pathway from the Associate Degree in Nursing (ADN) to the Master of Science in Nursing (MSN) level will help nurses matriculate to the graduate level of educational preparedness. Hospital systems will directly benefit from having a pool of nurses who can assume leadership positions with the proper educational training. According to long-term projections, for 2016-2026 in the midwestern state where the institution is located, Medical and Health Service Managers' job classification has a base level of 8,110 positions under this title and is projected to grow to 9,890, which will be an increase of 1,780 positions, or an

increase of 21.9%. There is an average annual opening of 860 positions in the state under this job title (Projection Managing Partnership, n.d.). The IOM had the foresight to recognize numerous indicators that lead to a call for change in healthcare and that the ultimate goal was the provision of the highest quality, safest delivery of patient care.

Consideration of Barriers and Facilitators

In order for this Doctor of Nursing Practice project to be successful barriers and facilitators must be assessed. Identifying barriers helps the project developer understand what issues may arise and allows for a more pro-active approach to problem solving. Likewise, identifying facilitators allows the project developer to lean into the strengths that have been already identified.

Barriers

Prior to implementation, the proposed ADN to MSN program would need approval through the institution's accrediting body, the Commission on Collegiate Nursing Education (CCNE). The approval process may involve a site visit. The entire approval process will require an institutional commitment in the form of time and money. Additional implementation barriers include: the limited number of institutional nursing faculty to support program growth; the fact that the institution has limited experience with teaching modalities outside of face to face format with only two established programs using online education as a delivery model; the institution has a historical preference for a stepwise approach requiring readmission and time in practice between each degree level within nursing education as opposed to seamless matriculation between degree levels; the institution's lengthy governance process required for all new programs; and the financial costs associated with starting a new MSN track of education.

Facilitators

The project was facilitated by a leadership team at the institution who embrace innovation in education. The project was supported by the President and Dean who both have a background in the healthcare arena. There is a desire by the nursing faculty to grow and examine new models of educational delivery. The department has recognized the need for multimodal educational delivery including face-to-face, hybrid, and online education as well as a desire to create tracks that lead to and promote nursing education at the doctoral level.

Literature Review

A review of the literature was conducted using the key terms "seamless academic progression in nursing". Four databases were utilized: Gale One file Nursing and Allied Health, PubMed, Medline, and the Cumulative Index of Nursing and Allied Health Literature (CINAHL) resulting in 268 identified sources. Seven additional print sources were identified and included upon reading through various journal articles: three position statements from the AACN (2016, 2018, 2019); a white paper from Robert Wood Johnson Foundation (RWJF, 2015); a report from the IOM *Future of Nursing: Leading Change, Advancing Health* (2011); The Carnegie Foundation text *Educating Nurses: A Call for Radical Transformation* (2010); and the ANA (2010) *Code of Ethic for Nurses*. Altogether, there was, a total of 275 sources. Once the data was reviewed for duplication, the remaining body of work equaled 254 sources. These sources were further examined for exclusionary criteria, which consisted of articles related to patient care rather than academics. Using patient care as exclusionary criteria eliminated 217 sources, leaving an eligible pool of resources at 37. These sources spanned the last nine years, provided full text,

and were written in the English language. Many were related to the Academic Progression in

Nursing (APIN) initiative (American Association of College of Nursing [AACN], 2016).

Literature on the topic of seamless academic progression came in the form of reports

related to the IOM 2011 seminal work, *The Future of Nursing*. The reports came from

organizations creating position papers in response to the IOM report or the actions that resulted

from the APIN initiative. A small number of articles are mid-point reports or updates on progress

being made in regards to various initiatives. Through researching this topic, it is clear that the

four models inspired the themes discovered in literature: RN to BSN degrees conferred at the

community college level, accelerated program options, competency or outcomes-based

curriculum, and shared curriculum. These four models have been developed to push forward the

agenda of seamless academic progression and they serve to meet different needs while having

points of intersection. It is noteworthy that the APIN initiative garnered the support of several

institutions including the Accreditation Commission for Education in Nursing (ACEN),

Commission on Collegiate Nursing Education (CCNE), and the National League for Nursing

Commission for Nursing Education Accreditation (NLN CNEA), in a press release entitled

National Nursing Education Accrediting Agencies Endorse Academic Progression to Help

Nurses Meet Future Health Care Demands (Robert Wood Johnson Foundation, 2015).

Academic Progression in Nursing Initiative (APIN) Background

The APIN initiative was designed for state action coalitions to work together toward

implementing models that would meet the needs of their residents. Four models were selected:

RN to BSN degree conferral at the community college, shared curriculum through academic

partnerships, accelerated options, and competency-based education. While these four models are

designed to be stand-alone approaches, they are often interdependent and can be intertwined. APIN helped to create a common language around different pathways to create seamless academic progression in nursing. This common language helped us to gain further understanding of models that are useful. Much of the published body of literature came from the state level and highlighted the need for nursing engagement across all segments of the healthcare field. The literature strongly focused on the need for collaborative efforts to help facilitate successful implementation of nursing programs that allow for seamless progressions across levels of education. These APIN reports carried more validity given that they were supported as statewide initiatives.

Despite the push for new initiatives, it is important to note that the published materials tended to be narrowly focused on only the nine states that participated in APIN. However, the states were representative of various regions in the United States. APIN identifies five critical components for success: strong collaboration between partner institutions, institutional commitment to provide leadership and resources, supportive infrastructure, program scalability and sustainability, and intentionality in educational delivery models (Farmer, Gerardi, Thompson & Hoffman, 2017; Gorski, Gerardi, Gidden, Meyers & Peters-Lewis, 2015; Gorski, Farmer, Sroczynski, Close & Wortock, 2015). Four of the nine states elected to pursue integrated progression pathways where students self-selected into this seamless model and there were caps associated with the number of students allowed to enroll (Farmer et al., 2017, p 34). Integrated progression pathway models were highly competitive with limited seats. Due to the limited numbers of nursing faculty available, integrated progression pathway models may disadvantage minority groups, who face more barriers getting into highly competitive programs. The other five

states that participated in APIN chose to pursue the shared curriculum, transfer, or articulation

agreement pathway, which worked between academic institutions whereby the receiving

institution was allowed to cap the number of enrolled students (Farmer et al, 2017, p. 37).

Students in the shared curriculum model had to apply and be accepted to the receiving school.

However, the curriculum was intentionally designed to avoid overlap and to create a fluid

advancement (Farmer et al., 2017). Both models have advantages and disadvantages. The entire

APIN model requires further examination of its individual components.

Critiques of the Four Progression Models

RN to BSN Degree Conferral at the Community College Level

The proposed model of conferring BSN degrees at the community college level would

help expand the entry point for nurses and would increase the number of students enrolled in

BSN programs. However, the literature confirms its controversial nature. According to Fulton

(2015), the mission and target demographic differs between two- and four-year colleges, and

there is a general concern regarding programmatic overlap and the quality of a bachelor's degree

conferred at the community college level (p. 1). In many states, legislative change would be

required to permit baccalaureate degree offerings at the community college level, posing a major

hurdle (Farmer et al., 2017; Fulton, 2015; Gorski, Farmer, et al., 2015). Indiana passed such

legislation in 2004 (Fulton, 2015). The RN to BSN degree conferral at community colleges

acknowledges the important role that community colleges play in meeting the economic needs of

students and increasing regional accessibility to a nursing program. While BSN degrees can be

conferred at the community college level, there is a quality safeguard in place from the AACN

stating that community college programs have to be nationally accredited (Gorski, Farmer et al.,

2015). After careful review, it is apparent that this model falls outside of the scope of this DNP

project proposal, since the four-year liberal arts college will need to compete with community

colleges for nursing students and faculty.

Shared Curriculum through Academic Partnerships

A shared curriculum through academic partnership model was the most discussed model

in the literature discussed by APIN and accrediting bodies. This model focused on the reduction

of redundancy and creation of a streamlined curriculum of matriculation to an advanced degree

of BSN or even master's in nursing. Gorski and Polansky (2018) touted the push for academic

partnerships as the key to success, even going so far as to predict an 83.9% increased growth rate

of BSN prepared nurses by 2025, over the current prediction of 64% growth without these

partnerships (p. 154). Gorski, Farmer et al. (2015) noted that shared curriculum was often used in

conjunction with competency-based models. The shared curriculum through creating academic

partnerships approach has been well-explored and documented as a statewide strategy in Texas,

California, Oregon, New Mexico, Wyoming, Illinois, and North Carolina (Farmer et al., 2017;

Gaines & Spencer, 2013; Knowlton & Angel, 2017; Landen, Evans-Prior, Dakin & Liesveld,

2017; Markowitz & Bastable, 2016; Wiseman, Trocky, Travis & Kirchling, 2017; Yambo,

2018). These states created regions and worked to maximize the nursing resources of faculty,

facilities, and shared admission requirements. Gerardi (2015) demonstrated the work that APIN

did toward creating standardized nursing prerequisite courses as a way of modeling shared

curriculum which, in turn, demonstrated why collaboration around a shared curriculum amongst

partnering institutions is so critical (p. 533). The National League of Nurses (NLN), APIN, and

the Carnegie Foundation all agreed that a shared curriculum through academic partnership is a

strong model for seamless educational advancement in nursing. The NLN, in 2010, touted their education competency model as the first evidence-based model designed to provide a framework for seamless educational advancement. The NLN model focused on nursing knowledge, integration of concepts, environment of care, patient safety and quality, teamwork, and relation-based care (National League of Nurses: Tri-council for Nursing Issues, 2010; Sroczynski, 2017). The Carnegie Foundation, in 2010, employed Patricia Benner and colleagues to examine and articulate how nursing could be transformed. Benner, Sutphen, Leonard and Day (2010) identified the following four points related to share curriculum and academic partnerships, as a pathway: agreement should be achieved around nursing prerequisites, the BSN should be the entry into practice point, articulation agreements should be developed to matriculate students through seamless nursing programs and lastly, institutions should develop more ADN-to-MSN programs (p. 217).

Accelerated Options

The accelerated options model streamlines education by combining programs seamlessly within the same institution. According to Gorski, Farmer et al. (2015), ADN to MSN accelerated programs were a strong example of providing seamless educational advancement in a manner that suited the working nurse (p. 511). The accelerated options model is the most streamlined pathway to advanced nursing degrees and can be paired with shared curriculum and competency-based education models. Accelerated options also serve as a pathway for students new to the field of nursing who hold a baccalaureate degree in a different field of study (D'Antonio, Beal, Underwood, Rieth Ward, McKlevey, Guthrie & Lindell, 2010, p. 713). Developing convenient pathways is one way in which nursing education can produce more nurses in a non-traditional

manner. Both second degree students and ADN to MSN track students have previous academic, work, and life experiences which various authors have explored. Chard (2013) makes note that accelerated options appeal to adult learners because they value personal success, have to balance work and family responsibilities, and are motivated by financial incentives (p. 276). These students present as adult learners and need learning strategies and approaches that meet their needs to be successful and supported in accelerated options. D'Antonio et al. (2010) and Davis, DeWitty and Millett (2012) noted that completing a BSN degree often happens in a range of 12 to 18 months in these programs and that an MSN can be completed in as little as 36 months. The pre-entry immersion program (PIP) was developed by the New Careers in Nursing (NCIN) with the intent to increase nursing diversity by targeting grants for minority, male, and disadvantaged students who wish to transition into nursing (Davis et al., 2012). As both D'Antonio et al. (2010) and Davis et al. (2012) noted, on-boarding students into these accelerated programs needs to be done with intentionality and housed in a supportive framework. There is so much work to be done in a compressed time frame: onboarding, role assimilation and integration, orientation to the institution and clinical sites, and nursing content. Accelerated students learn about research, evidence-based practice, the nursing process, and outcome all of which are complex topics taught in a quick and intensive time span. Accelerated models help to create diversity and promote pathways to advanced degrees, but they are intensive for faculty and students. Davis et al. (2010) noted that at that time there were 296 accelerated nursing programs and that the concept originated in 1972 at St. Louis University and at Yale shortly thereafter (p. 8). This data showed that the accelerated model has been long-standing and has been shown to bridge students into advanced degrees which drives its popularity. Hrelic (2019) noted that as of the time of

writing, there were 777 RN-to-BSN and 219 RN-to-MSN programs are available in the United States (p. 2).

Competency or Outcomes-Based Curriculum

It is important to note that competency-based education, according to Gorski, Farmer, et al. (2015), is all-encompassing, covering skills as well as knowledge and student professionalism (p. 511). The AACN has made it clear in their 2018 *Vision for Nursing Education Position Statement* that a strong endorsement of "national consensus-based competencies" was to be developed and implemented as best practice (p. 9). The competency model requires an intentional focus on determining what skill set and knowledge base is needed by nurses to enter into practice and how to measure and ensure competencies in a reliable and consistent manner. This process can be time-consuming, labor-intensive, and requires a high degree of collaboration. A positive aspect of the competency model is its ability to accommodate a large number of nursing students since they matriculate through the prescribed set of competencies at their own individual pace. As previously stated, this is a model that can be used in conjunction with a shared curriculum model. However, many institutions implemented it as a stand-alone program. Massachusetts was noted to be the first state to develop a set of nursing core competencies (Gorski, Farmer, et al., 2015, p. 511). The competency model was also discussed by Benner et al. (2010) in the Carnegie Foundations for the Advancement of Teaching, *Educating Nurses: A Call for Radical Transformation*.

The competency model serves as a framework for holistic nursing care, as it focuses on the needs within the local communities where nurses practice. The competency-based framework is developed by processing through the following steps: establishing a set of agreed-upon

competencies, conducting a gap analysis of the current curriculum in relation to the new competencies identified, implementing a new revised curriculum with new competencies embedded, and evaluating competencies as new emerging technology develops. Competency or outcome-based learning, as discussed by Coonan, Feldstein and Manley (1995), focuses on bridging undergraduate to graduate degrees and was developed at the Columbia University School of Nursing. The Columbia University School of Nursing acknowledged that seamless outcomes-based education models allow for a curriculum that offers opportunities for clinical competencies and real-world experiences. The outcomes-based educational model they developed had a period of eight months between the BSN track and beginning of the MSN track, and students fit into one of three categories: nurses with previous work experience, students with no previous work experience who desired to work as a bedside nurse and were willing to find their own employment, and students willing to enroll into a residency program (Coonan et al., 1995). So, this literature informed us that models with a focus on nursing competencies and community partnerships were actually in place prior to the IOM 2011 report, and have successfully helped nurses achieve higher levels of education.

Gaps in the literature

While much has been documented in the way of program development, there is a limited body of nursing research related to this topic. The various tracking mechanisms in place for measuring the goal of 80% of nurses obtaining their BSN makes it harder to determine which of the four models is most successful. It will be interesting to see what literature emerges over the course of the next ten years as more substantive data emerges from these various models for seamless academic progression. It will also be interesting in the next year to see what the

National Academy of Science (NAS), formerly the IOM, will identify as goals for nursing in

their 2020 Future of Nursing Report. There are three questions of interest to me. First, what

overall progress will NAS report in obtaining a nursing workforce that is 80% prepared at the

BSN level? And secondly, will seamless academic progression continue to be articulated as an

on-going priority? Thirdly, will this topic remain a focus of future resources as the nursing

shortage worsens, or will models of team nursing reemerge making a clear role for ADN nurses

in the workforce? The literature certainly shows support for these four models, but yet to emerge

is a call for one strategic focus or plan to speed up progress.

Conceptual and Theoretical Framework: Knowledge-to-Action (KTA) Framework

This project examined different models to promote seamless academic progression, a

theoretical framework was selected and applied to this project. After reviewing and considering

of the many Evidence Based Practice Models used to translate nursing research into practice

presented by Melnyk and Fineout-Overholt, (2019, Chapter 14) and White, Dudley-Brown and

Terhaar, (2016, Chapter 2), the Knowledge-to-Action Framework (KTA) created by the

Canadian Institutes of Health Research (CIHR) was considered ideal to implement a newly

chosen educational delivery model: RN to MSN. The KTA framework focuses beyond

clinicians, considering all stakeholders, making it a very collaborative process. This focus on

interprofessional collaboration is in alignment with this program development change project.

The KTA framework uses the concept of a funnel, which shows that knowledge broadly enters,

is spun through with a feedback looping mechanism and finally creates an end-product (Strause,

Tertro & Graham 2009, p. 166). This framework resonated well with systems theories in nursing

and suited this program development process. Program development was approached as

something linear in nature but with the necessity of feedback loops to ensure good communication and collaboration. The KTA framework seeks to build on commonalities as the product emerges through seven phases of change; therefore, this non-static approach is well-suited to program development where unexpected barriers might emerge (Strause et al., 2009). The KTA framework's seven phases align nicely with this particular type of program development change project. Identify the problem (step one) is similar to development of a research question using the Population, Intervention, Comparison and Outcome (PICO) format. Select knowledge relevant to the problem (step two) was completed in the literature review. Adapt knowledge to local context (step three) was completed through a needs assessment that has been targeted to a specific geography and type of nursing. Assess barriers (step four) is happening currently in the planning phase and will be on-going which really highlights the non-linear nature of this project and how this theory allows for that. Create and implement interventions to use the knowledge (step five) will be on-going and happens through processing new knowledge with the project committee, mentors, sub-committees and ancillary departments. Monitor how the knowledge is being implemented (step six) will occur on paper through the internal academic process over the next ten months and will ideally be fully implemented in the next year or two. Evaluate outcomes of knowledge and sustain the actions (step seven) will happen in a variety of ways. Completing the internal academic initiative process, launching the program on schedule, program evaluations, student success in gainful employment post-graduation, and program profitability are all measures that will be used to evaluate the success of this program.

Methodology

Market Analysis/ Needs assessment

An initial market comparison and review of workforce projects in the midwestern state where the institution is located demonstrated that even though many colleges and universities within this area have master's degrees with leadership tracks, there is still an unmet workforce need. For example, there is an average annual opening of 860 positions in the midwestern state where the institution is located for nurses with this educational preparation and a projected growth in the field of 21.9% (Projection Managing Partnership, n.d.). The next set of data collected included a review of ten programs offered within the state, two out-of-state programs and the study institution's previous Certified Nurse Leader program. Program title, length, number of credits, type of certification exam for students post completion, and course titles were all examined and compared (see Appendix A). An initial survey of the programs listed above was also examined for course content areas and mapped to the *The Essentials of Baccalaureate Education for Professional Nursing Practice* (2008) and *The Essentials of Master's Education in Nursing* (2011) to ensure that each program was developed in alignment with these essentials (American Association of Colleges of Nursing [AACN], 2008 & [AACN], 2011) (see Appendix B).

After the market analysis step was completed, an internal needs assessment was conducted. This is step three of the Knowledge to Action (KTA) framework. The needs assessment was conducted through the creation and distribution of two Google forms surveys sent to current RN to BSN students and to the alumni from the past five years (see Appendix D and Appendix E). These were simple *yes* and *no* surveys, which inquired about the student's or

alum's interest in pursuing graduate nursing education. The survey asked current students whether a nursing administration degree was appealing to them, and whether they would be interested in either a three- or four-year RN to MSN track. Alumni with a BSN already were asked if they would be interested in a two-year MSN in nursing administration track.

