Development of a Competency-Based Adult-Gerontology Acute Care Nurse Practitioner Program

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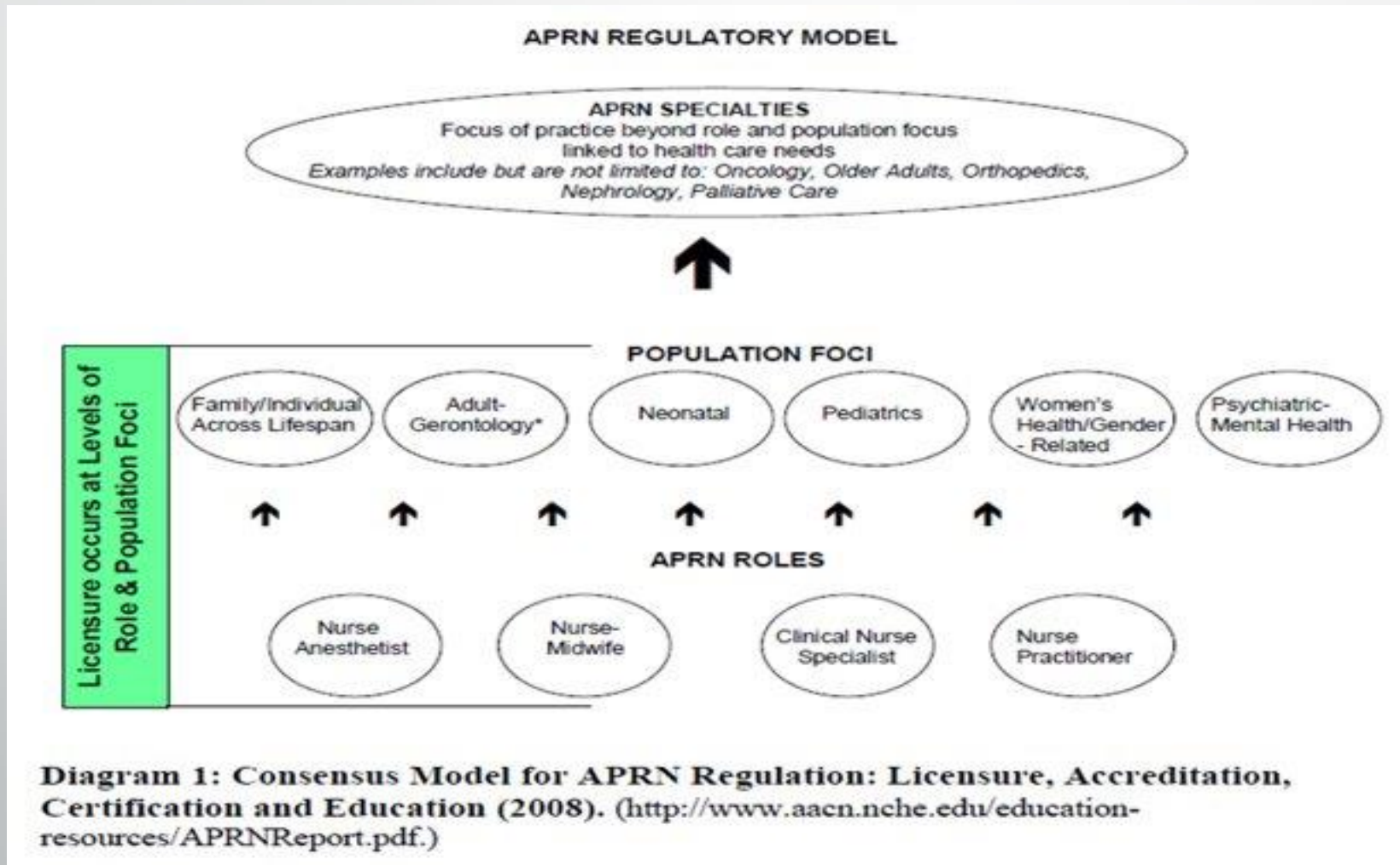
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Objectives

- Provide a background on AG-ACNPs, including education and professional advanced practice nursing role

- Explain the regional need for AG-ACNP education

- Discuss DNP project

Consensus Model

Diagram 1: Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (2008). (http://www.aacn.nche.edu/education-resources/APRNReport.pdf.)

Adult-Gerontology Acute Care Nurse Practitioners (AG-ACNPs)

Acute versus Primary Care Nurse Practitioners: What is the Difference?

