Innovative Curriculum Design in Nursing: A Focus on Care Coordination in Alignment with the 2021 AACN Essentials

AACN Transform 2023
November 30 - December 2, 2023
Orlando, FL

Submission Category: Quality Improvement/Evidence-Based Practice Project

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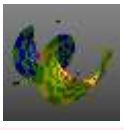
Background

The AACN 2021 Essentials: Refresh and revise curriculum aligning to competencies, concepts, and spheres of care

Entry Level Masters Nursing Program

Assessment and Analysis of gaps in the curriculum lead to the ***Development*** of a Care Coordination Course
Course Development Informed by:

Needs of the community
Mission of the School of Nursing
AACN Essentials Framework



Complex Patient Situations * Critical Communication Strategies
Transitions in Care Across Settings

Optimal Patient Outcomes

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Purpose & Significance

Purpose

Support learners in *"shaping the future of nursing and advance equitable health care to improve the health and wellbeing of all."*

U of MN School of Nursing Mission, https://nursing.umn.edu/about/school-nursing-glance

Significance of this content for future nurses

- *Patients with complex care needs…*
- *Frequently require care in multiple care settings and*
- *Particularly vulnerable to poorly executed care transitions*
- *Lost information can pose significant threats (eg, failing to adhere to care plans, misusing medication, receiving poor follow-up).*
- *Result in additional health care spending due to adverse outcomes (eg, increased lengths of stay, readmissions, and consequences of medication errors)*
- *Delays as patients wait to transfer from acute care to facilities providing different levels of care.*

Lianne Jeffs, Simon Kitto, Jane Merkley, Renee F Lyons & Chaim M Bell (2012) Safety threats and opportunities to improve interfacility care transitions: insights from patients and family members, Patient Preference and Adherence, 6:, 711-718, DOI: 10.2147/PPA.S36797

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Development of the Course

Start with the End in Mind

- Innovatively designed using **backward design** principles
- Solicited input from **community partners**
- Assimilated content from a similar course in the BSN curriculum
- Reviewed the **literature**
- Assessed interprofessional **competencies** and the framework of the 2021 AACN Essentials.
- **Mapping** to the 2021 AACN Essentials (competencies and sub competencies, concepts, and spheres of care) was completed.
- **Active learning principles** were included in the didactic component of the course and a
- **Clinical experience** in a transitional care unit provided context for student engagement.

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Nurse Role in Transitions Across Care Settings

Care transition is a process of transferring the care of a patient from one point of care to another.

Exploration of transitional care models and the nurses role in promoting safe, equitable, efficient, and cost-effective transitions across care settings.




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Course Objectives

1. Apply nursing knowledge, skills, and attitudes to support person-centered care for **patients transitioning across care settings.** *Domain 1*
2. Describe the nurse's role on an **interprofessional team** in supporting patient care transitions. *Domain 6*
3. Apply **knowledge of systems** to work effectively across the care continuum. Domain 7
4. Examine **system structures** and their impact on patient care transitions. *Domain 7*
5. Create a **care transition plan** for a client with complex health and wellness concerns. Domain 7, 8, 9