The response rate for current students was 37%, or 13 out of 35, and only 16% for alumni, or 21 out of 130. Of current students, 76.9% stated that they were interested in a master's degree and 69% were interested in an administrative/ leadership focus. 100% of interested students preferred the three-year plan of study. Among alumni, 76.2% stated that they were interested in a master's degree. However, only 42.9% were interested in a leadership focus. Although the overall response rates were not high, the feedback was encouraging because it revealed that there is an expressed need for this program from students past and present who are familiar with the institution.

Project design

The curricular portion of the DNP project design was built on the Structure Oriented Theory of Curriculum Development, in which the focus was on the curriculum components and their interrelationship (Hashimi, 2014). This theory works well with this project because all the components are connected to an overarching theme of nursing leadership. The work was based on the market analysis compare and contrast table examining market comparison of program title, delivery format, course selection, credits per program, number of practicum hours, and type of certification obtained post completion.

The design portion of the project was in alignment with the KTA framework step five: create and implement interventions to use the knowledge obtained. The AACN's *MSN Essentials*

document served as the guiding framework for course selection and curriculum mapping (American Association of Colleges of Nursing [AACN], 2011). Given that the curriculum sequencing was in part dictated by the existing institutional programs, which included a Master's in Business Administration (MBA) and the Master of Science in Nursing (MSN) Family Nurse Practitioner (FNP) track, an "utilization-related" content sequencing approach was used. In a utilization-related approach, courses had an overarching tie of being directly related to nursing administration (Posner and Strike, 1974; Eisner and Vance, 1974). For example, utilization-related sequencing was implemented into this program design by using existing courses in the MBA program, by leaving them in their designated space in the curricular calendar and adjusting this new curriculum around that pre-existing constraint (see appendix F).

Program development applied Eisner and Vallance's (1974) five concepts of curriculum development: cognitive process, curriculum as technology, self-actualization, social reconstructive- relevance, and academic rationalism. Eisner and Vallance describe these five concepts in the following way. First, "cognitive process" refers to how students develop intellect through the process of schooling and learning how to learn. Second, "curriculum as technology" means that the use of online learning modalities meets the curriculum as a technology component, which focuses on finding the most efficient learning delivery model. Third, the concept of "self-actualization" ties to the institution's values of creating passionate learners and fostering personal growth. Fourth, uniquely tied to the rationale for curriculum development is the premise that society will benefit from well-prepared nurse leaders who value education, patient care quality, and safety. Placement of societal benefit above the personal exemplifies the "social reconstructive-relevance" concept. Fifth, "academic rationalism" means all elements of

the curriculum are connected. In this case, the use of the AACN *MSN essentials* as a guiding

framework serves as a standard to which all nurses prepared at this level must achieve and meets

the academic rationalism aspect of Eisner and Vallance's five concepts of curriculum

development.

Setting

The institution is located in the Midwest and is in its 125th-year of existence. It is a

small, liberal arts, faith-based college. The college serves approximately 1,000 undergraduate

students and 150 continuing-education and graduate-level students. About a quarter of all

undergraduate students are nursing majors and about half of the continuing-education and

graduate students are nursing majors. The nursing department is the largest educational

department on campus.

Participants

The program was developed under the leadership of the author, with guidance from the

DNP mentors, including the department chair and registrar, the MSN subcommittee, the nursing

department faculty and the MBA program director. The intended program participants are nurses

who have earned an associate degree, with a minimum grade point average (GPA) of 2.7, and

who have an active nursing license in a state that accepts our nursing education program

curriculum. This includes all states that participate within the nursing licensure compact, as well

as many others. Program participants will matriculate seamlessly from the bachelor's portion of

the curriculum into the master's portion so long as they remain in good academic standing within

the institution and carry a 3.0 GPA at the time of matriculation.

Tools and Instruments

There are several tools associated broadly with program development projects. The literature includes curriculum mapping to assess curricular content, which is a useful idea anytime curriculum revisions are being contemplated (Landry, Alameida, Orsolini-Hain, Renwanz, Privé and Leong, 2011). Curriculum mapping ensures that all essentials are covered along with any shared curriculum components when creating a seamless academic progression model. Once an educational model is selected and curriculum mapping occurs, then an educator must shift to looking at evidence-based nursing education and which practices and delivery modalities make for an excellent nursing program (Kruszewski, Brough & Killeen, 2009). Robinson and Dearmon (2013) proposed the Analysis, Design, Development, Implementation, Evaluation (ADDIE) model for instructional design. The ADDIE tool was used in this project to: analyze what needs to be changed within a curriculum, design program objectives that address the identified needed area of change, develop a program change that met the identified program objectives, implement the program change, and evaluate the program change.

The ADDIE approach is well-aligned with the chosen KTA framework because the steps are similar and it provides a systematic approach. In addition to the KTA theoretical framework model and the ADDIE instructional design model, pre-entry immersion program (PIP) is a program developed with the intent to support students who end up in a program using an accelerated model of nursing education (Davis et al., 2012). The PIP model recognizes that student support must be paired with instructional design for student success (Robert Wood Johnson Foundation and American Association of Colleges of Nursing, 2016). Curriculum

mapping, the ADDIE model of instructional design, and PIP were the three tools selected to be incorporated into program development and implementation.

Project Plan

This DNP project of program development included many stages of progression. The initial stage involved identifying student learning outcomes (SLO) for the program. Once the SLOs were completed the program courses were identified to meet the SLOs for the program's curriculum. The most integrative stage of program development was the development of six new additional courses, which created the completed Associate Degree in Nursing (ADN) to Masters in Nursing Leadership track program (see Appendix G). This work utilized the ADDIE model which makes the seamless undergraduate to graduate curriculum complete. Individual course SLOs were established and activities were proposed to meet the targeted course level SLOs. The largest step of the project was the creation of a curriculum map and crosswalk table. The final portion of the project was to incorporate the PIP program into the orientation module already in existence.

The six new courses developed for this program covered content unique to nursing leadership. The first new course, Management of Nursing: Quality and Safety, provides student with didactic and practicum experiences focusing on the delivery of high quality, safe, patient care. The second new course, Healthcare Policy, examines how nursing can impact policy and practice. Three additional new courses examine nursing administration as it relates to leadership theory application, change theory application, and policy application. The last new course developed was, Nursing Administration Capstone, a course in which students will present their nursing portfolios and projects completed within their practicum hours. These six newly

developed courses represent a total of 420 practicum hours, which is intentional, so that upon

graduation students will have the needed hours to progress to the institution's DNP program.

Outcomes

Four outcomes were measured in this project. Outcome one: the six identified courses

were developed using the ADDIE model. Outcome two: a curriculum map was developed (see

Appendix H). Outcome three: a crosswalk table, was developed consisting of the AACN MSN

essentials, the Quality and Safety Education for Nurses (QSEN) competencies, and the mapping

of the American Organization of Nurse Executives (AONE) nurse manager competencies (see

Appendix I) (AACN, 2011; Hunt, 2012 Quality and Safety Education for Nurses [QSEN]; the

American Organization of Nurse Executives [AONE], 2015). Outcome four: PIP elements were

included in the program orientation module.

Resources Needed

The identified resources needed were: time, support of the nursing faculty, content

experts to help guide the course development work, materials to help frame the content in the

courses, and finally, the registrar's help and guidance in the course sequencing.

Timeline for Implementation

The curriculum proposal with course descriptions, program objectives, and matriculation

guidelines, was presented to the MSN subcommittee in their April 14th meeting for discussion

(see Appendix G and Appendix J). The curriculum proposal and matriculation guidelines were

presented to the Nursing Department at the May 6th curriculum meeting for discussion. The

course descriptions were reworked after feedback from the April 14th meeting and resubmitted

for approval at the May 14th MSN subcommittee meeting when they were passed.

On May 22nd the project implementation shifted in focus due to the SarsCoV2 viral pandemic from a new program initiative process to a program development process. This change was in response to the institution's focus on pandemic preparedness rather than on launching and marketing a new initiative program.

On May 24th student learning outcomes for the six new courses were submitted to DNP mentors for review, and changes were made based on feedback by May 28th. On May 29th the MBA program director supplied MBA course syllabi for work on the crosswalk table and curriculum map. June 1st -20th were spent working on reviewing course syllabi and identifying student learning outcomes for the crosswalk table. June 21st - July 1st were spent adding student learning activities to the crosswalk table, as part of intervention number two, and adding content areas, as part of intervention number three. July 4th and 5th were spent making sure that the current use of *Master's in Nursing Essentials* in the FNP program courses was understood and could be replicated in the crosswalk table (American Association of Colleges of Nursing [AACN], 2011). July 10th -16th was spent adding AONE and QSEN competencies to the crosswalk table, as parts of intervention number four. July 17th- 22nd were spent mapping the MBA courses to AACN, AONE and QSEN competencies, furthering part of intervention number 4. July 24th - August 1st were spent creating learning activities and identifying content areas to be covered in the six new courses, part of intervention four. August 2nd -7th was spent decoding learning activities in the MBA courses from the relevant syllabi or through discussions with professors. August 8th and 9th were spent reviewing PIP elements and adding additional resources into the existing on-boarding orientation module, then creation of a Google form to critique the program development and curriculum against the American Nurses Association's leadership

competencies (American Nurses Association [ANA], 2018). Once SarsCoV2 has passed, the

project will again return to the new initiative process at the institution. This timeline aligns with

the KTA model's step six, *monitor implementation*, through engaging with the MSN

subcommittee, nursing department, DNP mentors and the implementation of this intervention's

timeline.

IRB approval

The Internal Review Board (IRB) at the institution reviewed the project documentation

and deemed the project exempt. The project was given tracking number 023-1920. The IRB

process included the project submission with faculty oversight signature, IRB educational

certification, IRB institutional checklist, informed consent/ study information form, example

emails to be sent to students and the survey tool. IRB approval was obtained for future

implementation of the seamless academic progression program. In this study design, the future

participants will self-select into a longitudinal cohort study. The participants will be surveyed on

a yearly basis about how specific elements of this leadership program have helped them as they

matriculate into the role of nursing leader and how they apply specific elements in their daily

activities as a nursing leader (see Appendix K and Appendix L).

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Evaluation

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Data collection

Data collection to evaluate the program development goal of having a leadership focus

was assessed by using the American Nurses Association (ANA) Leadership Competency

Framework, 2018. A google forms survey was created using the three leadership competencies:

leading yourself, leading others, and leading the organization. A Likert scale from 1 (shows little

to no evidence) to 5 (shows exceptionally strong evidence) was used to assess each competency

area (see Appendix A, Appendix B, and Appendix C).The tool also allowed a rater to provide

feedback if they were rating a competency at a three or lower. The tool consisted of seven

questions: competency one Likert scale and feedback area if scoring lower than 3, competency

two Likert scale and feedback area if scoring lower than 3, competency three Likert scale and

feedback area if scoring lower than 3, and lastly room for any additional comments.

Data analysis

The Masters of Science in Nursing (MSN) subcommittee and the Doctor of Nursing

Practice (DNP) project committee served as the program review panel and used the American

Nurses Association (ANA) Leadership Competency Framework, 2018, as a tool to rate the

program's success in achieving three leadership competencies: leading yourself, leading others

and leading the organization. The MSN subcommittee represents academics and are all nurse

practitioners, while the DNP project committee represents nursing leaders and the institution's

registrar.

ANA competency one: Leading Yourself

According to the American Nurses Association (2018), leading yourself includes the

following concepts: adaptability, executive image, initiative, integrity, learning capacity, and

self-awareness. Using a Likert scale, 66.7% of reviewers rated the program's curriculum

as demonstrating *extremely strong evidence* and 16.7% rated it as having *strong evidence* of

building and educating on this set of concepts (see Appendix M). Although the total of positive

reviews was higher than 80%, the qualitative comments revealed more ambivalence and room

for growth. For instance, comments in this section included, "Certainly while my analysis of the

presence of ANA leadership competencies within your ADN to MSN curriculum is subjective, I found the 'Leading Yourself' category to be the least prevalent" and "I did find examples of "self-awareness" but did not find any examples of responsibilities related to "executive image" – I may have just overlooked." The analysis of these comments indicates that more could be done within the curriculum to address this area as a whole and, specifically, the concept of Executive Image.

ANA competency two: Leading Others

According to the American Nurses Association (2018), leading others includes the following concepts: communication skills, conflict management, engaging diversity, employee development, and relationship building. Using a Likert scale, 66.7% of reviewers rated the program's curriculum as demonstrating *extremely strong evidence* and 33.3% rated it as having *strong evidence* of building and educating on this set of concepts (see Appendix N). No comments were given for analysis in this section.

ANA competency three: Leading the Organization

According to the American Nurses Association (2018), leading the organization includes the following concepts: business acumen, change management, decision making, influence, problem solving, system thinking, vision and strategy, and project management. Using a Likert scale, 83.3% of reviewers rated the program's curriculum as demonstrating *extremely strong evidence* and 16.7% rated it as having *strong evidence* of building and educating on this set of concepts (see Appendix 0). The two comments from this section "all are extremely strong evidence and well done" and "Overall, I find the curriculum embedded with many requirements reflective of almost all the "leading the organization" competencies (excluding vision and

strategy)." These comments suggest that the program design is good but that it must ensure in the future that leadership practicum experiences highlight how important strategic vision is in guiding leadership priorities.

Key findings

The ADN to MSN accelerated option based on shared curriculum with ADN partner programs was critiqued and found to address the American Association of Nurses (ANA, 2018) leadership competencies framework with a few minor areas noted for improvement. The program was deemed to have an interdisciplinary approach which will be an asset to the program. To move this program development project into practice will require budgetary approval and marketing to ensure program survival. The use of nursing leaders who can provide expertise in the field will add credibility to the practicum courses.

Discussion

There is a market need for nursing leaders. This is highlighted by the opening of 860 positions in the midwestern state where the institution is located for nurses with this educational preparation and a projected growth in the field of 21.9% (Projection Managing Partnership, n.d.). Research on this subject matter shows that the Academic Progression in Nursing (APIN) initiative's four models of seamless academic progression are the most recognized paths within education for matriculation to higher levels of educational preparedness (American Association of College of Nursing [AACN], 2016). Using the APIN models can successfully result in the development of a seamless academic program at a small, mid-western, faith based, liberal arts college. The use of market analysis and surveying stakeholders is a key component in creating a program that is appealing to the target market. Analyzing competitor's programs is one way to

ensure that program development aligns with the essentials set forth by accrediting bodies. The

use of an overarching framework to guide project development through dissemination in a step

wise fashion is critical to program success. Curriculum development must be approached from a

multifaceted view and resource utilization, such as, using existing courses within "the

institution" that fit the program objectives is a good cost savings strategy.

Limitations

Limitations in the project included perceived financial restraints which lead to a

utilization mindset of using available already in existence courses, when developing course

sequencing and course selection. The lack of curriculum development was a limitation that was

overcome through the process of curriculum mapping. The oversight of this project through the

Masters of Science in Nursing subcommittee and the DNP project committee is a fairly

homogeneous group and lacking in diversity, which is common in nursing higher education. The

limited number of reviewers given the large scope of materials to critique and a fairly short

window of review could be viewed as design limitations. The use of a Likert scale, ordinal tool,

and the American Nursing Association leadership competency framework did not lend itself to

inferential statistical analysis.

Implications for the organization

The program was completely developed and vetted internally by members within the

institution, so it is ready for adoption in the nursing curriculum. The program could serve as a

model for additional tracks of nursing at the master's degree level. It has the potential to draw

more students into graduate level education and provides an additional track toward the existing

DNP degree. Given the utilization sequencing approach, it could be profitable for the institution without needing a large enrollment to get started.

Implications for practice change, future research and health policy change

Program development that is intentional in its design has the potential to increase the number of students who are able to enter the nursing workforce. This is a key practice change in a period of time where nurses are in such high demand. Designs that promote seamless matriculation from degree to degree will help nurses gain further levels of nursing education. Higher levels of nursing education have been associated with better patient outcomes, increased quality of patient care, decreased cost and the ability to continue educating future generations into the nursing workforce. Future research and planning at the national level is needed to promote competency-based education that is measurable and can be consistently administered in a variety of educational environments. From a health policy perspective, nursing as a profession, needs to establish internal agreement on the point of entry that is deemed "professional practice." Nursing must continue to be inventive in addressing the concern of growing our workforce to meet the health needs of an aging population.

Contributions to the Profession of Nursing

This program development project demonstrated that seamless education can be created using models from the Academic Progression in Nursing (APIN) initiative. It also illustrated that pairing an accelerated delivery model on top of a shared curriculum model provided associate degree nurses a clear pathway to advance to a master's degree in nursing in as little as three years. Market research projects 22% growth for nurses with leadership skills and degrees. Nursing leaders will need to use their expert and positional power to encourage others in the

profession to value and pursue furthering their own education. The critique of the program

demonstrated strong or very strong evidence of preparing nurses to demonstrate the three

competency areas established by the ANA as leadership competencies.

Recommendation

It is the author's recommendation that the institution consider developing tracks that

allow nurses to cross the nursing education chasm from undergraduate to graduate without a re-

application process for those who meet a minimum established criterion. According to the

American Association of Colleges of Nursing ([AACN], 2019), in the future, the entry into

nursing professional practice will be at the master's degree level rather than the bachelor's level

in response to the increasing complexity of healthcare delivery and growing health needs of our

population (p.16). The AACN recognizes that leadership skills are critical in moving the nursing

profession forward. The institution can be at the forefront of this movement with the

establishment of an ADN to MSN nursing education track built on the accelerated model and

paired with the shared curriculum model at partner community colleges.

Dissemination Plan

This project will be disseminated in the form of a poster presentation at the 2020 Virtual

Indiana Nursing Summit: One Voice, which is hosted by the Indiana Center for Nursing (ICN)

and the Indiana Organization for Nursing Leadership (IONL) which starts on November 2, 2020,

and runs through January 21, 2021. The poster abstract was completed and accepted, the conflict

of interest form was completed, and the conference has given permission for attendees to contact

the author with questions or for a complete list of reference materials.