Primary Care NPs

- Educational preparation focuses on comprehensive, chronic, continuous care characterized by the long-term relationship between the patient and the primary care NP.
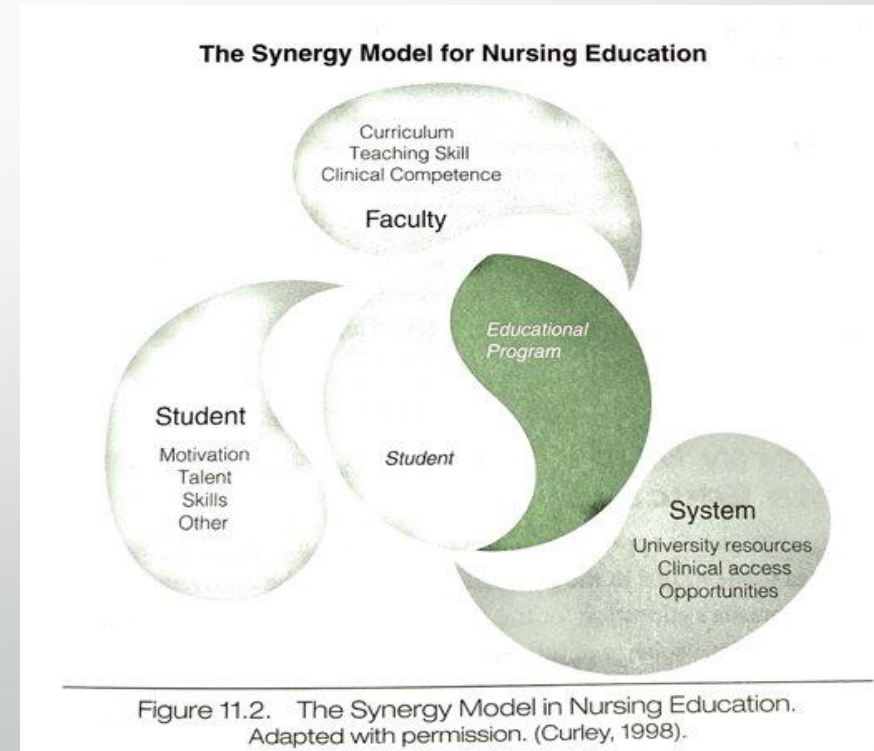
Acute Care NPs

- Educational preparation focuses on restorative care characterized by rapidly changing clinical conditions.

Significance to Nursing and Implications for Practice

- Significance:
  - Further promote the AG-ACNP to practice to the maximum authority of their licenses
  - Elevate the profession and standard of care
  - Further reinforce the delineation of the AG-ACNP specialty delineation
  - Allow for a an additional role for nurse experts
  - Expand role to leadership positions within the hospital
- Implications:
  - Diminish the practice of NP position-certification mismatch
  - Promote patient safety

Theoretical Framework: AACN Synergy Model

Figure 11.2. The Synergy Model in Nursing Education. Adapted with permission. (Curley, 1998).

Areas of Competency

- Scientific Foundation
  - Leadership
    - Quality
  - Practice Inquiry
- Technology and Information Literacy
  - Policy
- Health Delivery System
  - Ethics
- Independent Practice

- Professional Development
  - Scientific Foundation
    - Procedural skills
  - Diagnostic Studies
- Mechanical Ventilation
- Management of Complex Diseases
  - End of Life Care
  - Patient Safety
  - Pharmacology

Example Knowledge, Skills, and Attitudes AG-ACNP
Student Survey (Derived from Kopf et al., 2018, "Curriculum for Critical Care Nurse Practitioners"). For ratings, "1" is the lowest, or least competent, "4" is the highest, or most competent.

Knowledge	Rating	Skills	Rating	Attitudes	Rating
Explains indications and contraindications for common procedures in the ICU.	1 2 3 4	Demonstrates competence in performing common procedures while in the ICU while using simulation for training (for example, CVL, LP, intubation, cardiac ultrasound, vascular ultrasound).	1 2 3 4	Conveys an understanding of how and when to perform advanced procedures in the ICU.	1 2 3 4

Skills, Procedures, Diagnostics, and Topics within Curriculum

AG-ACNP Theory Course I (3 credit hours)	Course focuses on the pathophysiology, assessment, diagnoses, and collaborative management of adults and older adults with selected episodic/chronic health problems in acute/critical care with renal, fluid and electrolyte, pulmonary, and cardiovascular disorders.
AG-ACNP Skills, Procedures, and Diagnostics (1 credit hour)	Focus on ordering and interpreting varying modalities of imaging, analysis of electrocardiograms, overviews of procedures including, but not limited to, suturing, central line placement, arterial line placement, chest tube placement, and lumbar puncture.
AG-ACNP Theory Course II (3 credit hours)	Course focuses on the pathophysiology, assessment, diagnoses, and collaborative management of adults and older adults with selected episodic/chronic health problems in acute/critical care with gastrointestinal, hematologic, neurological, oncological and endocrine disorders.

