

Outcomes of a concept-based curriculum

Lisa S. Lewis MSN, RN, CNE*

Watts School of Nursing, Duke Regional Hospital, Durham, NC 27705, USA

KEYWORDS:

Nursing education;
Concept-based
curriculum;
Program outcomes

Abstract

This article describes the outcomes of a curriculum change in a prelicensure diploma registered nursing program. Program outcomes including performance on the National Council Licensure Examination for Registered Nurses (NCLEX-RN), retention and graduation rates, and program satisfaction were compared before and after the change to a concept-based curriculum. Although this study was undertaken in 1 small program, and there are other factors that potentially contribute to the outcomes, the results of this curricular change were positive and support the use of a concept-based curriculum. © 2014 National Organization for Associate Degree Nursing. Published by Elsevier Inc. All rights reserved.

In 2008, a prelicensure diploma registered nursing program underwent revision of the four-semester nursing curriculum, implementing a concept-based program. This study compared measures of program effectiveness, such as retention rate, graduation rate, and alumni satisfaction scores, before and after the curricular change. The intent of the study was to demonstrate the effectiveness of the concept-based curriculum.

1. Aim/Purpose

The overall aim of this study was to discover the possible effect of a change in the nursing curriculum. It was hypothesized that the concept-based curriculum would result in a higher student retention rate and lower number of students taking longer than 2 years to complete the program. At the same time, the hypothesis was made that other program outcome measures, including pass rates on the national licensure examination, and student, alumni, and employer satisfaction rates would remain unchanged following the curriculum change.

2. Background

In the past decade, there has been a call for reform in the education of health care professionals including nurses, based on outcomes that prepare graduates to successfully work in a new and continually changing health care system (Institute of Medicine, 2003). Part of the called-for reform in nursing education involves addressing the issue of content saturation: increasing quantities of information are included in nursing curricula such that it has become difficult to teach or learn this content in the present length of programs (Diekelmann, 2002; Forbes and Hickey, 2009; Giddens & Brady, 2007).

Giddens and Brady (2007) called for a concept-based curriculum in undergraduate nursing education, in which essential nursing concepts such as pain are identified and then taught “across environmental settings, the life span, and the health-illness continuum” (p. 67). They also proposed the use of exemplars, representative examples of client situations or problems, selectively chosen to best embody the concept and identified by incidence and prevalence throughout the lifespan, as the way of teaching each concept. The outcome of this curricular approach should be students who understand material conceptually and are then able to apply that knowledge to novel situations.

Anecdotal and descriptive evidence demonstrates that the concept-based curriculum is being considered or tried in

* Corresponding author.

E-mail address: lisa.lewis@duke.edu.

many nursing schools nationally (Giddens & Brady, 2007) and internationally (Mitchell, Jonas-Simpson, & Cross, 2013). Locally, the community college system in North Carolina has adopted a concept-based curriculum (Ralls, 2011). However, there is a lack of scientific evidence or information in the literature about the effectiveness of such curricula. To date, there has only been one evaluation published of a concept-based nursing curriculum, which was implemented in a baccalaureate program (Giddens and Horton, 2010). As of 2008, 50% of nurses were prepared at the associate degree or diploma level (Robert Wood Johnson Foundation, 2010). It is important for faculty of nursing programs, many of which are offered at the associate degree or diploma level, to learn about the effects of a concept based curriculum at these educational levels.

The diploma school of nursing in which this curricular change was implemented has had a long-standing tradition of success. The school has the benefit of a favorable reputation in the community based on history and outcomes. The diploma program has enjoyed high National Council Licensure Examination for Registered Nurses (NCLEX-RN®) pass rates (consistently above state and national levels) and a high percentage of graduates employed within 6 months of graduation. Another outcome the program has enjoyed is a high rate of satisfaction for students, alumni, and employers. With the program demonstrating success by so many measures, we proceeded with caution when considering curriculum change. However, the faculty valued evidence-based practice and innovation in nursing education, and recognized the need to move forward with curriculum revision.

The previous curriculum at the school utilized a combination of traditional organizing strategies, including simple to complex and stages of illness (Iwasiw, Goldenberg, & Andrusyszyn, 2009). In addition, the previous curriculum presented course content structured around clinical specialty areas and patient populations—for example, first semester presented fundamentals and dealt with long-term care populations, and third semester was devoted to pediatric and maternity content (Billings & Halstead, 2009). Anecdotally, the program had the reputation among students for having a discontinuous progression; that is, that the transition from first to second semester was a difficult one, then the transition to third semester was less challenging, with another big step between the third and fourth semesters. This curriculum progression may have been a possible explanation for 27% to 35% of the students in the last three cohorts being unable to complete the program on time (without repeating any class).

Curriculum revision was accomplished by developing fourteen basic concepts and identifying exemplars for those concepts that the faculty felt would best prepare the new graduate for practice as a nurse generalist. The entire faculty developed the fourteen concepts through a collaborative process that involved repeatedly examining program content and categorizing, and discussing until consensus was reached. Exemplars were then chosen based on analysis of a variety of information including NCLEX-RN® preparation

materials, considered to be the best estimate of content that may be tested on the NCLEX-RN®, and lists of highest frequency discharge diagnoses from regional hospitals, considered to represent common health problems for which nurses provide care. Concepts were introduced in the first semester and revisited throughout the program by presenting exemplars across the lifespan. The program progressed from a focus on assessment and wellness in the first semester, to a focus on acute and life-threatening situations in the final semester.

3. Context of the study

During the time of implementing curriculum change, no changes were made to admission or progression policies or practices. Faculty turnover during the time encompassing the six cohorts studied averaged 13% per academic year and was experienced almost entirely among the clinical instructor positions. A decrease in the National Council Licensure Examination (NCLEX) pass rate for Cohort 7, one of the three cohorts prior to the implementation of the new curriculum, did prompt the addition of a faculty advising program to the school. This may have had an impact on the program outcomes for the subsequent cohorts and is discussed later as a potentially confounding factor.

4. Methods

The study proposal was submitted to the institutional review board (IRB) for review and was declared exempt by the IRB. Data gathered were institution level and cohort level only, with no student identifying information. Data were collected for the three cohorts prior to the implementation of curriculum change (students whose entire educational program was in the old curriculum) and three cohorts following the curriculum change (students whose entire educational program was in the new curriculum). The following program outcomes were collected:

- Retention rate—percentage of cohort remaining in the program 1 year after admission.
- Completion rate—percentage of cohort completing the entire program.
- On-time graduation rate—percentage of cohort completing the program within four semesters of admission.
- Student end-of-program satisfaction rate—percentage of students surveyed agreeing to the statement “Overall I am satisfied with the program.”
- Alumni satisfaction rate—percentage of alumni surveyed agreeing to the statement “I am satisfied with my preparation from Watts School of Nursing.”
- Employer satisfaction rate—percentage of employers surveyed agreeing to the statement “I am satisfied with the preparation of this graduate from Watts School of Nursing.”

Download English Version:

<https://daneshyari.com/en/article/2680449>

Download Persian Version:

<https://daneshyari.com/article/2680449>

[Daneshyari.com](https://daneshyari.com)