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Appendix A: Market Comparison

Compare and Contrast Table MSN - administration/ leadership tracks

Programs de-identified (Title of program and format if able to find)	Practicum Hours:	Courses:	Total credits:	Certification:
1 Executive Leadership	Executive leadership 400 hours	Nursing core: Faith and learning seminar 1-4, Integration of scholarship into practice, informatics in healthcare delivery, organizational and systems leadership, interprofessional collaboration in health promotion ADM track: executive leadership 1&2 plus practicum then additional requirements: management thought and application, managerial accounting, healthcare structure and policy, healthcare finance and economics, improving healthcare quality, safety and outcomes, CRJ specified courses 6 hours	41 cr. (26 mon)	ANCC Nurse Executive Certification-NEA-BC
2 Nursing Administration- online	180	Research core (6): Intro to stats or data analysis in nursing research (each 3) and Research (3) Nursing Core (11): Theory (3), Nursing IT (2), Health promotion / injury prevention pop (3) and Concepts Analysis 2: Decision Making (3) Admin. Core (19): nursing administration complex organizations (3), administrative management for nurses (3), financial management for nurses (3), (MGT) managing organizational behavior (3), (MKG) survey of marketing (3), & Practicum of role expectation (4) = 180 hours	36	
3 Nursing Administration online	Hours unknown	Engaging your potential, ethics, organizational diagnostics, leadership formation and strategic talent management, Capstone, Nursing Leadership Practicum, managing projects and QI initiatives, (SLD): Beyond Diversity, leading in times of crisis, Managing conflict through dialog, Followership: the other side of leadership - portfolio deliverable	(2 years) credits unknown	
4 Nursing and Health Systems Leadership- online	360	Stats, Theoretical Frameworks, Research Design and methods, Issues and Policy in HC (2), Ethics, Informatics, Strategic Planning and Marketing, QI and project management, Practicum I and II, Research Project (1), Leadership and Management for nurse executives, Financial Management, Operations of Health Systems- all are (3 credits- unless otherwise listed)	39 - 7 semesters	
5 Nursing Administration-	202	Core courses: nursing research, nursing theory, measurement and data analysis, advanced practice nursing concepts I and II (practicum hours assoc. with) and intro to nursing informatics ADM track: administrative management in nursing, financial management, leadership for advance nursing practice, legal environment of health care, grad level elective (typically in the education track and vice versa), nursing administration practicum (112 hours), nursing study		started program in Fall of 2017 and Yes- through AONE or ANCC
6 Nursing leadership in health systems - online with video conferencing	525	CORE courses: Nursing theory 1, leadership for adv. nursing practice, nursing research methods I, measurement and data analysis, = 12 credits ADM track: informatics for nursing leadership, leadership and organizational behavior, financial, legal and ethical leadership, eco analysis nursing and health systems, seminar in health systems leadership, practicum 1, 2, and 3 = 24 credits and 6 credits of electives	42- 2 years	Apply up to 12 credits from the MSN toward the DNP (4 yrs)
7 Nursing leadership Online	Yes- essentials of advanced nursing practice field	Professional presence and influence, translational research for practice and populations, advanced information management and the application of technology,	4 terms= 2 yrs? no credits	

(only one with 3 P's)	experience, nursing leadership and management field experience and nursing leadership and management capstone- hours unknown	organizational leadership and interprofessional team development, path pharmacology foundations for advance nursing practice, contemporary pharmacotherapeutics, comprehensive health assessment for patients and populations, essentials of advanced nursing practice field experience, policy, politics and global health trends, principles of organizational performance management, principles of healthcare business and financial management, strategic leadership and future delivery models, nursing leadership and management field experience and nursing leadership and management capstone		
8 Nursing leadership	N 638 practicum- hours	Core courses: Roles for advanced practice nursing, evidence based practice, theoretical foundations, population based health and health policy, health care informatics, and nursing leadership **ADM track:** economic policies in nursing and health care, marketing and competitive strategies in nursing and health care, individual and group behavior in nursing and health care organizations, human resources management in nursing and health care, financial management in nursing and health care, business of nursing and nursing leadership and management culminating practicum.	42- 7 semesters	
9 Nursing administration- online	Nursing administration- 245	Evidenced based communication, intro to professional development for adv. practice nursing administration, theoretical foundations for ANP, Ethics and health policy, biostats and epi, utilization of research for EBP, professional role development for the nurse administrator, management of health care delivery systems, nursing leadership and human resources, organizational behavior, innovative strategies for nurse leaders, organization and finance of health care, advanced nursing management, integration of theory into nursing administration practice.	39	
10 Master's in Healthcare Administration- Online	Leadership- hours unknown	Core: advanced nursing practice: emergence, theory, and leadership, research for EBP, leadership for health promotion and disease prevention, inter-personal communication and collaboration, application of ethics in ANP and health policy in the Leadership and education track: Advanced core concepts in health and illness for leadership/education, leadership in measurement and outcomes evaluation, economics and fiscal management for nursing leaders, leadership for excellence in professional development: adult development and learning Immersive courses in leadership and education: leading quality initiative in service and education and leadership practicum	26 months- 33 credits	

Appendix B: Curriculum Comparison of Market Competition

Institutions	MSN essential I- Background for Practices from Science and Humanities (Theory)	MSN essential II- Organizational and Systems Leadership (Org. leadership and Human Resources)	MSN essential III- Quality Improvement and Safety (QI, Safety and Outcomes)	MSN essential IV- Translating and Integrating Scholarship into Practice (Ethics and Research)	MSN essential V- Informatics and Healthcare Technology (Informatics)	MSN essential VI- Health Policy and Advocacy (Health Care Policy)	MSN essential VII- Integrate economics into policy and marketing into leadership or organizational system (Economics and marketing)	MSN essential VIII- Clinical prevention and population health for improving health (Health Promotion and Management skills)	MSN essential IX- Master's level nursing practice (Finance and Leadership)
1	Integration of scholarship and practice	Organizational and systems leadership	Improving health care quality, safety and outcomes	No evidence found	Informatics	Health care structure and policy	Health care finance and economics	Interprofessional collaboration in health promotion; Management thought and application	Managerial accounting, Executive leadership 1&2
2	Theory	Nursing administration complex organizations; managing organizational behavior	Nursing administration complex organizations	Practicum of role expectations; Research; Introduction to stats or data analysis in nursing research	Nursing IT	No evidence found	Survey of marketing	Health promotion/ injury prevention; Concepts and analysis 2: decision making	Administration/ management for nurses; Financial management for nurses
3	No evidence found	Organizational diagnostics; Leadership formation and strategic talent management	Managing projects and QI initiatives	Ethics	No evidence found	Leading in times of crisis; Managing conflict through dialog	No evidence found	Beyond diversity	Engaging your potential and Followership: the other side of leadership; Capstone and nursing leadership practicum hours and portfolio
4	Theoretical Frameworks	Operations of Health Systems	QI and project management	Ethics; Research Design and methods and Research Project; Stats	Informatics	Issues and Policy in HC	Strategic Planning and Marketing	No evidence found	Leadership and Management for nurse executives; Financial Management

5	Nursing theory	Advanced practice nursing concepts I and II (practicum hours associated with)	Measurement and data analysis	Nursing research;	Introduction to nursing informatics	Legal environment of health care	No evidence found	No evidence found	Administrative management in nursing; Leadership for advance nursing practice; Financial management
6	Nursing theory	Leadership and organizational behavior; Eco analysis nursing and health systems	Measurement and data analysis	Financial, legal and ethical leadership; Nursing research methods	Informatics for nursing leadership	Financial, legal and ethical leadership	No evidence found	No evidence found	Leadership for adv. nursing practice; Financial, legal and ethical leadership
7	No evidence found	Organizational leadership and interprofessional team development and principles of organizational performance management	No evidence found	Translational research for practice and populations	Advanced information management and the application of technology	Policy, politics and global health trends	Strategic leadership and future delivery models	No evidence found	Essentials of advanced nursing practice field experience; Principles of healthcare business and financial management
8	Theoretical foundations	Individual and group behavior in nursing and health care organizations; Human resources management in nursing and health care	No evidence found	Evidence based practice	Health care informatics	Economic policies in nursing and health care	Marketing and competitive strategies in nursing and health care	Population based health and health policy	Nursing leadership; Roles for advanced practice nursing; Financial management in nursing; Business of nursing and nursing leadership and management

									culminating practicum.
9	Theoretical foundations for ANP/ integration of theory into nursing administrative practice	Management of health care delivery systems/ organizational behavior; Advanced nursing management; Nursing leadership and human resources	Evidenced based communication	Ethics and health policy; Utilization of research for EBP	No evidence found	Ethics and health policy,	Innovative strategies for nurse leaders	Biostats and epidemiology	Introduction to professional development for adv. practice nursing Administrative professional role development for the nurse administrator; Organization and finance of health care
10	Advanced nursing practice: emergence, theory, and leadership	Leadership for excellence in professional development: adult development	Leadership in measurement and outcomes evaluation/ leading quality initiative in service; inter-personal communication and collaboration	Application of ethics in ANP and health policy in the Leadership; research for EBP	No evidence found	No evidence found	No evidence found	Advanced core concepts in health and illness for leadership/educ ation; Leadership for health promotion and disease prevention	Economics and fiscal management for nursing leaders
11	Historical, philosophical and theoretical foundations of nursing	Systems approach to organizational behavior; Health care delivery systems; Management in a complex environment	Safety, risk reduction and quality care; practice skills for conflict transformation	Translational scholarship for EBP	No evidence found	Application of legal and ethical principles to health care	No evidence found	Knowledge development: epidemiology and informatics	Nursing administration Finance; leadership project

12	Advanced nursing practice: leadership and theoretical frameworks	Health care organizations and systems leadership	No evidence found	Ethics for nurse leaders; adv. apps of research for EBP	No evidence found	Health care policy and issues in practice	No evidence found	Population health and interprofessional collaboration Practicum; teaching and learning strategies in healthcare	Foundations of financial management for nurse leaders; Leadership in health care systems practicum
13	Theoretical concepts and foundation	Care Environment Management / Care Environment Clinical	Outcomes Management/ Clinical Outcomes	Healthcare Ethics; Research/ EPB, Research II	No evidence found	No evidence found	No evidence found	Community	No evidence found

Appendix C: Pre-Emersion into Practice Elements

Pre-Entry Immersion Program Toolkit Elements- added to Moodle orientation page		
PIP minimum components:	Currently in place where and how	Additions needed to orientation module/ intro. course
1.) Learning and Study Strategies (LASSI)	We discuss the 4 learning styles of Kinesthetic, Visual, Auditory and Read/Write in NURS 331 during week 1 "Returning to school syndrome" article review	http://www.educationplanner.org/students/self-assessments/learning-styles.shtml
2.) Time management	Students are asked in week 1 to identify a strategy for success: who is their support system, how are students going to balance work and school and what is their plan for a study space	https://acceleratednursing.utica.edu/blog/7-time-management-tips-for-nursing-students/
		https://www.registerednursern.com/time-management-tips-for-nursing-school-students/ (has a 7 minute video)
		https://www.mindtools.com/pages/article/newHTE_88.htm (Quick fun online time management quiz) could be done as a group from one computer with everyone keeping their own scores)
		(virtual guest speaker) could help and that would serve the double purpose of exposing our students to the resources at the Academic Success Center
3.) Study Skills	Students are asked in week 1 to identify a strategy for success: who is their support system, how are students going to balance work and school and what is their plan for a study space	Using a timer- study technique
		https://www.youtube.com/watch?v=t-9cqaRJMP4&feature=youtu.be
		Active study
		Annotating in 5 easy steps
		Effective reading
		Reading video- speed reading tech.
		memory power for facts and concepts
4.) Test taking techniques	Currently not in orientation - not many tests in the program	Testing anxiety
		https://nursejournal.org/community/master-nclex-style-test-questions/

		https://www.youtube.com/watch?v=t-9cqaRJMP4&feature=youtu.be
5.) Mentoring (this may morph this into resiliency, since they are practicing nurses already)	Currently not addressed	https://www.healthynursehealthynation.org/
		https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5536335/
		http://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-19-2014/No3-Sept-2014/Practicing-Self-Care-for-Nurses.html
6.) Leadership development	Currently housed in CORE 210- Professional Communication: crucial conversations book activities and NURS 449- practicum hours	Will continue to expand into graduate courses and IRB survey on daily application and Professionalism: https://www.nursingworld.org/education-events/career-center/ (resume building) https://today.mims.com/nurses--developing-and-enhancing-professionalism (quality of patient care delivery, lifelong learning, patient confidentiality, teamwork) https://today.mims.com/8-key-qualities-that-make-a-good-nurse- https://today.mims.com/the-secret-to-effective-nursing-communication Ted talks nursing professionalism

Appendix D: Student Interest Survey

Masters in Nursing Administration- interest survey

As you may be aware, I am in my final year of my DNP program and my project is entitled "Seamless academic transitions in nursing: An associates to masters in science of nursing administration track."

I would like to use my current students as a focus group. Please complete the following quick survey to help me collect some base line data.

* Required

Do you have any desire to pursue further nursing education beyond your BSN? *

○ Yes

○ No

Would you have an interest in pursuing a Masters in Nursing Administration? *

○ Yes

○ No

Would you be more likely to do a 3 year plan of study to complete your RN to MSN or a 4 year plan of study? (see further explanation below) *

Would you be more likely to do a 3 year plan of study to complete your RN to MSN or a 4 year plan of study? (see further explanation below) *

○ 3 year

○ 4 year

I am creating a plan where students can stop out after their BSN or continue on (with no reapplication) for 2 more years to complete their MSN- administration. Subsequently, students with a BSN could apply for admission to only the MSN-administration part.... am I on the right track with my design? *

Your answer

Thank you for your participation. Any additional comments for my project? *

Your answer

Submit

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Appendix E: Alumni Interest Survey

Thinking back would you have done an ADN to MSN- nursing administration program? (If it had the option to opt out after the BSN?) *

☐ Yes

☐ No

Would you have gone onto complete your MSN - nursing administration degree (in a seamless ADN- MSN program) if you could do the entire program in 3 years? *

☐ Yes

☐ No

This program is being designed that people could apply to come back and complete the MSN- nursing administration (online) portion over 2 years... would you have an interest in this program? *

☐ Yes

☐ No

Thank you for your participation. Any additional comments for my project? *

Your answer

Appendix F: Program Plan of Study

Department of Nursing			
Associates to Master of Science in Nursing Program - Nursing Administration Track			
PLAN OF STUDY			

Year One (2020-2021)

FALL		SPRING		SUMMER		
N 311 Philosophy and Theories	4	N 280 Intro. Healthcare Stats	4	OLP 309 Leading and Serving in a	3	
August 31, 2020 to Oct. 16, 2020 asynchronous		Jan. 4, 2021 to Feb., 19, 2021 asynchronous		Multicultural World.		
				April 26- June 11 asynchronous		
		PJSC 437 Disparities in Healthcare	4	N 322 Holistic Client Assessment	4	
		Jan 4 to Feb. 19 asynchronous		April 26- June 11 asynchronous		
Core 210 Professional Communication	4	N 433 Research in Nursing	4	N 449 Leadership in Nursing	5	
Oct. 26, 2020 to Dec. 17, 2020 asynchronous &		March 1, 2021 to April 22, 2021 asynchronous		June 14, 2021 to July 30, 2021 asynchronous * practicum hours = 40		
				PJCS 210 Transforming Conflict	3	
N 438 Community Health	5			and Violence		
Oct 26- Dec 17 asynchronous				June 14- July 30 asynchronous		
Total credits	13	Total credits	12	Total credits	15	40
		BSN conferred				
		Matriculation in to MSN- nursing adminsitration track				

Year two (2021-2022)

FALL		SPRING		SUMMER		
Nxxx Healthcare Policy	3	N 602 Theoretical & Conceptual Frameworks	3	N606 Nursing Research	3	
Aug. 31 to Oct 15, 2021 - asychronous		Jan 6, 2022 to Feb 18th - asynchronous		May 2, 2022 to June 17 - ascynchronous		
Nxxx Management of Nursing: Quality & Safety	3	MBA 585 Financial / Managerial Accounting	3	Nxxx Nursing Admin. Practicum 1	3	
Aug 31 st to Dec. 10th- asychronous Practicum hours 1.0= 56 hrs total ~ 8 hours/ week		Feb 23, 2022 to March 30 video conferencing format Wed. nights 6-10 pm		May 2, 2022 to July 29 - asychronous *Practicum hour* s 2= 112 hrs total ~ 16 hours/week		
				Total practicum hours yr = 168		
Total credits	6	Total credits	6	Total credits	6	

Year Three (2022-23)

FALL		SPRING		SUMMER		
MBA 671 Data Analytics for Decision Making	3	MBA 564 Organizational Behavior	3	N604 Promoting Heallth in	3	
Sept. 14, 2022 to Oct 19 video conferencing format Wed. nights 6-10 pm		Jan. 11, 2023 to Feb. 15 video conferencing format Wed. nights 6-10 pm		Vulnerable Populations May 2, 2023 to June 13 video conferencing format Tues. nights 3-7 pm		
Nxxx Nurs Admin. Practicum 2	3	N510 Healthcare Ethics	2	Nxxx Leadership Capstone	3	
Sept 14, 2022 to Dec. 9 - asychronous		Feb. 28, 2023 to March 28 ? asychronous		May 2, 2023 to Aug 4 asychronous		
Practicum hours 2= 112 hrs total ~ 16 hours/week		Nxxx Nurs. Admin. Practicum 3	1	Practicum hours 1.5= 84 hrs total ~ 12 hours/week		
		Jan. 11, 2023 to April 21 asychronous Practicum hours 1.0= 56 hrs total ~ 8 hours/ week				
				Total practicum hours yr = 252		
Total credits	6	Total credits	6		6	18
				Total program credits		76 in total

Appendix G: MSN leadership course descriptions

Nxxx Healthcare Policy: (3)

Examine the roles of the nurse leader in healthcare policy as researcher, change agent, advocate and activist. Examine historical and current healthcare laws and policy, including healthcare reform. The focus is on policy development, analysis and implications on healthcare delivery, nursing practice and patient outcomes.

Nxxx Management of Nursing: Quality and Safety: (3)

Analyzes the social, political, legal, and regulatory factors affecting patient safety. Considers the role of nursing leaders in quality, cost containment, productivity, staffing and staff development. Evaluates resources for implementing a program of services.

Will include 1 cr. hour of practicum/ 2 cr. hour coursework- Focus on integration of quality, safety and policy into capstone project.

N 602- Theoretical & Conceptual Frameworks: (3)

Theories from nursing, family studies, and related disciplines are examined, critiqued, evaluated, and applied to practice. Attention will be given to the transformational potential of theoretical frameworks within the context of a comprehensive, holistic approach to health care.

MBA 585 Financial/ Managerial Accounting: (3)

Managers and executives carry fiduciary responsibility for their organizations; it is therefore imperative that they know how to read financial statements, analyze financial health, assess financial risks, and communicate this knowledge effectively to others. The course emphasizes the role of the manager relating to finance and accounting through the analysis of quantitative information largely at the conceptual level. Topics include financial governance, understanding and reading financial statements, financial statement analysis, cost behavior, break-even analysis, budgeting, balanced scorecard, working capital management, and the use of short-term cash planning. The overall aim is to improve organizational decision-making based on financial, social, and ecological metrics.

N 606 Nursing Research: (3)

Prepares practitioners for utilization of knowledge to provide high-quality health care, initiate change, and improve nursing practice. The focus is the understanding of scientific inquiry, knowledge generation, utilization and dissemination in nursing and healthcare. Scholarly literature review, ethical considerations, and research critique are emphasized.

Nxxx Nursing Administration Practicum 1: (3)

Selection of a capstone project will allow the student to apply nursing research, which will drive the student's capstone project, utilizing managerial skills related to capstone project, and application of a theoretical framework to the capstone project.

Will include 2 cr. hours of practicum and 1 cr. hour of coursework

MBA 671 Data Analytics for Decision Making: (3)

The quality of decision-making in organizations is greatly influenced by the quality of data gathered and by information derived from that data. This course focuses on the use of tools and processes to enhance corporate decision-making strategies. Topics include research design, survey development, defining data and information requirements, how and where data is stored, informatics and business intelligence, critical thinking, and transforming data into meaningful information.

Nxxx Leadership Practicum 2: (3)

Application of a theoretical framework to capstone project and incorporate how, what type and to whom data will be reported during the capstone project. This course serves as a second-year touch point between student, professor and practicum mentor.