Curriculum

BSN to DNP Proposed Plan of Study Grid

Prerequisites:

NUR 670 Graduate Nursing Writing Preparation (3)

NUR 620 Advanced Statistic and Data Analysis (3)

Semester 1 (7 credit hours)	Semester 2 (6 credit hours)	Semester 3 (6 credit hours)
NUR 616 Pathophysiology Across the Lifespan for the Nurse in an Advanced Role (3); (14 Weeks). NUR 625 Nursing Informatics (3); (7 Weeks). NUR 700 Introduction to the Doctor of Nursing Practice Degree (1); (4 weeks).	NUR 637 Pharmacology Across the Lifespan for Advanced Nursing Roles (3); (14 weeks). NUR 612 Health Care Policy in a Diverse Community (3); (7 weeks).	NUR 619 Advanced Physical Assessment Across the Lifespan (3); (14 weeks). NUR 710 Population Health Across Diverse Cultures (3); (7 weeks).
Semester 4 (7 credit hours)	Semester 5 (6 credit hours)	Semester 6 (6 credit hours)
Adult-Gerontology Acute Care Nurse Practitioner Theory I (3 credit hours); (14 weeks). AG-ACNP Skills, Procedures, and Diagnostics (1 credit hour); (14 weeks). NUR 720 Translational Research for Advanced Practice (3); (7 weeks).	Adult-Gerontology Acute Care Nurse Practitioner Clinical 1 (300 clinical hours, 3 credit hours); (14 weeks). NUR 725 Program Planning and Evaluation (3); (7 weeks).	Adult-Gerontology Acute Care Nurse Practitioner Theory II (3 credit hours); (14 weeks). Adult-Gerontology Acute Care Nurse Practitioner Clinical II (300 hours, 3 credit hours); (14 weeks). MSN degree conferred (if eligible). Eligible for Certification and Licensure.
Semester 7 (7-8 credit hours)	Semester 8 (4-5 credit hours)	Semester 9 (4-5 credit hours)
NUR 715 DNP Practice I-Quality and Safety (variable 1-2 or prior learning credit); 150 Clinical Hours. (14 weeks). NUR 740 Information Systems Science, Theory, and Technology (3); (7 weeks). NUR 750 Translational Research Design (3); (7 weeks).	NUR 716 DNP Practice II-Synthesis (variable 1-2 or prior learning credit); 150 Clinical Hours. (14 weeks). NUR 745 Leadership for Transitional Health Systems (3); (7 weeks).	NUR 717 DNP Practice III-Evaluation (variable 1-2 or prior learning credit); 150 Clinical Hours. (14 weeks). NUR 735 Epidemiology (3); (7 weeks).
Semester 10 (4 credit hours)	Total required credit hours: 57-60	ELECTIVE courses for those who would like to pursue education:
NUR 755 Translational Research Implementation (3);(7 weeks). NUR 760 Translational Research Project (1); (14 weeks) DNP degree conferred: Adult-Gerontology Acute Care Nurse Practitioner for Leadership and Population Health.	Total required credit hours including prerequisites: 63-66	NUR 640* Perspectives on Teaching and Learning (3) NUR 643* Curriculum Design (3)

Example Program Budget Considerations

ITEM	Estimated EXPENSES
Wages & benefits	$88,000-99,000/full time 12 month faculty
Part-time Instructors	$50,000 per year
Independent Contractors	$5,000
Computer Tech Support	$3,000
Printing	$1,000
Postage, mail, and shipping	$1,000
Supplies	$5,000
Advertising	$10,000
Special purchases (Books)	$1,500
Instructional supplies	$5,000
Dues and Memberships	$2,000
Recruitment Expenses	$5,000
Conferences	$1,500
Travel	$4,500
Meals	$1,750
Course Development	$20,000

Stakeholders; Anticipated Barriers & Facilitators

- Stakeholders: School of Nursing, Nursing Faculty, Clinical Sites, Students, Patient Population.

- Barriers: Acceptance and time to implementation of program, obtaining and maintaining clinical affiliations, procurement of preceptors, tuition and funding constraints, possibility of limited simulation experiences, and program length for students.

- Facilitators: School of Nursing and Faculty, local hospitals, clinical sites, preceptors, and patients.

Limitations and Recommendations

- Limitations:
  - Institutionally-imposed time frames
  - Clinical affiliations with appropriate acuity level
  - Changes in timeline with program implementation
  - Student enrollment factors
  - Creating and filling faculty positions
  - Endorsement by board of trustees
  - Other internal academic processes

- Recommendations:
  - Further research on competency-based education for AG-ACNPs

Conclusion

- The AG-ACNP competency-based curriculum is to be developed and implemented in a local School of Nursing.

- The program is needed because there is no local source for AG-ACNPs.

- The state board of Nursing in Ohio, supported by national certifying bodies, supports the use of Nurse Practitioners to practice in patient populations in which their education and training have taken place.

- This program will fill a local educational gap, and help stave off the impending shortage of critical care providers as the population ages and becomes more medically complex.

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