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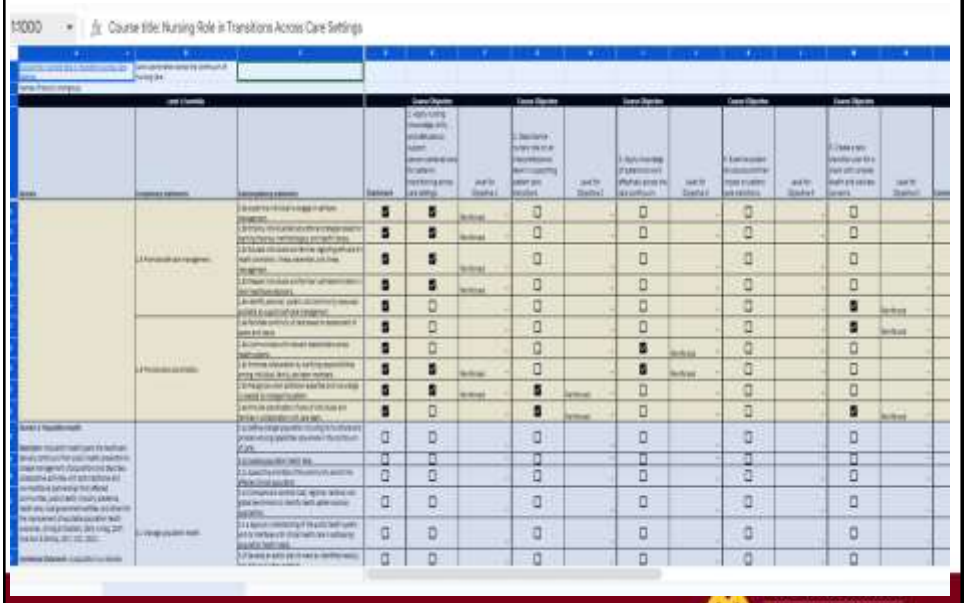
Course Objectives Linked to AACN Essentials



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Course Outcome Measures

1. Apply nursing knowledge, skills, and attitudes to support person-centered care for **patients transitioning across care settings.** *Clinical Evaluation Assessment Tool (S)*
2. Describe the nurse's role on an **interprofessional team** in supporting patient care transitions. *Case Studies, Reflective Exercises (F)*
3. Apply **knowledge of systems** to work effectively across the care continuum. *Knowledge Quiz (F)*
4. Examine **system structures** and their impact on patient care transitions. *Structured Discussion (F)*
5. Create a **care transition plan** for a client with complex health and wellness concerns. *Care Transition Simulation, Rationale based Care Plan (S)*

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Concepts and Spheres of Care

Clinical Judgement * Communication * Compassionate Care
DEI * Ethics * EBP * Health Policy * SoDH

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Overview of Course Structure

- Course is placed in the 3rd semester of 4 semester program
- In-person class for two hours per week x 10 weeks
- 2 credit course
- 40 hour practicum in a Transitional Care Unit

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Student Feedback:

I'm glad to have had the transitional care component.

I really appreciate *faculty* coaching in helping us think about discharge from the start; that's a definite takeaway for me.

The content felt a little light, maybe because it was spread out.

I wonder if there would be a way to concentrate some of it (maybe 2 or 3 standalone, but in–person, seminars?) allowing for deeper dives and lengthier group discussions than can always be had in an hour.

The content was so applicable to real–world nursing and it was nice to be engaged with material without a huge lift for projects/assignments/exams.

Conclusions

Early student evaluations of this course are positive. Formative evaluation based on course assignments shows acquisition of knowledge.

This course requires the student to consider a broader picture of the patient's story and experience to support positive patient outcomes long term. Systems level structures and communication strategies are also core to the content provided in this course.

A care coordination course is imperative in all curricula to address patient needs across care settings in complex health care environments.

Questions

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References

American Association of Colleges of Nursing. (2021). The Essentials: Core competencies for professional nursing education. Accessible online at https://www.aacnnursing.org/Portals/0/PDFs/Publications/Essentials-2021.pdf

Jones B, James P, Vijayasiri G, et al. Patient Perspectives on Care Transitions From Hospital to Home. *JAMA Netw Open.* 2022;5(5):e2210774. doi:10.1001/jamanetworkopen.2022.10774

Lianne Jeffs, Simon Kitto, Jane Merkley, Renee F Lyons & Chaim M Bell (2012) Safety threats and opportunities to improve interfacility care transitions: insights from patients and family members, Patient Preference and Adherence, 6:, 711-718, DOI: 10.2147/PPA.S36797

Post-Acute Transitional Services: Safety in Home-Based Care Programs Vanessa McElroy, MSN, PHN, ACM-RN, IQCI, Ron Billano Ordona, DNP, FNP-BC, GS-C, and Deb Bakerjian, PhD, APRN, FAAN, FAANP, FGSA | April 27, 2022 https://psnet.ahrq.gov/primer/post-acute-transitional-services-safety-home-based-care-programs

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