Will include 2 cr. hours of practicum and 1 cr. hour of course work

MBA 564 Organizational Behavior: (3)

Utilizing an experiential case study method, this course surveys the evolution of theory, practice, and research in the areas of organizational behavior. Learning topics include motivation theory, group dynamics, leadership, decision-making, conflict transformation, change theory, organization structure, emotional intelligence and communication. This course affirms a systemic perspective and approach to organizational behavior and affirms the concepts implicit in the concept of Leadership for the Common Good.

N510 Healthcare Ethics: (2)

The student is provided with frameworks for ethical decision-making based on theory and opportunities for the development of reflective moral thinking. The student learns to utilize critical thinking as a basis for ethical reasoning. The dynamics of the healthcare professionals' roles are studied in view of pertinent ethical dilemmas. The student is challenged to examine personal and professional values in the context of growing health care disparities impacting the local and world community.

Nxxx Leadership Practicum 3: (1)

Within the context of the student's project, ethical principles will be identified and examined interdisciplinary. Examination of how the project will impact the organization's culture.

Will include 1 cr. hour of practicum

N 604 Promoting Health in Vulnerable Populations: (3)

The focus of this course is health in the community. Content germane to this course includes a process of community assessment, program planning, implementation, and evaluation. Knowledge of basic epidemiology, communicable disease surveillance, survey data and cultural assessment contribute to a thorough knowledge of the community. Attention will be given to issues of social justice for vulnerable populations.

Nxxx Leadership Capstone: (3)

The capstone project is designed with an interdisciplinary viewpoint, and seeks to explore personal and strategic leadership components in diverse healthcare settings to promote positive healthcare outcomes through advanced evidence based collaborative practice. The course emphasizes leadership concepts including communication, ethics, negotiation, advocacy and a caring person-centered practice environment. Information related to living leadership within teams, systems, communities and professional organizations are discussed. With the use of active learning, students will be able to practice problem solving and change techniques in their capstone project. This course will include completion of leadership portfolio and final presentation to the oversite board for final approval of degree conferral.

Will included 1.5 cr. hour of practicum and 1.5 of course work and portfolio presentations.

Appendix H: Curriculum Map

Curriculum Map for the ADN to MSN-leadership program

(I=introduced; R= Reinforced/ Practiced; M=Mastery/ Demonstrated and A= Program Assessment Opportunity)	**ADN to BSN component- AACN Essentials of Baccalaureate Education**									
AACN Essentials: *The Essentials of Baccalaureate Education for Professional Nursing Practice*	N 331	CORE 210	N 280	N 433	CORE 309	PJSC 210	N 332	N 438	PJCS 437	N 449
Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	I, A	I, R	I, R	I, R, A	I, R	I, R, A		I, R, A		I, R, A, M
Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.	I, A						I, R, A	I, R, A	I, R, A	I, R, A, M
Essential III: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	I, A	I, R	I, R, A	I, R, A				I, R, A, M		
Essential IV: Information Management and Application of Patient Care Technology o Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care	I			I, R, A						I, R, A, M
Essential V: Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.	I									I, R, A, M
Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	I	I, R, A				I, R, A		I, R, A		I, R, A, M
Essential VII: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	I		I, R	I, R, A			I, R, A	I, R, A, M	I, R, A, M	
Essential VIII: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	I, A			I, R, A		I, R, A		I, R, A		I, R, A, M
Essential IX: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	I		I, R, A		I, R		I, R, A	I, R, A	I, R, A	I, R, A, M
(I=introduced; R= Reinforced/ Practiced; M=Mastery/ Demonstrated and A= Program Assessment Opportunity)	**BSN to MSN component - AACN Essentials of Master's Education**									

AACN Essentials: *The Essentials of Master's Education in Nursing*	Policy	Quality and Safety	N 602	MBA 585	N 606	Practicum 1	MBA 671	Practicum 2	MBA 564	N 510	Practicum 3	N 604	Leadership Capstone
Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.			I, R, A, M	I, R, A, M	I, R, A, M		I, R, A, M			I, R, A, M		I, R, A, M	
Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.				I, R, A		I, R, A, M	I, R, A, M		I, R, A, M		I, R, A, M		I, R, A, M
Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization				I, R, A	I, R, A	I, R, A, M	I, R, A, M		I, R, A, M				
Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.			I, R, A		I, R, A, M		I, R, A	I, R, A, M	I, R, A	I, R, A			I, R, A, M
Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.						I, R, A	I, R, A, M	I, R, A, M		I, R, A		I, R, A	
Essential VI: Health Policy and Advocacy o Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.						I, R, A, M		I, R, A, M		I, R, A	I, R, A, M		
Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes o Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.				I, R, A	I, R, A	I, R, A, M	I, R, A		I, R, A				
Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.								I, R, A, M			I, R, A, M	I, R, A, M	I, R, A, M
Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into			I, R, A	I, R, A	I, R, A					I, R, A	I, R, A, M		

practice. . Nursing practice interventions include both direct and indirect care components.													

Appendix I: Cross Walk Table

Course Number & Name: N 311 Philosophy and Theories of Nursing
Professor:
Course description: The metaparadigm of nursing is utilized as the organizing framework for exploration of self and nursing. Personal and professional strengths are affirmed and learning and growth needs are identified. The evolution of nursing science, theory, research, and practice are studied. Caring is discussed as a central ethic of nursing practice.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity / Assessment	Content areas
1.) Discuss health, person, environment and nursing as the core concepts of nursing theory and practice.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I:** Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Patient-centered care	Weekly forum posts defining Health, Personhood, the Environment, and Nursing - scaffolding into their own nursing philosophy paper	Metaparadigm of nursing-health, person, environment, nursing
2.) Articulate the Goshen College mission and outcomes.	A life that is CHRIST-CENTERED, which demonstrates a faith that is active and reflective, and responsive to the spiritual needs of self and others	**Essential IX:** Baccalaureate Generalist Nursing Practice to the baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.		Compare and contrast paper exploring the Goshen College Mission, nursing philosophy and outcomes with the student's ideal of a nursing philosophy and values. Students review the Nursing Code of Ethics and Standards of Practice to incorporate into their final philosophy of nursing statement.	Nursing philosophy, theories, code of ethics and standards of practice
3.) Recognize relationships among the humanities, sciences, and nursing theories and their application to nursing practice.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Evidence-based practice	Lecture on Philosophy, Theories and the Metaparadigm how are these concepts different and yet intersecting	Nursing conceptual foundations built upon the humanities, science to build our theories and their application to practice
4.) Describe the concept of holism as	A life of PASSIONATE LEARNING, that provides patient centered care by employing	**Essential VII:** Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and	Patient-centered care	Reflections on writings from Janet Quinn and Dr. Rodger Bulgar on the role of nursing	Holistic Care

it relates to health and illness.	critical thinking, decision-making, psychomotor and interpersonal skills	population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o the baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.		and holistic care, look at the Holistic Care Nursing Association materials and Explore the Bonnie Wesorick test on nursing in the new millennium.	
5.) Identify your own professional and personal goals.	A life that is CHRIST-CENTERED, which demonstrates a faith that is active and reflective, and responsive to the spiritual needs of self and others	**Essential IX:** Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.		Personal and professional goal setting	Professionalism and Goal setting
6.) Evaluate your learning, personal, and relationship style	A life that is CHRIST-CENTERED, which demonstrates a faith that is active and reflective, and responsive to the spiritual needs of self and others	**Essential IX:** Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	Teamwork and Collaboration	Reflection paper on Returning to School Syndrome and how to best prepare to be a successful student, balancing work, life and school.	Self-awareness - returning to school syndrome
7.) Discuss key concepts of nursing in relation to the historical, present, and emerging roles	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice	Evidence-based practice, Safety, Quality Improvement	Watch the history of nursing a discuss trends throughout history which have shaped our profession	Image of nursing development throughout time and Key concepts of nursing in relation to historical, present and emerging roles

within the nursing profession and related issues.		and education of nurses.			
8.) Evaluate the effectiveness of aspects of the health care system.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence based practice and demonstrates skills in nursing patient care technology and information systems that support safe nursing practice AND a life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence and demonstrates leadership for promoting quality care and patient safety and a life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships and integrates healthcare policy for the promotion of quality and safety in practice environments	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. AND **Essential IV**: Information Management and Application of Patient Care Technology o Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care. AND **Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing. AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. AND **Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. AND **Essential V**: Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice. AND **Essential IX**:	Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Research and discussion on nursing issues related to workplace and the nursing profession, students write a final paper on a nursing issue and present to their classmates	Nursing and politics, health care delivery around the world, Nursing education, Legal aspects, Whistle blowing, Collective bargaining, Nursing and technology, Safety and Quality in Nursing, Affordable Care Act, Careers in nursing/advanced practice

		Baccalaureate Generalist Nursing Practice o the baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.			
9.) Apply ethical theories and principles to various clinical situations.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care and a life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence	**Essential I:** Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses. AND **Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Patient-centered care Evidence-based practice	Ethical theories are applied when reviewing the Affordable Care Act and addressing the question: Is healthcare a human right? This is also applied when defining personhood as a part of the metaparadigm.	Intro to ethical principles: Autonomy, Beneficence, Non-maleficence, Justice, Utilitarianism

Course Number & Name: CORE 210 Professional Communication Skills

Professor:

Course description: This course responds to the challenges of professional communication. Students will be producing written papers and an oral presentation, with an emphasis on revision for content, style, and effectiveness. Strategies for accessing and managing information will be discussed.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity / Assessment	Content areas
1.) Evaluate and revise own written papers in order to achieve the goals of writing assignments in the BSN Completion program.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I:** Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Evidence-based practice, Quality Improvement	Target grammar, apostrophe quiz, professional statement-writing assignment, Comma Spice quiz, Sentence Fragments quiz, pronouns quiz, verb tense shift quiz	Focused on the book crucial conversations- interprofessional communication techniques and clarity explored. Strategies for accessing and managing information. Focus on communication in various forms. Critique of content, style and effectiveness of communication are explored.
2.) Demonstrate critical thinking by going beyond what is learned and presenting own perspective on issues.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III:** Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Quality Improvement	Persuasive Speech, reading quiz, crucial conversations forum posts/discussion	
3.) Identify medium best suited for effective communication with colleagues and the public in particular professional situations.	A life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	**Essential VI:** Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Teamwork and Collaboration, Safety	Presenting oneself professionally	
4.) Expand own repertoire of professional written and verbal communication skills.	A life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	**Essential VI:** Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Teamwork and Collaboration, Safety	Giving informative speeches, writing, appearance	

5.) Prepare and deliver presentations.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Quality Improvement	Preparing and delivering presentations	
6.) Demonstrate effective communication principles and strategies when speaking to a group.	A life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	**Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Teamwork and Collaboration, Safety	Forum post assignments	
7.) Evaluate own oral presentation for content, style and effectiveness.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Quality Improvement	Presentation evaluations	
8.) Demonstrate the ability to identify, access, evaluate, and use scholarly resources.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Evidence-based practice, Quality Improvement, Patient-centered Care	Research paper/ Annotated Bibliography/ written communication with a research librarian	
9.) Learn strategies for positive conversations in difficult situations.	A life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	**Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Teamwork and Collaboration, Safety	Readings and quizzes on crucial conversations	

Course Number & Name: NURS 280 Statistics in Research						
Professor:						
Course description: Welcome to Statistics in Research! This course is intended to introduce students to a conceptual understanding of statistical methods and research designs necessary for scientific study. Instruction will involve both descriptive and inferential statistical methods, including graphical representations data, correlation, simple regression, hypothesis testing, t-tests, one-way ANOVA, and non-parametric statistics. Although the focus will be on statistical and research applications in the behavioral sciences, the learning objectives are appropriate and applicable for students studying other physical sciences, nursing, and business.						
Course Objective	**Program Student Learning Outcome**	**AACN BSN Essential**	**AACN MSN Essentials**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity**	**Learning content**
1.) Compute descriptive and inferential statistics	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	**Essential I**: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.	Evidenced-based practice, Safety, Quality Improvement	Freq. Distribution article review, visual data displays, lab- data collection	Introduction to statistical methods and research designs. Students will learn about descriptive and inferential statistics. They will view data in graphic form and learn to do a variety of statistical methods with the data. The focus is on application of statistics to healthcare and patient improvement through research application.
2.) Understand and apply statistical concepts	A life of PASSIONATE LEARNING, that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	**Essential IV**: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. AND **Essential IX**: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding	Evidenced-based practice, Safety, Quality Improvement	Lecture: Central tendency, variability, sampling, probability, normal curve, standardization and z scores, quiz, excel introduction	

			of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.			
3.) Formulate testable research hypotheses	A life of PASSIONATE LEARNING, that provides patient centered care by employing critical thinking, decision-making, psychomotor and interpersonal skills	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	**Essential IV:** Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. AND **Essential IX**: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.	Evidenced-based practice, Safety, Quality Improvement	Hypothesis testing with z tests, confidence intervals, effect size and power- quiz and lab-Minitab basics	
4.) Choose appropriate statistical techniques to answer research questions	A life of PASSIONATE LEARNING, that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	**Essential IV:** Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	Evidenced-based practice, Safety, Quality Improvement	Single sample t- test, pair sample t-test, quiz, lab- t-test and z-test, Independent sample tests, ANOVA (between group) and 2-way ANOVA lab-correlations, non-parametric and chi squared	
5.) Use Excel to analyze data and interpret statistical output	A life of PASSIONATE LEARNING, that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	**Essential IV:** Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	Evidenced-based practice, Safety, Quality Improvement	Excel and min-tab introductions	

Course Number & Name: N 433 Research in Nursing

Professor:

Course description: Basic concepts of nursing research are examined. Students will focus on applying these concepts by locating, reading, critiquing, and utilizing published research reports to make recommendations for evidence-based nursing practice. Nursing research is the primary focus of this course, but use of research from related healthcare fields (i.e., medicine, physical therapy, psychology, sociology, etc.) is also considered when relevant to nursing.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Access CINAHL from the Goshen College library web page and locate specific citations of nursing research reports from refereed journals.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Evidence-based practice, Quality improvement	Reading text assignments and Locating research articles	Introduction to research process
2.) Use the resources of a library in an academic and/or practice setting to obtain research articles from nursing and related healthcare fields.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Evidence-based practice, Quality improvement	In-class examination of research journals	Introduction to use of research in nursing
3.) Differentiate nursing research from research in related disciplines used by nurses in clinical practice.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Evidence-based practice, Quality improvement	Classroom "mini lectures"	Understanding research design, sampling
4.) Summarize key elements of research reports into formats for critique and discussion by professional peers.	A life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	**Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Evidence-based practice, Quality improvement, Teamwork and collaboration	Classroom "mini lectures"	Principles of measurement
5.) Use basic research vocabulary in the critique of	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current	Evidence-based practice, Quality improvement,	Discussion and readings from the text	Overview of data collection

published nursing and related research.	findings for evidence-based practice and a life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	evidence into one's practice. AND **Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Teamwork and collaboration		
6.) Demonstrate recognition and basic understanding of the major types of nursing research, including qualitative, quantitative and mixed methods.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice.	Evidence-based practice, Quality improvement	Web-based search of CINAHL for specific topics of interest	Overview of data analysis Qualitative research - overview
7.) Recognize the purpose and roles of differing types of nursing and related disciplinary field research publication formats including research reports, research/literature reviews, meta-analysis, and their relationship to clinical practice guidelines.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice and a life of COMPASSIONATE PEACEMAKING, that demonstrates skills in using patient care technology and information systems that support safe nursing practice	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. AND **Essential IV**: Information Management and Application of Patient Care Technology o Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care	Evidence-based practice, Quality improvement, Patient-centered care, Safety, Informatics	Journal article "markup"	Critiquing/appraising research for application to practice
8.) Develop a properly stated research question to guide the study of various types of research literature to inform clinical practice in an area of experience or interest.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice and a life of COMPASSIONATE PEACEMAKING, that demonstrates skills in using patient care technology and information systems that support safe nursing practice and provides patient centered care by employing critical thinking, decision-making, psychomotor and interpersonal skills	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. AND **Essential IV**: Information Management and Application of Patient Care Technology o Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care AND **Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	Evidence-based practice, Quality improvement, Patient-centered care, Safety, Informatics	"Mini lab" on sampling, measurement, and data analysis	Review of measurement and data analysis concepts and Using research in practice and quality assurance and Presentation of research findings in nursing
9.) Discuss ethical considerations in research design, conduct, reporting, and use.	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence	**Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Evidence-based practice, Quality improvement, Patient-centered care, Safety	Clinical research utilization paper	Overview of data analysis

| 10.) Critically evaluate internet resources as appropriate or inappropriate for research, professional, and client education. | A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice | **Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. | Evidence-based practice, Quality improvement, Safety | Oral report and presentation on formal paper and Peer evaluation of presentation | Ethical issues in research findings and Presentation of research findings in nursing |

Course Number & Name: CORE 309 Leading and Serving in a Multicultural World					
Professor:					
Course description: A study of cultures, comparative message systems and principles of cross-cultural communication. Students analyze cultural dynamics through projects, films, and simulations. This course is designed as preparation for living in settings unlike one's native home and working with individuals from a variety of cultural backgrounds.					
Course Objective	**Program Student Learning Outcome**	**AACN BSN Essential**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity**	**Course content**
1.) Study the cultural context of communication.	A life of GLOBAL CITIZENSHIP, which demonstrates ability to provide culturally sensitive care.	**Essential IX:** Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	Teamwork and collaboration	Understand one's own cultural background and context, analysis of water in relation to Hofstede's Dimensions of Culture	Cultural Background, understanding culture shock, models of intercultural adjustment, connection between language and culture, understanding differences in verb styles
2.) Analysis of cultural dynamics	A life of GLOBAL CITIZENSHIP, which demonstrates ability to provide culturally sensitive care.	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	Teamwork and collaboration	Participate in 2 cross cultural events and reflect on those experiences	Cross-cultural events, understanding cultural and ethnic identities,
3.) Preparation for intercultural interactions.	A life of GLOBAL CITIZENSHIP, which demonstrates ability to provide culturally sensitive care.	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the	Teamwork and collaboration, safety, patient-centered care	Intercultural group presentations, Watch - my big fat Greek Wedding- intercultural communication, Visiting Nacirema Culture- a cross cultural simulation, cross cultural quiz	Explore a culture or sub-culture, culture value dimension, value orientation patterns

		variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.			
4.) Be in community through use of conversation circle as a way of communication	A life of GLOBAL CITIZENSHIP, which demonstrates ability to provide culturally sensitive care and A life that is CHRIST-CENTERED, which demonstrates a faith that is active and reflective, and responsive to the spiritual needs of self and others.	**Essential IX:** Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. AND **Essential I:** Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Teamwork and collaboration	Reading journals, participation in group discussions within the conversation circle, video: A world of gestures: cultural and non-verbal communications, discussion on why do we hold biases against outgroups?	Conversation circles, the staircase model of intercultural communication

Course Number & Name: PJSC 210 Transforming Conflict and Violence		
Professor:		

Course description: This three-credit hour course will explore topics of conflict, violence, and systems of privilege and power. These topics will be explored at the individual/interpersonal (micro) level, the family and group (mezzo) level, and at the community and societal (macro) level. Students will understand the nature of conflict and the range of approaches for dealing with it. Because helping professionals deal with conflict in all aspects of their work, they need to be knowledgeable of the theories, values, skills, and approaches to conflict resolution. Students will reflect on their own conflict styles, build personal skills and develop the capacity for conflict resolution.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content
1.) Demonstrate knowledge of the theories and values of conflict resolution.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Teamwork and Collaboration	Assessed through quizzes, weekly discussion forum entries, and weekly small group discussion.	Topics of conflict, violence, systems of privilege and power will be explored through a number of lens and levels. Exploration on conflict and its management. Self-reflection on one's own conflict styles and approaches to conflict management.
2.) Describe the four methods of conflict resolution: negotiation, mediation, group facilitation, and advocacy.	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence	**Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Teamwork and Collaboration	Assessed through quizzes.	
3.) Demonstrate beginning skills in negotiation and mediation.	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence	**Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Teamwork and Collaboration	Assessed through discussion questions and exercises from the Barsky textbook	

4.) Examine and assess one's style of responding to interpersonal conflict.	A life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships	**Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	Teamwork and Collaboration	Assessed through completion of the Gilmore and Fraleigh (2004) Style Profile, small group discussions, and the Conflict Style Self Reflection assignment.	
5.) Demonstrate a beginning or expanding understanding of structural violence, privilege, power, and oppression.	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence	**Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Teamwork and Collaboration, Safety	Assessed through quizzes and discussion forum entries	
6.) Demonstrate a beginning or expanding understanding of how systems of privilege work, an understanding of one's position in relation to these systems of privilege, and an understanding of strategies one can use to challenge these systems of privilege and oppression.	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence	**Essential VIII:** Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Teamwork and Collaboration, Safety and Quality Improvement	Assessed through quizzes, discussion forum entries, and Documentary Film assignment.	

Course Number & Name: N 332 Holistic Client Assessment

Professor:

Course description: NURS 332 builds on prior learning and will expand the student's history taking and physical assessment skills across the life span.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning activity	Course content items
1.) Define, understand and appropriately use key assessment terms.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice and a life of SERVANT LEADERSHIP, that demonstrates leadership for promoting quality care and patient safety	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.	Patient-centered care, Safety, Teamwork and Collaboration	Use of Shadow Health virtual learning tool, Lecture, demonstration, video, lab practice, virtual case studies and Implement expanded skills in obtaining subjective and objective data for health assessment	History and Physical Assessment: Thorax and lungs, Abdomen, Cardio- and peripheral vascular
2.) Understand techniques used within each physical assessment skill	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components	Patient-centered care, Safety, Evidence-based practice	Apply holistic assessment skills to client population with whom you work.	Skin, hair, nails and nutrition

		of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.			
3.) Consider ways to incorporate health teaching and health promotion into the exam	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	Patient-centered care, Safety, Evidence-based practice, Quality improvement	Reflect on and be able to verbalize the interrelationship of spiritual health, physiological health, and psychosocial health	Head, neck and Male and female genitalia and Anus, rectum and prostate
4.) conduct comprehensive and focused physical assessments in a systematic fashion	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice and a life of SERVANT LEADERSHIP, that demonstrates leadership for promoting quality care and patient safety	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.	Patient-centered care, Safety	Integrate concepts from the humanities, natural sciences and social sciences in assessing health and illness status	Eyes, ears, nose, mouth and throat and Neurological

5.) Apply knowledge of anatomy and physiology, growth and development, and transcultural considerations to the recognition of normal physical assessment findings as well as possible alterations and health change.	A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice and a life of SERVANT LEADERSHIP, that demonstrates leadership for promoting quality care and patient safety and a life of GLOBAL CITIZENSHIP, which demonstrates ability to provide culturally sensitive care	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.	Patient-centered care, Safety	Demonstrate a commitment to personal and professional growth through reviewing of body systems, history and assessment skills	Breasts and lymphatics and Musculoskeletal

Course Number & Name: N 438 Community Health

Professor:

Course description: Community health nursing applies a synthesis of nursing, social, and public health theories to the assessment and care of aggregates in the community. Practice is collaborative, with a focus on promoting and protecting the health of populations. Community health planning for aggregates or populations is done using a variety of agencies and resources in the community. The public health delivery system is differentiated from the private health care delivery system in its emphasis on social justice.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Advocate for social justice that includes a commitment to the health of vulnerable populations and the elimination of health disparities.	A life that is CHRSIT CENTERED, which demonstrates a faith that is active and reflective, and responsive to the spiritual needs of self and others (AACN BSN Essential #9)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Develop competence for practice with diverse populations (AACN BSN, 2008, Essentials #9, p. 34)	Patient-centered care, Safety, Quality Improvement	Direct patient care clinical experience in a community health environment with focus on aggregate of care and emphasis on vulnerable populations. Forum for week 4 on poverty and homelessness.	Aggregate focus, Historical factors effecting community health
2.) Build upon a base of liberal education, science, social and nursing knowledge with synthesis of knowledge of community health nursing.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care (AACN BSN Essential #1)	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses. Immersion experiences allow students to integrate previous learning and more fully develop roles of the baccalaureate generalist nurse (p. 34)	Evidence-based practice	Aggregate project that requires student to apply theory to nursing practice for the defined aggregate. See Appendix A: Nursing 438 Course Syllabus, Appendix C: Examples of Direct Patient Care Experiences Appendix D: Directives for Clinical Experience	
3.) Utilize evidence-based practice as a basis for health teaching, counseling, screening, outreach, disease outbreak	A life of PASSIONATE LEARNING, that utilizes the ability to think actively and strategically in applying selected	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. Clinical experiences for	Evidence-based practice, Quality Improvement, Safety	Development of health promotion project congruent with assessment findings. Delivery of health promotion project directly with patients /clients within the	Root issues- health care disparities

investigation, referral and follow-up.	research findings for EBP (AACN BSN Essential #3)	students provide population-focused care (p. 35)		community setting. EBP integration with aggregate project.	
4.) Utilize upstream thinking to analyze root causes and plan for primary, secondary and tertiary levels of prevention.	A life of PASSIONATE LEARNING, that provides patient centered care by employing critical thinking, decision-making, psychomotor and interpersonal skills (AACN BSN Essential #7 & 9)	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Health promotion along with disease and injury prevention are important throughout the life span (p.23)	Evidence-based practice, Quality Improvement, Safety	Newspaper article analysis of health care issue. Determine what type of approach is needed. Identify the issue as a primary, secondary, tertiary prevention issue. Reflection on how one's personal faith or life philosophy is connected to this particular public health issue. The clinical health promotion project requires students to identify root causes, utilize upstream thinking, and apply to primary, secondary and tertiary levels of prevention.	Epidemiology, Global community
5.) Utilize the epidemiological method to address health problems at the individual, family, community, and population level.	A life of PASSIONATE LEARNING, that utilizes the ability to think actively and strategically in applying selected research findings for EBP (AACN BSN Essential #3)	**Essential III**: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. A clinical immersion experience provides opportunities for building clinical reasoning, management, and evaluation skills (p. 34).	Patient-centered care, Safety, Quality Improvement	See Appendix A: Nursing 438 Course Syllabus, Appendix C: Examples of Direct Patient Care Experiences, Appendix D: Directives for Clinical Experience	Community assessment
6.) Assume accountability for personal and professional behaviors by modeling the values and articulating the knowledge, skills, and attitudes of the nursing profession (AACN, 2008, p. 28)	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence. (AACN BSN Essential #8)	**Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing. Acquisition of a professional identity (p. 33)	Quality Improvement	Online forum post "In what ways has this course shaped your professional identity?" The clinical experience builds on previous level by adding emphasis of "aggregate as client" as appropriate at the baccalaureate level.	Community planning
7.) Participate in population-focused prevention with attention to effectiveness, efficiency and equity. (9)	A life of SERVANT LEADERSHIP, that demonstrate leadership for promoting quality care and patient safety (AACN BSN Essential #2)	**Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. Clinical immersion class provides opportunity for building clinical reasoning, management, and evaluation skills. (p.34)	Patient-centered care, Safety, Quality Improvement	Aggregate project evaluating personal effectiveness in the community setting, evaluation of effectiveness of patient interaction, evaluation of project impact	Health education

8.) Collaborates with clients and the interdisciplinary health team in achieving mutually defined goals for communities and populations.	Communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships (AACN BSN Essential #6)	**Essential VI:** Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. Apply professional communication strategies to client and interprofessional interactions. (p. 33)	Patient-centered care	Vet the health promotion project with the team and document collaboratory approach prior to implementation to the aggregate. Application of Sears' (2006) principles of nonviolent communication in clinical health promotion and aggregate project presentation.	Policy and legislation: School health, occupational health,
9.) Advocate for social justice that includes a commitment to the health of vulnerable populations and the elimination of health disparities.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care- identify systems issues (p.35)	Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement	View Ted talk "What makes us sick? Look upstream" by Dr. Rishi Manchanda and then reflection paper on how the environment impacts health. Poverty and homelessness video and reflection.	Cultural diversity
10). Utilize community education models to address issues of health promotion and disease prevention.	A life of GLOBAL CITIZENSHIP, that practices health promotion and disease prevention to improve health for communities and populations (AACN BSN Essential # 7)	**Essential VII**: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. Preparation for practice in complex, changing healthcare environments (p.36)	Teamwork and collaboration, Safety, Evidence-based practice	Translation of Nursing Process from an individual model to a community model. Final aggregate report: objective epidemiological data, subjective data. community diagnosis, three aggregate interventions, one of which focuses on health promotion- through health education or literacy and lastly, evaluation.	Environmental factors, Domestic/ Family Violence in the Community, Health care reform impact on community health

Course Number & Name: NURS 449 Leadership in Nursing

Professor:

Course description: Leadership and management principles are applied to clinical practice. Clinical practice component of the course will be arranged with each student.

Course Design and Methods

This nursing course is designed to further develop leadership skills in the management of health and illness care resources within a theoretical framework that guides one's practice. In this era of changes in the health care system, management of client care incurs multiple and complex challenges. In their practice settings, nurses also encounter opportunities to implement creative changes in care delivery. This climate of change requires the individual nurse to assume various formal and informal leadership roles.

The nurse leader with a reliable theoretical framework contributes to, and draws energy from, a professional practice environment. A professional workplace is viewed as achievable, exciting, and crucial to the recipients of nursing care as well as to nurses themselves. Nurses exercise leadership and management skills although not all have, or desire, formal management positions. Therefore, while this course will deal with management theory, the primary focus will be on achieving, and working within, professional practice environments whether or not one is in a formal role as manager.

The clinical project planned and implemented by the student, targets one or more of the learning outcomes for this course. Students exercise the qualities of effective leadership in clinical nursing practice, functioning as change agents. This experience is designed to give students the opportunity to implement a change that will improve an assessed problem or explore a new opportunity thereby enhancing the practice environment and improving patient care.

Course Objective	Program Student Learning Outcome	AACN BSN Essential	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Apply a synthesis of knowledge from the natural and social sciences, humanities, and nursing theories as a framework for delivery of client-focused nursing care.	A life of PASSIONATE LEARNING, that utilizes knowledge from the arts and humanities, theology, natural and social sciences, nursing theories and intercultural experiences in providing nursing care	**Essential I**: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	Patient-centered care, Safety	Class input and discussion	Leading and managing
2.) Reflect an understanding of organizational culture and apply selected management principles within that culture.	A life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence and demonstrates	**Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. AND **Essential VIII:** Professionalism and	Teamwork and collaboration, Safety	Analysis of clinical scenarios	Organizational design

	leadership for promoting quality care and patient safety	Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.			
3.) Interpret the current and emerging role of the professional nurse in influencing change through cultural, social, organizational, and political systems.	a life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence and demonstrates leadership for promoting quality care and patient safety	**Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. AND **Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing. AND **Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement	Group problem solving	Organizational change
4.) Assume empowering leadership in complex interpersonal situations.	a life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence and demonstrates leadership for promoting quality care and patient safety	**Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. AND **Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	Teamwork and collaboration, Safety	Individual workbook activities and self-directed inquiry	Resource management:
5.) Demonstrate role-appropriate leadership behaviors based on a theoretical framework.	a life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence and demonstrates leadership for promoting quality care and patient safety	**Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.	Teamwork and collaboration, Safety	Clinical project: planning, organizing, directing, controlling	Financial
6.) Demonstrate knowledge and skills to provide basic leadership for promoting and improving quality care and patient safety.	a life of SERVANT LEADERSHIP, that demonstrates professional values that foster the ability to resolve conflicts, examine ethical issues, promote accountability, and pursue practice excellence and demonstrates leadership for promoting quality care and patient safety and a life of PASSIONATE LEARNING, that demonstrates skills in using	**Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. AND **Essential VIII**: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are	Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality	Collaboration with preceptors	Information

	patient technology and information systems that support safe nursing practice	fundamental to the discipline of nursing. AND **Essential IV:** Information Management and Application of Patient Care Technology o Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care	improvement Informatics		
7.) Participate with multidisciplinary teams in improving direct care for groups of clients.	a life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships and integrates healthcare policy for the promotion of quality and safety in practice environments	**Essential V:** Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice. AND **Essential VI:** Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. AND **Essential IX:** Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	Teamwork and collaboration, Safety	Paper trail of weekly reports (memos/logs)	Human, teams
8.) Think critically and participate actively in discussion of selected client care issues, nursing leadership, and health care planning.	a life of COMPASSIONATE PEACEMAKING, that communicates and collaborates with clients and the interdisciplinary team in providing comprehensive health services and the promotion of therapeutic nurse-patient relationships and integrates healthcare policy for the promotion of quality and safety in practice environments	**Essential V**: Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice. AND **Essential VI**: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. AND **Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the	Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement	Short papers on: Change process, theoretical frameworks, organizational environment and culture, executive summary (oral report), final report of clinical project hours	How to conduct meetings, time management, delegation, political power, conflict management, performance appraisal, staff motivation, productivity, quality improvement, legal issues, impaired staff, disaster preparedness

		lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.			

Course Number & Name: PJSC 437 Disparities in Healthcare					
Professor:					
Course description: Health, illness, and various health care systems are explored. Theory relative to culture and specific populations will be studied. In this course, we will approach disparities in health care from a medical anthropology perspective. Because each human is steeped within one or more cultures, it is vital that, as nurses, we consider the intersection of specific cultures and health. At times, our conversations will broadly consider general health issues within the context of a specific culture, while at other times we will focus more intensely on the disparity piece. In addition, throughout the course we will be following one story of a family and their culture—and the health care crisis that ensued.					
Course Objective	**Program Student Learning Outcome**	**AACN BSN Essential**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity**	**Course content items**
1.) Describe diverse cultures, demonstrating cultural knowledge, awareness, and respect.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care- identify systems issues (p.35)	Patient-centered care	Class discussion	Cross-cultural approaches to health care provider awareness
2.) Compare and contrast different cultural orientations to health and healing, illness and well-being.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9) and A life of SERVANT LEADERSHIP, that demonstrate leadership for promoting quality care and patient safety (AACN BSN Essential #2)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care- identify systems issues (p.35) AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. Clinical immersion class provides opportunity for building	Patient-centered care, Safety	Weekly assignments (typed papers)	Cultural assessment, data collection

		clinical reasoning, management, and evaluation skills. (p.34)			
3.) Discuss the implications of a cross-cultural orientation relative to health and illness.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care- identify systems issues (p.35)	Patient-centered care, Safety	Ethnographic report (paper and oral report)	Ethnographic interviewing
4.) Describe the role of culture and historical context in shaping health care practices, belief systems, and access to care.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care- identify systems issues (p.35)	Patient-centered care, Quality improvement	Report on religious influences on culture (paper)	Issues in health care
5.) Describe specific health beliefs and practices of several different cultural groups.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care- identify systems issues (p.35)	Patient-centered care, Quality improvement, Safety	Book report (written)	Traditional views of health and illness:
6.) Connect historical context to differing levels of access to health care, and demonstrate appropriate skills that help nurses address patient needs in the face of such impact.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9) and A life of SERVANT LEADERSHIP, that demonstrate leadership for promoting quality care and patient safety (AACN BSN Essential #2)	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care-	Patient-centered care, Quality improvement, Safety, Teamwork and collaboration	Class discussion and Weekly assignments (typed papers)	Native Americans, African Americans, Hispanic Americans, Asian Americans, Amish, Specific age groups

		identify systems issues (p.35) AND **Essential II**: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. Clinical immersion class provides opportunity for building clinical reasoning, management, and evaluation skills. (p.34)			
7.) Recommend care plans specific to cultural groups and related issues.	A life of COMPASSIONATE PEACEMAKING, that demonstrates ability to provide culturally sensitive care (AACN BSN Essential #9) A life of PASSIONATE LEARNING that utilizes the ability to think actively and strategically in applying selected research findings for evidence-based practice	**Essential IX**: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. Integrate learning and role development, as a manager of care-identify systems issues (p.35) AND **Essential VII:** Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	Patient-centered care, Quality improvement, Safety, Teamwork and collaboration, Evidence Based Practice	Class discussion and Weekly assignments (typed papers)	Universal Statements about human beings, Culturally relevant healthcare, Competent healthcare workers and Refugee healthcare

Course Number & Name: Nxxx Healthcare Policy	
Professor:	

Course Description: Examine the roles of the nurse leader in healthcare policy as researcher, change agent, advocate and activist. Examine historical and current healthcare laws and policy, including healthcare reform. The focus is on policy development, analysis and implications on healthcare delivery, nursing practice and patient outcomes.

Course Objective	Program Student Learning Outcome	AACN MSN Essentials	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1. Describe the roles of a nurse leader in relationship to healthcare policy, institutionally and at the state and national levels.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within	Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization III-7, Essential VI: Health Policy and Advocacy o Recognizes that the master's-prepared nurse is able to intervene at the system level through	1,2		Patient-centered care, Safety, Quality Improvement	Student will attend a professional organization meeting and a state agency wide committee or task force meeting. Was nursing represented? What could nursing contribute to the discussion that was missing as health care issues were being discussed? III-7, VI-2, 4, VII-3	healthcare law, policy, reform, nursing's role as change agent, advocate, and activist in policy development, examination of the various components of healthcare in the U.S., role of ethics in health care policy, analysis of at-risk populations and how policy impacts the care, microsystem policy analysis,

	nursing. • Assimilation of knowledge in providing health education and health promotion activities.	the policy development process and to employ advocacy strategies to influence health and health care. VI-2, 4, Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes o Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.VII-3				nursing education related to policy implementation
2. Explore the historical and current healthcare laws related to healthcare policy and reform.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within	Essential VI: Health Policy and Advocacy o Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.	1,2	Patient-centered care, Safety, Quality Improvement	Lecture and group discussion. - Students have previously watched sick around the world to see that healthcare is administered differently in a global context this is a deeper dive into the US health care system. (Medicare, Medicaid, CHIP, VA benefits -TRICARE, ACA, private insurance) https://www.commonwealthfund.org/international-health-policy-center/system-features/how-does-universal-health-coverage-work	

	nursing. • Assimilation of knowledge in providing health education and health promotion activities.					
3. Integrate ethical decision-making in the professional role of nursing leader as it relates to policy implementation.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within nursing. • Assimilation of knowledge in providing health education and health promotion activities.	Essential VI: Health Policy and Advocacy o Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.	1,2		Patient-centered care, Safety, Quality Improvement	Discuss with your unit manager, manager of education, the head of your ethics committee or Chief Nursing Officer (pick 3) - to discuss integrating ethical decision-making into the professional role of a nursing leader. How have they witness ethical principles be applied to policy in the institution?
4. Examine strategies for	A life of Servant	Essential VI: Health Policy and Advocacy	1,2		Patient-centered care,	Follow up on policy from N449, did your selected bill make it into law? Contact the bill writer or your own representative

policy development, analysis and implications on healthcare delivery.	Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within nursing. • Assimilation of knowledge in providing health education and health promotion activities.	o Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.		Safety, Quality Improvement	(house or senate depending on the bill's place of origination) to discuss: strategies for healthcare policy development, and what the ramification are of the bill either passing or not passing on healthcare delivery.	
5. Analyze the legislative process in relation to a select issue.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and	Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	1,2	Patient-centered care, Safety, Quality Improvement	Analyze the potential risks of your target cohort population, how can policy be used to advocate for them? Are there existing policies? IV-7, 9 and VIII 2	

	community. • Promotion of policy development related to the emerging roles within nursing. • Assimilation of knowledge in providing health education and health promotion activities.	IV-7, 9 and Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. VIII 2				
6. Integrate a commitment to policy development as a nurse leader advocating for persons in marginalized or at-risk groups.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within	Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. IV-7, 9 and Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared	1,2		Patient-centered care, Safety, Quality Improvement, Teamwork and Collaboration	Are the frontline care givers knowledgeable and up to date on the policy? Does your microsystem (unit) follow this policy, or could it be integrated into care in a new or improved manner? IV-7, 9 and VIII 2	

| nursing. • Assimilation of knowledge in providing health education and health promotion activities. | nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. VIII 2 | | | | |

Course number and name: Nxxx Nursing leadership: Quality and Safety	
Professor:	

Course Description: Analyze the social, political, legal, and regulatory factors affecting patient care quality and safety. Consider the role of the nursing leader in quality, cost containment, productivity, staffing and staff development. Evaluates resources for implementing a program of services.
Will include 1 cr. hour of practicum/ 2 cr. hour coursework- Focus on integration of quality and safety into capstone the project.

Course Objective	Program Student Learning Outcome	AACN MSN Essentials	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Analyzing the social, political, legal, and regulatory factors affecting patient quality and safety.	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness	Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to	1,2	**Evidence-based practice, Teamwork and collaboration, Safety, Quality improvement, Informatics,**	The student will have a patient population of interest and create a paper examining how current social, political, legal and regulatory factors affect patient care quality and safety. Is there appropriate oversight, too much too little, what barriers exist –	Role of the nursing leader in quality, cost containment, productivity, staffing and staff development. Evaluates resources for implementing a program of services. Policy and regulation factors affecting patient care,

| | status.
• Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care.
• Utilization of the research process for addressing clinical problems. A life of Servant Leadership, based on

• Promotion of policy development related to the emerging roles within nursing. A life of Compassionate Peacemaking with
• Contribution to health outcomes through advocacy within the profession, interdisciplinary healthcare team, and the care of individuals, families and communities. | apply quality principles within an organization | | **Patient-centered care** | legally or from a regulatory perspective? III | quality and safety. Microsystem analysis using quality improvement tools. Quality improvement models. Clinical costs and outcomes related to safety, efficiency, effectiveness, quality and patient centered care. Healthcare bundles and evidence-based practice. |
| 2.) Apply tools used by nursing leaders in ensuring quality patient care delivery related to staffing and productivity. | A life of Servant Leadership, based on
• A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. | Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization III2 Essential II: Organizational and | 1,2,3 | Teamwork and Collaboration, Safety, Patient-centered care | The student will conduct a microsystem analysis using the quality improvement process (5 P's- profile, prioritization, problem analysis, problem solving, planning). How does your microsystem interface with the larger institution? II3, III2 Model such as CQI, TQM, PDCA, six sigma and balanced scorecards and KPI's – key performance | |

		Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. II3			indicators will be discussed. There tools of process flowcharts, brainstorming, affinity charts, relationship diagrams, cause and affect diagrams, decision matrices and tree diagrams will be examined.	
3.) Evaluate different models for staff development and engagement.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.		1,2,3	Teamwork and Collaboration	Access your microsystems resources (unit level) including human and physical resources- perform a gap analysis, prioritize needs, communicate needs to mentor for guidance on dissemination to appropriate stakeholders. II-4, III-1,3,4,7, 10	
4.) Gain understanding of various quality metrics reporting entities and their mission/purpose related to the Institute for Healthcare Improvement triple aim.	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems. A life of	Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization III2 Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. II3	1,2	Safety, Quality Improvement, Informatics, Patient centered care, Evidence based practice	The student will work with a variety of members of the interdisciplinary team to identify clinical and cost outcomes and their relationship to clinical/ patient outcomes that improve safety, effectiveness, efficiency, quality and patient-centered care. II3, III2 In class use of https://qsen.org/student-resources/ (interdisciplinary CQI course elements), CMS quality initiatives, APHA – American public health association QI and Nurse-sensitive indicators and AHRQ – Agency for Healthcare Research Quality	

	Servant Leadership, based on ⬩ Promotion of policy development related to the emerging roles within nursing. A life of Compassionate Peacemaking with ⬩ Contribution to health outcomes through advocacy within the profession, interdisciplinary healthcare team, and the care of individuals, families and communities.					
5.) Examine how healthcare quality bundles have developed and pick one to evaluate.	A life of Passionate Learning, through ⬩ Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. ⬩ Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care.				The student should work with the quality department to further examine regulatory bodies and what is reported to whom. Pick one bundle related to your cohort population care, research the origins of the bundle and how is your unit performing in meeting the bundle objectives? Who does the reporting for your unit and how frequently, and to whom? IV- 7, 9, VIII 2	
6.) Evaluates resources for implementing a program of services.	A life of Servant Leadership, based on ⬩ Assimilation of knowledge in providing health education and	Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods,	1,2,3	Teamwork and collaboration, Safety, Quality Improvement	Based on your need's assessment, identify one area of improvement, begin a general search- do programs already exist to meet this need (how many can you find and	

	health promotion activities. A life of Compassionate Peacemaking which • Applies information and communication technologies and resources in evidence-based care and health education.	tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization			compare/ contrast) or do you need to work with a team to create a new one (roughly what would you need in a plan for success?) III	
7. Obtain 56 practicum hours focused on quality and safety in healthcare delivery.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization		2	Solidify your cohort of interest and apply quality and safety knowledge, metrics and tools to understanding of a need's assessment. (practicum development, foundation for literature review and data analytics)	

Course Number & Name: NURS602 Theoretical & Conceptual Foundation						
Professor:						
Course description: Theories from nursing, family studies, and related disciplines are examined, critiqued, evaluated, and applied to practice. Attention will be given to the transformational potential of theoretical frameworks within the context of a comprehensive, holistic approach to healthcare.						
Course Objective	**Program Student Learning Outcome**	**AACN MSN Essential**	**AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity (i.e. guest speakers, library orientation, etc.)**	**Course content items**
1.) Explore the philosophical foundations for nursing and family theory.	A life of PASSIONATE LEARNING, through utilization of knowledge from nursing, natural and social sciences, and the arts in management of patient health/illness status	Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.	2	Patient-centered care	Develop a professional poster for presenting to a select audience, Written personal perspective of nursing care	Overview of Theory in Nursing: development, theory classification, fundamental ways of knowing
2.) Identify the role of theory as a basis for practice and research.	A life of PASSIONATE LEARNING, through development of a foundation for doctoral study in nursing	IV. 1. Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient aggregates.	1	Evidence-based practice and Quality Improvement		
3.) Compare and contrast the nursing metaparadigm, grand theory, and middle range theory.	A life of PASSIONATE LEARNING, through utilization of knowledge from nursing, natural and social sciences, and the arts	Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics,	2	Patient-centered care	Nursing theorist exploration	Concepts defined

	in management of patient health/illness status	public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.				
4.) Compare and contrast nursing and family conceptual models.	A life of PASSIONATE LEARNING, through utilization of knowledge from nursing, natural and social sciences, and the arts in management of patient health/illness status	Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.	1, 2	Patient-centered care, Evidence-based practice, Quality Improvement	Creation of a Genogram & Ecomap	Family theory, theory as practice, levels of abstraction, learning theories
5.) Explore theories as foundation for providing care to family units.	A life of SERVANT LEADERHIPS, based on assimilation of knowledge and principles of teaching/learning in providing health education and health promotion activities.	IX. 11. Apply theories and evidence-based knowledge in leading, as appropriate, the healthcare team to design, coordinate, and evaluate the delivery of care.	1	Patient-centered care	CFIM (Calgary Family Intervention Model/ Family Interviewing	Theory analysis and evaluation
6.) Identify the contributions of related theories for nursing practice and research.	A life of SERVANT LEADERSHIP, based on a synthesis of knowledge into a personal leadership style that contributes to health for individual, family, and community.	IX. 12. Apply learning, and teaching principles to the design, implementation, and evaluation of health education programs for individuals or groups in a variety of settings.	1,2,3	**Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	Develop a professional presentation and formal paper on a selected nursing-related theorist.	

Course Number & Name: MBA 585 Financial and Managerial Accounting						
Professor:						
Course description: Managers and executives carry fiduciary responsibilities for their organizations; it is therefore imperative that they know how to read financial statements, analyze financial health, assess financial risk, and communicate this knowledge effectively to others. The course emphasizes the role of the manager relating to finance and accounting through the analysis of quantitative information largely at the conceptual level. Topics include financial governance, understanding and reading financial statements, financial statement analysis, cost behavior, breakeven analysis, budgeting, balanced scorecard, working capital management, and the use of short-term cash planning. The overall aim is to improve organizational decision-making based on financial, social and ecological metrics.						
Course Objective	**Program Student Learning Outcome**	**AACN MSN Essentials**	**AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity**	**Course content items**
1.) Apply financial and managerial accounting concepts and tools to real-world scenarios	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision	Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings. Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective	1	Patient-centered care, Teamwork and collaboration, Safety, Quality Improvement, Informatics	Case-studies, review of concepts, class discussion	Topics include financial governance, understanding and reading financial statements, financial statement analysis, cost behavior, breakeven analysis, budgeting, balanced scorecard, working capital management, and the use of short-term cash planning

	of high-quality health care.	working relationships, and a systems-perspective.				
2.) Analyze financial information and identify opportunities for improving organizational performance	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care.	Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings. Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.	1,2,3		Patient-centered care, Teamwork and collaboration, Safety, Quality Improvement, Informatics	Reviewing budgets and financial documents, group discussion, lecture
3.) Understand what decision-useful information may be missing from financial statements and reports	A life of Passionate Learning, through •Utilization of the research process for addressing clinical problems.	Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.	1,2,3		Patient-centered care, Teamwork and collaboration, Safety, Quality Improvement, Informatics, Evidence-based practice	Group critique of financial reports, critical thinking exercise- what data or information is missing to make informed decisions
4.) Effectively communicate accounting and financial information to managers, colleagues, and other stakeholder groups	A life of Servant Leadership, based on· A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. · Promotion of policy development related to the emerging roles within nursing.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be	1,2,3		Teamwork and collaboration	Group presentations and critique, lecture

		articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization. Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes o Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.				
5.) Identify and articulate how personal values and ethical considerations inform and impact their business decisions	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential I: Background for Practice from Sciences and Humanities o Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings. Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.	1,2,3		Safety, Quality Improvement, Patient-centered care	Case-studies, review of concepts, class discussion, reflection paper	

Course Number & Name: NURS606 Research I						
Professor:						
Course description: This course prepares the primary care practitioner for the utilization of knowledge to provide high quality health care, initiate change, and improve nursing practice. The focus is the understanding of scientific inquiry, knowledge generation, utilization and dissemination in nursing and healthcare. Scholarly literature review, ethical considerations and research critique are emphasized.						
Course Objective	**Program Student Learning Outcome**	**AACN MSN Essential**	**AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity (i.e. guest speakers, library orientation, etc.)**	**Course content items**
1.) Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient aggregates.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management for health outcomes, and provision of high-quality health care.	IV.1 Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient aggregates.	1	Patient-centered care, Evidence-based practice, Quality Improvement, Teamwork and collaboration, safety	If possible, research MD and/or research nurse from Cancer Center	EBP and type of research, research problems and purpose, review of literature, frameworks
2.) Utilize information systems to execute functions related to literature review, data analysis, and data retrieval.	A life of COMPASSIONATE PEACEMAKING, which applies information and communication technologies and resources in evidence-based care and health education.	III.1 Analyze information about quality initiatives recognizing the contributions of individuals and inter-professional healthcare teams to improve health outcomes across the continuum of care. IV.3 Articulate to a variety of audiences the evidence-base for practice decisions, including the	1	Evidence-based practice, Patient-centered care	Extensive library orientation on information systems, Cochrane, research searches, group article critique, creation of clinical question for	Quantitative research-objectives, questions, variable, and hypothesis

		credibility of sources of information and the relevance to the practice problem confronted. IV. 6 Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice.				literature review project
3.) Utilize effective written and oral communication to plan and conduct an evidence-based practice project.	A life of COMPASSIONATE PEACEMAKING, which applies information and communication technologies and resources in evidence-based care and health education.	V.2 Evaluate outcome data using current communication technologies, information systems, and statistical principles to develop strategies to reduce risks and improve health outcomes. V.5 Use information and communication technologies, resources, and principles of learning to teach patients and others. III. 5 Promote a professional environment that includes accountability and high-level communication skills when involved in peer review, advocacy for patients and families, reporting of errors, and professional writing. VII. 4 Use effective communication strategies to develop, participate, and lead interprofessional teams and partnerships.	1,2,3	Evidence-based practice, Patient-centered care, Teamwork and collaboration	Qualitative article discussion, group work on final lit. review and synthesis	Qualitative research- design and methods,
4.) Critically evaluate research.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management for health outcomes, and provision of high-quality health care.	IV.6 Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice. VI.4 Interpret research, bringing the nursing perspective, for policy makers and stakeholders. IX. 2 Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice. IX. 9 Apply advanced knowledge of the effects of global environmental, individual and population characteristics to the design, implementation, and evaluation of care.	1	Evidence based practice, informatics, Quality Improvement	Synthesizing own literature review, Mock Stetler Model exercise	Differences in systematic review, meta-analysis and meta-synthesis
5.) Interpret statistical results.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of	IV.1 Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health	1	Evidence-based practice	Quiz, group work on literature review grids	Describe variable, examine relationships, predictions,

	nursing practice, management for health outcomes, and provision of high-quality health care.	outcomes for patient aggregates. IV. 6 Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice. VI. 4 Interpret research, bringing the nursing perspective, for policy makers and stakeholders.				determine differences
6.) Build on prior knowledge of nursing research process, design, and methodologies to investigate clinical problems within the practice setting.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management for health outcomes, and provision of high-quality health care.	IV.1 Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient aggregates. I. 5 Synthesize evidence for practice to determine appropriate application of interventions across diverse populations.	1,3		Patient-centered care, Evidence-based practice, Quality Improvement, Teamwork and collaboration, safety	Final project	
7.) Analyze and critique a body of literature in student's area of practice expertise.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management for health outcomes, and provision of high-quality health care.	IV.3 Articulate to a variety of audiences the evidence-base for practice decisions, including the credibility of sources of information and the relevance to the practice problem confronted. IV. 6 Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice.	1		Evidence-based practice	Final project	How results are interpreted
8.) Advocate for ethical conduct of research and translational scholarship.	A life that is CHRIST-CENTERED with an understanding of ethical and moral issues to expand the advocacy role of the APRN or the Nursing Leader.	IV.2 Advocate for the ethical conduct of research and translational scholarship (with particular attention to the protection of the patient as a research participant).	1		Evidence-based practice		Protection of Human Rights

Course Number & Name: Nxxx Nursing leadership practicum I						
Professor:						
Course Description: Selection of a capstone project will allow the student to apply nursing research, which will drive the student's capstone project, utilizing managerial skills related to capstone project, and application of a theoretical framework to the capstone project. Will include 2 cr. hours of practicum and 1 cr. hour of coursework						
Course Objective	**Program Student Learning Outcome**	**AACN MSN Essentials**	**AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity**	**Course content items**
1.) Analyzing the social, political, legal, and regulatory factors affecting patient quality and safety.	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	Essential V: Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.	1	Evidence-based practice, Safety, Quality Improvement, Informatics	Using the student's project as a guide, write a paper discussing how social, political, legal and regulatory factors might be impacting the quality and safety of patients in the project. This is a needs assessment.	Use of research skills and analysis of social, political, legal and regulatory effects on healthcare

2.) Apply tools used by nursing leaders in ensuring quality patient care delivery related to staffing and productivity.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within nursing. AND A life of GLOBAL CITIZENSHIP with taking initiative in providing culturally sensitive care, and assimilation knowledge of conflict transformation and social justice knowledge that is responsive to diverse needs of the individual, family, and community.	Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. Essential V: Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice. 1,2,3		Patient-centered care, Safety, Teamwork and collaboration	Class project: transformational leadership- skills identification and growth plan (ANA leadership skills under Leading others and the organization will be explored)- Identify what type of leadership the student aspires to.	ANA leadership skills and competencies
3.) Evaluate different models for staff development and engagement.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within nursing. AND A life of GLOBAL CITIZENSHIP with taking initiative in providing culturally sensitive care, and assimilation knowledge of conflict transformation and social justice knowledge that is responsive to diverse needs of the individual, family, and community.	Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. 1,2,3		Teamwork and collaboration	Create a plan for staff engagement around student's project. Student's will share plan with the class and receive peer critique.	Communication
4.) Gain understanding of various quality metrics reporting entities and their mission/purpose related to the Institute for Healthcare Improvement triple aim.	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems. A life of Servant Leadership, based on	Essential III: Scholarship for Evidence Based Practice o Professional nursing practice is grounded in the translation of current evidence into one's practice. Essential VII: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice. 1,2		Safety, Informatics, Quality Improvement	Spend time with quality and safety department, understanding reporting structures, reimbursement, and do IHI modules	Quality and safety-reporting and reimbursement, Institute for Healthcare Improvement

	• Promotion of policy development related to the emerging roles within nursing. A life of Compassionate Peacemaking with • Contribution to health outcomes through advocacy within the profession, interdisciplinary healthcare team, and the care of individuals, families and communities.					
5.) Examine how healthcare quality bundles have developed and pick one to evaluate.	A life of COMPASSIONATE PEACEMAKING, which applies information and communication technologies and resources in evidence-based care and health education.		1,2,3	Quality Improvement, Evidence-based practice, Patient-centered care, Safety	Students will identify a healthcare bundle used in their project and examine data and trends. Student's will present historical data, baseline data and goal data related to their project.	Healthcare quality improvement bundles and Data analytics
6.) Evaluates resources for implementing a program of services.	A life of COMPASSIONATE PEACEMAKING, which applies information and communication technologies and resources in evidence-based care and health education. AND A life of GLOBAL CITIZENSHIP with assimilating knowledge of conflict transformations and social justice issues that are responsive to diverse needs of the individual, family and community.	Essential VII: Clinical Prevention and Population Health o Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	1,2,3	Teamwork and collaboration	The student will determine what intervention may be needed and will create a portfolio of resources to guide them through implementation.	Resource utilization
7. Obtain 56 practicum hours focused on quality and safety in healthcare delivery.	A life of PASSIONATE LEARNING, through development of a foundation for doctoral studies.					

Course Number & Name: MBA 671 Data Analytics for Decision Making		
Professor:		
Course description: The quality of decision-making in organizations is greatly influenced by the quality of data gathered and by information derived from that data. This course focuses on the use of tools and processes to enhance corporate decision-making strategies. Topics include: research design, survey development, defining data and information requirements, how and where data is stored, informatics and business intelligence, critical thinking, and transforming data into meaningful information.		

Course Objective	Program Student Learning Outcome	AACN MSN Essentials	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Understand the research process and avoid bias and other problems	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for	"Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and	1,2	Safety	Monetizing data, Data governance	Data strategies, use of excel, safe guarding data, sampling and data design and definition

	addressing clinical problems.	disseminates results. Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care. "					
2.) Be able to break down a business problem for analysis	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	"Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care. "	1,2		Quality Improvement, Informatics	Using data to improve business decisions and operations, use of excel for real life problem solving- scenario manager (group project)	Research design, Survey development, Business Intelligence, Critical Thinking
3.) Be able to test and compare alternatives	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change,	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's- prepared nurse must be articulate in the methods, tools, performance measures, and	1,2		Quality Improvement, Informatics	Reviewing data strategies, sensitivity analysis, Excel Solver (group project)	Transformation of Data into actionable and meaningful information

	improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	standards related to quality, as well as prepared to apply quality principles within an organization Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.				
4.) Develop models to use in your analysis of problems	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization	1,2	Quality Improvement, Informatics, Evidence based	Sourcing and collecting data and turning it into insights, modeling, cleaning data, use of correlations- Sampling design (group project)	
5.) Be able to make predictions based on assumptions	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and	"Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-	1,2	Quality Improvement, Informatics	Goal seeking, Optimization, Straight-Line Relationships (group project)	

	evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care. "				
6.) Use information to improve decision making	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems. • Development of a foundation for doctoral study in nursing. A life of Servant Leadership, based on • A synthesis of	"Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential V: Informatics and Healthcare Technologies 5 o Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care. " Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the	1,2,3		Quality Improvement, Informatics, Evidence based, Patient-centered, Safety, Teamwork and Collaboration	Data integrated into all business, deciding strategic data needs, creating technology and data infrastructure, Building data competencies in your organization	

	knowledge into a personal leadership style that contributes to health for individual, family and community. • Promotion of policy development related to the emerging roles within nursing. • Assimilation of knowledge in providing health education and health promotion activities. A life of Compassionate Peacemaking with • Contribution to health outcomes through advocacy within the profession, interdisciplinary healthcare team, and the care of individuals, families and communities. • Applies information and communication technologies and resources in evidence based care and health education.	master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.				

Course Number & Name: Nxxx Nursing leadership practicum II	
Professor:	

Course Description: Application of a theoretical framework to the capstone project and incorporate how, what type and to whom data will be reported during the capstone project. This course serves as a second-year touch point between student, professor and practicum mentor.
Will include 2 cr. hours of practicum and 1 cr. hour of course work

Course Objective	Program Student Learning Outcome	AACN MSN Essentials	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Application of theoretical framework to the capstone project.	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice o A solid base in liberal education provides the cornerstone for the practice and education of nurses.	1,2	Evidence-based practice, Patient-centered care	Settle on a leadership theoretical framework to guide the remainder of the project- present why a specific one was chosen.	Theoretical frameworks of leadership
2.) Selection of data points to be collected as a baseline and throughout the capstone project.	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the	Essential IV: Information Management and Application of Patient Care Technology o Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care	1,2	Safety, informatics, quality improvement	What data will be collected throughout the project and what tool will be used to collect the data-discussion.	Data reporting and collection

	inititer of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.					
3.) Collaborate with an interprofessional team to select correct reporting structure for project implementation and reporting.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. AND A life of COMPASSIONATE PEACEMAKING, with application of information and communication technologies and resources in evidence-based care and health education.	Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. Essential IX: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	1,2,3	Teamwork and collaboration	Meeting with mentor, professor and student to discuss communication and other aspects of ANA leadership competencies: Leading yourself	Program touch point between clinical mentor and academic faculty
4.) Obtain 112 practicum hours building a plan and beginning implementation of the capstone project.	A life of PASSIONATE LEARNING, through development of a foundation for doctoral studies.					

Course Number & Name: MGT 564 Organizational Behavior		

Professor:	

Course description: Organizations are complex and multifaceted entities that have developed over time. Organizations are more than just collections of people behaving and interacting in certain ways. Individual organizations have specific internal cultures, and operate in external cultural contexts. Organizational behavior is structured by rules and procedures, jobs and occupations, authority relations, goal and strategies, technologies, and distribution of power. Within organizations not only are orders given and task accomplished, but also decisions are made, conflicts occur and are sometimes resolved, values are promoted, and control is exercised. Organizations interact with other organizations and actors in their environment. Sometimes these interactions alter organizational goals, strategies, and structures. At other times they can lead to change in the environment in which the organization operates. Given the complexity of organizations, it is not surprising that there are numerous theories and images of organizations. Organizational theories differ not only in their core propositions and explanations of organizational dynamics, but also in the variables that are seen to be of central importance. Each organizational theory builds upon or critiques the one prior to it, thus forming an historical pattern of explanations. In this course we will explore six images of organizations: as machines, as cultures, as adaptive organisms, as decision-making brains, as political systems with domination as an important focus, and as flux and transformation. We will examine the ways that these images can be linked to organizational theories and then used to study organizational life and development. In this course, case studies and the experiences of course participants are used heavily to support the application and analysis of the six course metaphors. This course affirms a systemic perspective and approach to organizational behavior and affirms the concepts implicit in *Leadership for the Common Good.*

Course Objective	Program Student Learning Outcome	AACN MSN Essentials	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Develop an understanding of organizational behavior and its relationship to leadership for the common good	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.		1,2,3	Teamwork and Collaboration, Safety	Case study- Fresh to Table, identify 5 organizational principles and discuss in a paper how organizations can be machines, identify who are organizational stakeholders	Organizational rules and procedures, jobs and occupations, authority relations, goal and strategies, technologies, and distribution of power.

2.) Develop the ability to study organizations and improve their functioning	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	1,2,3		Teamwork and Collaboration, Safety, Quality Improvement	Organizations as political systems and instruments of domination, Case study- Canada mortgage and housing corporation: One CMHC, how to navigate conflict - balancing corporate interests	six images of organizations: as machines, as cultures, as adaptive organisms, as decision-making brains, as political systems with domination as an important focus, and as flux and transformation
3.) Understand the relationship between metaphors and theory as they relate to organizations and management	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization. Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes o Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults	1,2,3		Teamwork and Collaboration	Organizations as organisms and brains- Case study: Alaska Airlines (Empowering frontline workers to make it right) Compare and contrast organizations from 3 perspectives: business environment, general environment and organizational sub-systems	Organizational theories

		with other health professionals to manage and coordinate care.				
4.) Utilize case studies to develop enhanced understanding of the application of organizational theory	A life of Passionate Learning, through • Utilization of knowledge from nursing, natural and social science, and the arts in the management of patient health/illness status. • Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. • Utilization of the research process for addressing clinical problems.	Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	1,2,3		Teamwork and Collaboration, Safety, Quality Improvement	Case studies from Harvard Business Publishing Site (weekly) Case study- Instilling a growth mindset and Volkswagen emissions scandal: How could it happen?	
5.) Communicate effectively and think critically about organizations and management	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential III: Quality Improvement and Safety o Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization. Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes o Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams,	1,2,3		Teamwork and Collaboration, Safety, Quality Improvement	Final paper- analysis of organizational culture and metaphor, Organizations as cultures, case study - WWF and Greenpeace, review of corporate values and how to they drive outcomes	

		communicates, collaborates, and consults with other health professionals to manage and coordinate care. Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.				

Course Number & Name: NURS510 Healthcare Ethics						
Professor:						

Course description: In this course the student is provided with frameworks for ethical decision-making based in philosophical, theological and professional theory. The course provides opportunity for the development of reflective moral thinking. The student learns to utilize critical thinking as a basis for ethical reasoning. The dynamics of the healthcare professionals' roles are studied in view of the crucial importance assigned to matters of disclosure, confidentiality, and informed consent. The student is challenged to examine personal and professional values in the context of growing health care disparities impacting the local and world community.

Course Objective	Program Student Learning Outcome	AACN MSN Essential	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity (i.e. guest speakers, library orientation, etc.)	Course content items
1.) Identify and analyze dilemmas in health care that impact individuals, families, and communities.	A life that is CHRIST-CENTERED with an understanding of ethical and moral issues to expand the advocacy role of the APRN or the Nursing Leader.	I.4 Apply ethical analysis and clinical reasoning to assess, intervene, and evaluate advanced nursing care delivery. IX.3 Advocate for patients, families, caregivers, communities and members of the healthcare team. V.3 Promote policies that incorporate ethical principles and standards for the use of health and information technologies.	1	Safety, Patient-centered care, Quality Improvement	Dr. Glen Miller to talk about end of life care, case study: Dax Cowart, TED talk: Dr. Sandel, DVD A man of endurance	Professional Responsibility, Moral Reasoning: Teleology, Deontology, Virtue, Principle-based, Care-based (feminist ethics), Moral Philosophy and Reasoning, Ethical decision making, ANA code of ethics
2.) Apply ethical theories and principles to ethical dilemmas common in health care.	A life that is CHRIST-CENTERED with a sensitivity and responsiveness to the	IV.2 Advocate for the ethical conduct of research and translational scholarship (with particular attention to the protection	1	Safety, Patient-centered care, Quality Improvement	Rachel Schertz to talk about hospice and Polst, The case of the Trolley Car, Case Study: Elizabeth	Bias in Healthcare, Scarcity of Resources, End of life Ethics, Issues related to Aging

	spiritual needs of self and others.	of the patient as a research participant).				Bouvia, YouTube: TED talk on Justice by Bryan Stevenson-Aristotle on Persuasion, Case Study: Terri Schiavo, Death by Brian Criteria- Debate	
3.) Move beyond basic theories guiding ethical decision making to also include examination of cultural diversity, feminist theory, care-based ethics, and/or theological models.	A life that is CHRIST-CENTERED with a faith that is active and reflective. AND A life of GLOBAL CITIZENSHIP with taking initiative in providing culturally sensitive care.	I.4 Apply ethical analysis and clinical reasoning to assess, intervene, and evaluate advanced nursing care delivery. I.8 Analyze nursing history to expand thinking and provide a sense of professional heritage and identity. Essential V: Health Care Policy, Finance, and Regulatory Environments o Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.	1		Safety, Patient-centered care, Quality Improvement	The Tuskegee Trial and Jesse Gelsinger, Boy in the bubble, Explore Hasting Center	Threats to Autonomy, Research Ethics, Robert Wood Johnson Foundation, pediatric ethics, women's health ethics, psychiatric/mental health ethics
4.) Evaluate the nature of conflicts in ethical decision-making.	A life of GLOBAL CITIZENSHIP with assimilating knowledge of conflict transformation and social justice issues that are responsive to diverse needs of the individual, family, and community.	IX.8 Incorporate core scientific and ethical principles in identifying potential and actual ethical issues arising from practice, including the use of technologies, and in assisting patients and other healthcare providers to address such issues.	1,2,3		Safety, Patient-centered care, Quality Improvement, Teamwork and collaboration	Four R's for Surrogate Decision Making	Ethics and the Coronavirus, The poor and marginalized, Global response, beneficence, social justice
5.) Develop a personal framework for reflective moral reasoning.	A life of GLOBAL CITIZENSHIP, with exploring personal and professional values in light of growing health disparities in the community and world.	IX.15 Integrate an evolving personal philosophy of nursing and healthcare into one's nursing practice.	1,2		Teamwork and Collaboration	Video: escape fire and with TR Reid	Health care delivery system, Health promotion, Access to Care

Course Number & Name: Nxxx Nursing leadership practicum III						
Professor:						
Course Description: Within the context of the student's project, ethical principles will be identified and examined from a multi-disciplinary perspective. Examination of how the project will impact the organization's culture. Will include 1 cr. hour of practicum						
Course Objective	**Program Student Learning Outcome**	**AACN MSN Essentials**	**AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making**	**QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics**	**Learning Activity**	**Course content items**
1.) Apply ethical framework and principles to capstone project.	A life that is CHRIST-CENTERED with an understanding of ethical and moral issues to expand the advocacy role of the APRN or the Nursing Leader.	Essential VIII: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.		**Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement** 2 **Informatics**	Determine what ethical principles could be applied to the student project- paper. Builds off of learnings in N 510.	Ethical principles
2.) Explore the role of a nursing leader in upholding ethical standards related to patient care and delivery.	A life that is CHRIST-CENTERED with a faith that is active and reflective and an understanding of ethical and moral issues to expand the advocacy role	Essential VIII: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	1,2,3	Patient-centered care, Teamwork and collaboration	Examine ANA leadership competency: Integrity and self-awareness. Reflection paper and group discussion- challenges of effective leadership- pitfalls to avoid. Personal mission statement	ANA leadership competencies

	of the APRN or the Nursing Leader.					
3.) Ethical principles related to the capstone project will be evaluated by an interprofessional team to ensure patient safety.	A life that is CHRIST-CENTERED with an understanding of ethical and moral issues to expand the advocacy role of the APRN or the Nursing Leader and A sensitivity and responsiveness to the spiritual needs of self and others.	Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. Essential VIII: Professionalism and Professional Values o Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing. 1,2,3		Patient-centered care, Teamwork and collaboration, Safety	Ethical principles paper reviewed with Mentor and Interdisciplinary team to see if any IRB is required.	IRB
4.) Evaluate how the implementation of the capstone project impacts the organization's culture.	A life of PASSIONATE LEARNING, through interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management for health outcomes, and provision of high-quality health care.	Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety o Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care. 1,3		Teamwork and collaboration	Building off of principles in MBA 564- Identify and discuss with the group how the student project may impact organizational culture. Who is internally championing this project with you to gain validity? - Discussion	Organizational culture, stakeholders, leveraging political allies
5.) Identify leadership styles that can be used to help facilitate the project implementation.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes o Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care. Essential IX: Baccalaureate Generalist Nursing Practice o The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. o the baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients. 2,3		Teamwork and collaboration	Review ANA leadership sills and leadership styles: which are needed with the student's project? Discussion and review, and paper	Leadership styles
6.) Obtain 112 practicum hours	A life of PASSIONATE LEARNING, through					

implementing a capstone project.	development of a foundation for doctoral studies.					

Course Number and Name: N604 Promoting Health in Vulnerable Populations		
Professor:		
The focus of this course is public health promotion and disease prevention among vulnerable populations in the community. Core content includes community assessment, health program planning and evaluation for a select aggregate at risk with a focus on population-based interventions and health outcomes. Knowledge of basic epidemiology, communicable disease surveillance, survey data and cultural assessment contribute to a thorough knowledge of the community and population at risk. Attention will be given to themes of cultural diversity, health disparity, and social determinants of health.		

Course Objective	Program Student Learning Outcome	AACN MSN Essential	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity (i.e. guest speakers, library orientation, etc.)	Course content items
1.) Synthesize broad ecological, global and social determinants of health; principles of genetics and genomics; and epidemiological data to design and deliver evidence-based, culturally relevant clinical prevention interventions and strategies. (AACN, 2011)	A life of SERVANT LEADERSHIP, based on synthesis of knowledge into a personal leadership style that contributes to health for individual, family, and community. AND A life of GLOBAL CITIZENSHIP with taking initiative in providing culturally sensitive care, and assimilation knowledge of conflict transformation and social justice knowledge that is responsive to diverse needs of the individual, family, and community. AND A life of COMPASSIONATE PEACEMAKING, with application of advanced knowledge in the discipline to specific and vulnerable populations.	I. Background for Practice from Sciences and Humanities VIII. Clinical Prevention and Population Health for Improving Health	1,3	Patient-Centered care, Evidence-base practice	Library work-guided lit search overview, Film in sickness and in health, group discussions	Epidemiology, intro to Vulnerable Populations, Health Promotion and Needs Assessment,
2.) Evaluate the effectiveness of clinical prevention	A life of PASSIONATE LEARNING, through interpretation and evaluation of	I. Background for Practice from	1	Patient-Centered care, Evidence-base	Guest Speaker: James Gingerich	Poverty, homelessness,

interventions that affect individual and population – based health outcomes using health information technology and data sources. (AACN, 2011)	research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care. AND A life of COMPASSIONATE PEACEMAKING, with application of information and communication technologies and resources in evidence-based care and health education.	Sciences and Humanities V. Informatics and Healthcare Technologies VIII. Clinical Prevention and Population Health for Improving Health		practice, Quality Improvement	(MCHCC), group discussions	uninsured, literacy, socio-economic status
3.) Design patient-centered and culturally responsive strategies in delivery of clinical prevention and health promotion interventions and/or services to individuals, families, communities and aggregates/clinical populations. (AACN, 2011)	A life of GLOBAL CITIZENSHIP with assimilating knowledge of conflict transformation and social justice issues that are responsive to diverse needs of the individual, family, and community.	I. Background for Practice from Sciences and Humanities VIII. Clinical Prevention and Population Health for Improving Health	1,3	Patient-Centered care, Evidence-base practice, Quality Improvement	Guest speaker: Ingrid with Healthy Living groups & motivational interviewing, group discussions	Motivational interviewing
4.) Advance equitable and efficient prevention services, and promote effective population-based health policy through the application of nursing science and other scientific concepts. (AACN, 2011)	A life of COMPASSIONATE PEACEMAKING, with contribution to health outcomes through advocacy within the profession, interdisciplinary healthcare teamwork, and the care of individuals, families and communities.	VI. Health Policy and Advocacy VIII. Clinical Prevention and Population Health for Improving Health	1,2	Patient-Centered care, Evidence-base practice, Quality Improvement, Teamwork and collaboration	Film: When the bough breaks, group discussions	Race & ethnicity, language barriers, health disparities, immigration
5.) Integrate clinical prevention and population health concepts in the development of culturally relevant and linguistically appropriate health education, communication strategies, and interventions. (AACN, 2011)	A life of SERVANT LEADERSHIP, based on assimilation of knowledge and principles of teaching/learning in providing health education and health promotion activities. AND A life of GLOBAL CITIZENSHIP, with taking initiative in providing culturally sensitive care.	I. Background for Practice from Sciences and Humanities VIII. Clinical Prevention and Population Health for Improving Health	1,3	Patient-Centered care, Evidence-base practice, Quality Improvement, Safety, Teamwork and collaboration	Group project work on exploring a vulnerable pop-final project, Film: Resilience	Mental illness, depression, anxiety, additions-care and screening, ACES, trauma, resilience

Course Number & Name: Nxxx Leadership Capstone	

Professor:	

Course Description: The capstone project is designed with an interdisciplinary viewpoint, and seeks to explore personal and strategic leadership components in diverse healthcare settings to promote positive healthcare outcomes through advanced evidence based collaborative practice. The course emphasizes leadership concepts including communication, ethics, negotiation, advocacy and a caring person-centered practice environment. Information related to living leadership within teams, systems, communities and professional organizations are discussed. With the use of active learning, students will be able to practice problem solving and change techniques in their capstone project. This course will include completion of leadership portfolio and final presentation.
Will included 1.5 cr hour of practicum and 1.5 of course work and portfolio presentations.

Course Objective	Program Student Learning Outcome	AACN MSN Essentials	AONE Nurse Manager Competencies: 1.) The science (managing the business): Financial Management, Human Resources Management, Performance Improvement, Foundational Thinking Skills, Technology, Strategic Management and Clinical Practice Knowledge 2.) The leader within (honing leadership capacity/ personal and professional growth): Personal and Professional accountability, Career Planning, Personal Journey Disciplines, and Optimizing the Leader Within 3.) The art (leading people): Human Resource, Leadership Skills, Relationship Management and Influencing Behaviors, Diversity and Shared Decision Making	QSEN Competencies: Patient-centered care Evidence-based practice Teamwork and collaboration Safety Quality improvement Informatics	Learning Activity	Course content items
1.) Evaluation of project implementation success.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential VIII:	1,2,3	Quality improvement, Teamwork and collaboration	Student will submit completed practicum logs	Quality Improvement, Teamwork and collaboration

		Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.				
2.) Synthesize elements from the program that have contributed to the growth and development in role acquisition of nursing leader.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and	1,2,3	Quality improvement, Teamwork and collaboration	Personal reflection paper on how the students has accomplished the QSEN competencies and AORE (nurse manager competencies)	Quality Improvement, Teamwork and collaboration

		evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.				
3.) Understand when they are eligible to apply for certification and what options are available.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly	1,2,3		In class discussion: certified nurse manager and leader (CNML) https://www.aonl.org/initiatives/cnml Or certified in Executive Nursing Practice Certification (CENP) all through the American Organization for Nursing Leadership	Quality Improvement, Teamwork and collaboration

		defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.				
4.) Submit a completed leadership portfolio and presentation.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate	1,2,3		Presentation of final program synthesis and submission of professional portfolio outlining the achievement of the MSN ACCN essentials	Quality Improvement, Teamwork and collaboration

		this knowledge into practice. Nursing practice interventions include both direct and indirect care components.				
5.) Obtain 169 practicum hours wrapping up implementation and evaluating the capstone project.	A life of Servant Leadership, based on • A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.	Essential II: Organizational and Systems Leadership o Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective. Essential IV: Translating and Integrating Scholarship into Practice o Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results. Essential VIII: Clinical Prevention and Population Health for Improving Health o Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. Essential IX: Master's-Level Nursing Practice o Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.	1,2,3			

Appendix J: Curriculum Proposal

Proposal for a New Program--RN to MSN Administration

Title and Level-

Master of Science in Nursing CIP code 51.3802 Nursing Administration (MSN, MS, DNP, PhD)

A program that prepares registered nurses to manage nursing personnel and services in hospitals and other health care delivery agencies. Includes instruction in principles of healthcare administration, resource and financial management, health care law and policy, medical personnel management, and managed care operations. Examples: [Nursing Administration (PhD)], [Nursing Administration (MSN, MScN, MS, MSc, MN)] (https://www.nces.ed.gov/ipeds/cipcode).

Need for the Program-

The American Association of Colleges of Nursing (AACN) continues to support the promotion of seamless academic progression in

nursing. The February 19, 2019 Position Statement from the Academic Progression Task Force "was clarified to covey that the AACN believes that academic progression from associate degree and diploma programs should end in a program leading to a baccalaureate degree (or entry level master's degree) offered by an accredited four-year college or university" (AACN, 2.19.2019). Research continues to support that higher levels of nursing education lower patient mortality rates, reduces medication errors and creates positive patient outcomes (AACN white paper "Academic Progression in Nursing: Moving Together Toward a Highly Educated Nursing Workforce). The healthcare needs of our communities today, calls for nursing leaders who are trained to practice across multiple settings, make complex clinical decisions, manage care transitions, supervise and grow clinical personnel while promoting progression along the education continuum, manage healthcare resources and their allocation. All of these complex interactions must occur in a setting where the safety of patient care is of the utmost priority. According to the American Nurses Association, there will be more nursing jobs available through 2022 than any other profession. Management positions in nursing include roles such as: Nursing Manager, Nursing Director, Clinical Service

Director, Chief Nursing Officer, Executive Director and Management and executive roles in operations.

According to the Bureau of Labor Statistics: Medical and Health Services Manager 2018 nation data (Nursing Administration falls under this title): median pay $99,730 number of jobs in 2018: 406,100. The long-term outlook: 2018-2028 project 18% growth and employment change from 2018-2028 showing an increase of more than 71,600 positions.

According to long term projections from -Projections Central, from 2016-2026, in the state of Indiana - Medical and Health Service Managers has a base level of 8,110 positions under this title and are projected to grow to 9,890 and increase of 1,780 positions which is an increase of 21.9%. There is an average annual opening of 860 positions in the state under this job title. The Career One Stop Resources website, mimic the numbers from Projection Central, regarding the state of Indiana; which closely mimics the national data.

This website shows that the majority of students in these positions have a BSN 31%, MSN 24% and DNP 8% in these positions. A subsequent advantage of this program would be the creation of another pipeline for students to matriculate into the DNP program. Annual wages for Medical and Health Services managers in the Elkhart-Goshen IN metro area: median wage of $78,030.

This proposed program is in alignment with the college's mission and vision. In addition, it builds on two strong degree programs at "the institution" by using a core of courses that are already offered for students in the current MSN- Family Nurse Practitioner track and the collaborative MBA.

Program accreditation is through the Commission on Collegiate Nursing Education and should require no additional site visit due to the previous instance of the Clinical Nurse Leader MSN track. The MSN essentials standards were used to develop the curriculum and learning outcomes.

1.Design of the Program- The program is designed for nurses who hold an Associates or bachelor's degree in nursing and who are licensed registered nurses. It is an addition to the existing RN to BSN program, which offers a seamless transition to the graduate level, if desired. All students who matriculate into the MSN administration track would be considered fulltime graduate students at that point. This is a 36 credit, two-year Master of Science in Nursing Administration track designed to facilitate seamless progression in nursing education from the undergraduate to graduate level. It is a mix of synchronous and asynchronous online and video conferencing courses.

> The Master of Science in Nursing administration focuses on managing nursing personnel and services in hospitals and other health care delivery agencies. Includes instruction in principles of healthcare administration, resource and financial management, health care law and policy, medical personnel management, and managed care operations. Graduates of the program will help to guide the healthcare of the future. Some graduates may continue on to their Doctorate in Nursing Practice and this program is designed to make that a seamless transition by providing an adequate number of clinical practicum hours, 420.

    a. Student learning outcomes: Master of Science in Nursing Student Learning Outcomes (Goals).

The goals of the MSN program flow from "the institutions" core values. Upon graduation, the graduate demonstrates:

- A life that is Christ-Centered with:
  - A faith that is active and reflective
  - An understanding of ethical and moral issues to expand the advocacy role of the advanced practice nurse or clinical nurse leader.
  - A sensitivity and responsiveness to the spiritual needs of self and others.
- A life of Passionate Learning, through:

- ○ Utilization of knowledge from nursing, natural and social science and the arts in the management of patient health/illness status or management of microsystems of care.
  - ○ Interpretation and evaluation of research for the initiation of change, improvement of nursing practice, management of health outcomes, and provision of high-quality health care.
  - ○ Utilization of the research process for addressing clinical problems.
  - ○ Development of a foundation for doctoral study in nursing.
- A life of Servant Leadership, based on:
  - ○ A synthesis of knowledge into a personal leadership style that contributes to health for individual, family and community.
  - ○ Promotion of policy development related to the emerging roles within nursing.
  - ○ Assimilation of knowledge in providing health education and health promotion activities.
- A life of Compassionate Peacemaking with:
  - ○ Contribution to health outcomes through advocacy within the profession, interdisciplinary healthcare team, and the care of individuals, families and communities.
  - ○ Applies information and communication technologies and resources in evidence-based care and health education.
- A life of Global Citizenship with:
  - ○ Taking initiative in providing culturally sensitive care.
  - ○ Exploring personal and professional values in light of growing health disparities in the community and world.

     ○ Assimilating knowledge of conflict transformation and social justice issues that are responsive to diverse needs of the individual, family and community.

  b. <u>Admission criteria</u> - successful completion of "the institutions" RN to BSN program or a student with a BSN from outside can elect to apply to the program.

    i. Outside students should have a minimum 3.0 GPA in their undergraduate courses

    ii. Submit a resume

    iii. Submit all previous transcripts

    iv. Submit a letter of recommendation from their current place of employment

  c. <u>Plan of Study</u>- See attached

2. <u>Faculty Expertise needed</u>- The financial pro-forma includes projected costs for adding a new faculty member in nursing to help teach the additional courses. The new faculty member must have at least a Master's degree in nursing. A doctoral degree with previous higher education teaching experience is preferred.

3. <u>Cost</u>- Please see the financial projections spreadsheet:

4. <u>Enrollment</u>- The financial projection is based on a modest start with three students enrolled during the first year, increasing to four students during the second year, to five the third year and leveling out at six during the fourth through fifth year.

5. <u>Revenue/Return on Investment</u>- The modest student enrollment will allow the program to be self-sustaining in the first year with adjunct teaching faculty. The program will increase enrollments in existing courses. However, even with the profit-sharing model the use of existing courses makes programs like these very feasible and cost effective.

6. <u>Endorsement</u>- This proposal is supported by the Department of Nursing Chair, the Director of Nursing Graduate programs, the MSN sub-committee and the doctoral committee.

Program Review-

Program review would go through the assessment committee review process under which all program reviews occur on a five-year cycle; however, with these new programs, there will also be a third-year review. Self-studies are completed in the spring semester in consultation with the Assessment Committee and the Dean. Academic Affairs will review the recommended action plan produced by the Department and Dean by the following Fall.

Appendix K: IRB certificate of completion

CERTIFICATE
OF COMPLETION

PHRP Online Training, LLC certifies that

Jewel Yoder

has successfully completed the web-based course
"Protecting Human Research Participants Online Training."

Date Completed: **08/26/2019**
Certification Number: **2836874**

PHRP
Protecting Human
Research Participants
Online Training

Appendix L: IRB institutional checklist

IRB – Checklist for Student Research Using Human Subjects

Classroom activities that are solely for instructional use generally do not have to come before the IRB. However, the burden of responsibility lies with the instructor to consult with the IRB Chair to determine whether classroom activities and/or course assignments fall under IRB regulation. While IRB review may not be necessary for all classroom research projects, the IRB encourages the student researcher and the instructor to discuss the ethical treatment of human subjects and to engage in conversations that consider Federal guidelines (available at the web site of the Department of Health and Human Services, online at http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm).

Student Name: _Jewel C Yoder_

Project Title: _Seamless academic progression in nursing – developer_

Faculty Sponsor: _of an associates in nursing to masters in nursing leadership proge_

Course (if a course assignment) and Department: _NURSING 800, 802 & 804_
DNP-project planning implementing & analysis & dissemination

☐ Yes ☑ No	Does the project involve physically or psychologically invasive, intrusive, or stressful procedures? (Ex. Deceptive procedures or manipulative procedures, or changes in the subject's environment that may cause more than "minimal risk" – see below.)
☐ Yes ☑ No	Is there any potential of greater than minimal risk to the subjects from engaging in the research project? (Note: "minimal risk" means a risk that is "greater than that ordinarily encountered in daily life or during the performance of routine physical or psychological tests.")
☐ Yes ☑ No	Does the research involve or target any vulnerable populations? According to Federal Policy, these include children (other than observation in an educational setting), pregnant women, human fetuses and neonates, and prisoners (any detained population).
☐ Yes ☑ No	Is there any potential funding (grants, awards, etc.) for the project?
☑ Yes ☐ No	Is there any potential that the project will be presented outside of the _____ community?
☑ Yes ☐ No	Is there any potential that the project will be published outside the _____ community?

I hereby certify that my project has been reviewed by my instructor and found not to need IRB approval (*all questions above checked no*). I understand that I will not be able to publish or present this research outside of the community.

Student Signature _____ Date _____

I hereby certify that I have reviewed this project and found that it qualifies as Student Research as noted above and does not need IRB approval. I understand that this student will not be able to publish or present this research outside of the community.

Faculty Signature _____ Date _____

☑ Yes ☐ No	Is this an assignment for an advanced research class? We recommend that efforts involving human subjects in advanced research coursework be reviewed following regular IRB procedures (to permit possible publication and/or presentation off campus and to prepare the student for additional research training).

IRB Reviewer _____ Date _____

Approved by the   IRB: 12/14/09

M:\Offices\IRB\   Student_Research_Checklist-12-14-09.doc

Appendix M: ANA leadership competency one

Upon review and explanation of the ADN to MSN leadership program design and curriculum how strongly do you feel it meets the ANA competency 1- Leading yourself, which includes: Adaptability, executive image, initiative, integrity, learning capacity, and self awareness.

6 responses
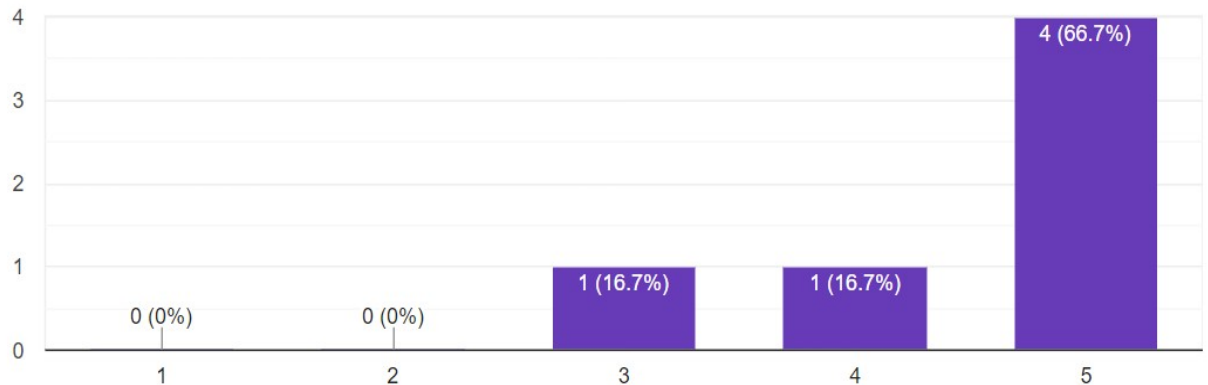
Note. ANA leadership competency model leading oneself includes the following concepts: adaptability, executive image, initiative, integrity, learning capacity, and self-awareness. Using a Likert scale, *with 1 representing extremely weak evidence and 5 representing extremely strong evidence,* 66.7% of reviewers rated the program's curriculum as demonstrating *extremely strong evidence* and 16.7% rated it as having *strong evidence* of building and educating on this set of concepts (American Nurses Association, 2018).

Appendix N: ANA leadership competency two

Upon review and explanation of the ADN to MSN leadership program design and curriculum how strongly do you feel it meets the ANA competency 2- Leading others, which includes: Communication, conflict resolution, diversity, employee development, and building collaborative relationships

6 responses
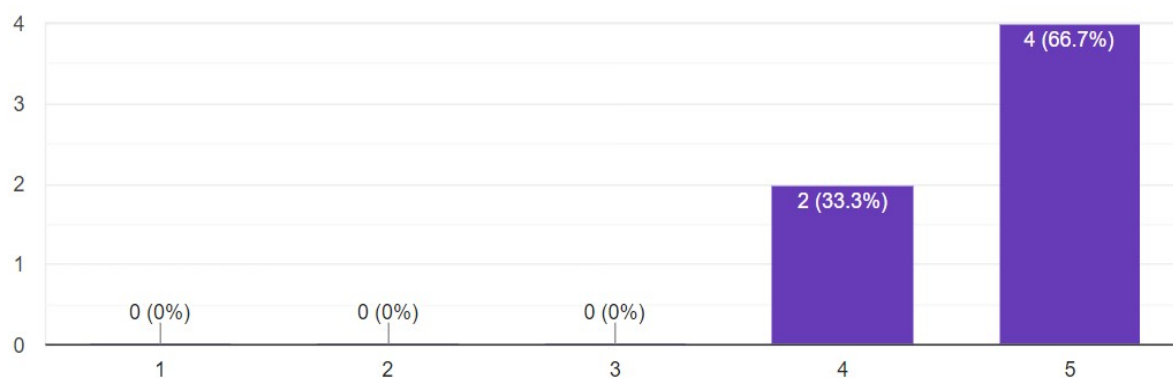
Note. ANA leadership competency model leading others includes the following concepts: communication skills, conflict management, engaging diversity, employee development and relationship building. Using a Likert scale, *with 1 representing extremely weak evidence and 5 representing extremely strong evid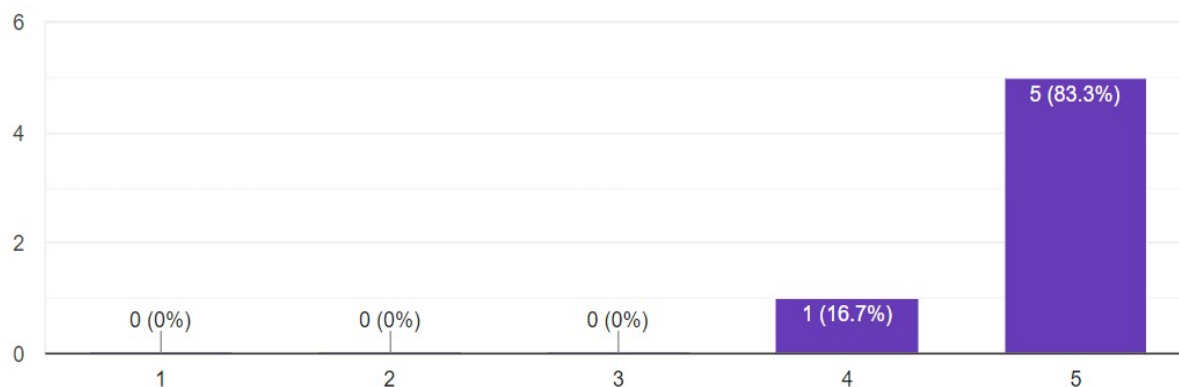ence,* 66.7% of reviewers rated the program's curriculum as demonstrating *extremely strong evidence* and 33.3% rated it as having *strong evidence* of building and educating on this set of concepts (American Nurses Association, 2018).

Appendix O: ANA leadership competency three

Upon review and explanation of the ADN to MSN leadership program design and curriculum how strongly do you feel it meets the ANA competency 3- Leading the organization, which includes: Business acumen, change management, decision making, influence, problem solving, systems thinking, vision and strategy and project management.

6 responses

Note. ANA leadership competency model leading the organization includes the following concepts: business acumen, change management, decision making, influence, problem solving, system thinking, vision and strategy, and project management. Using a Likert scale, *with 1 representing extremely weak evidence and 5 representing extremely strong evidence,* 83.3% of reviewers rated the program's curriculum as demonstrating *extremely strong evidence* and 16.7% rated it as having *strong evidence* of building and educating on this set of concepts (American Nurses Association, 2018).