



Contents lists available at ScienceDirect

Teaching and Learning in Nursing

journal homepage: www.jtln.org

Concept-based curricula: State of the innovation

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ARTICLE INFO

Keywords:

Concept-based curriculum
 Challenges to adopting a CBC
 Advice for curriculum development

ABSTRACT

This article explores the trajectory of nurse educators who have implemented a concept-based curriculum (CBC) by answering the question: "What is the experience of faculty and administrators who have made the leap?" The results of two surveys and a focus group were used to develop a check list summarizing strategies to develop, implement, and evaluate a CBC. This article provides valuable feedback for associate degree educators who are considering the development of a CBC.

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Introduction

For the last decade, nurse educators have been evaluating the benefits of adopting a concept-based curriculum (CBC) as the framework for undergraduate curricula. Struggling with content overload and the pressure to reduce the length of prelicensure programs, many nurse educators proposed replacing the traditional medical model or systems framework with a CBC. A CBC builds upon constructivism theory, which assumes that people construct their own knowledge of the world by reflecting on their experiences. Over time, one must analyze the way that new experiences may change their thinking and actions. This type of learning, referred to as *conceptual learning*, requires students to develop a deep understanding of the connections between new and past learning, the application of concepts in various contexts, and an understanding of their interrelationships (Higgins & Reid, 2016). Constructivism requires a change in teaching and learning strategies for both teachers and learners in the classroom, laboratory, and clinical experience. Implementing a CBC in a nursing program requires faculty to move from a "sage on the stage" to a "guide on the side" approach. It also requires students to accept responsibility for actively participating in the learning process.

Selected Literature Review

How widespread and effective has the trend toward implementation of a CBC in nursing education been? The literature describing development, implementation, and evaluation of CBCs in nursing education is sparse. In 2008, Lasater and Neilsen reported on the influence

of conceptual-based clinical learning activities on the development of nursing students' clinical judgment. Twenty-eight students (13 in the treatment group and 15 in the control group) participated in a quasi-experimental study to determine if exposure to two, three, or four concept-based learning clinical activities impacted their clinical judgment. The control group did not participate in any of the concept-based learning activities. At the end of the study, students participated in clinical simulations, and their performance was evaluated by faculty using the Lasater Clinical Judgment Rubric. Students also participated in focus groups to discuss their perceptions of the concept-based learning activities. The study found that the treatment group scored statistically higher in clinical judgment on the rubric than the control group did. Participants of the student focus groups agreed that concept-based learning activities allowed for enhanced development of their thinking (Lasater & Neilsen, 2008).

Dr. Jean Giddens et al. at the University of New Mexico, College of Nursing have been leaders in the CBC movement, particularly related to sharing their experiences and conclusions in the literature (Giddens & Brady, 2007). In 2008, Giddens et al., described the adoption of a conceptual approach to curriculum by the University of New Mexico, College of Nursing. As part of the curriculum revision, they also instituted clinical experiences driven by conceptually based learning and focused on experiences across population groups and practice settings. In 2010, 4 years after the new University of New Mexico curriculum was implemented, the process for evaluating the new curriculum was described (Giddens & Morton, 2010).

Other nurse educators have shared insights in the literature regarding the processes of development and evaluation of their own CBCs. For example, Deane and Asselin (2015) described a process and strategies to prepare faculty to teach in a CBC. Gooder and Cantwell (2016) used a focusgroup approach and a questionnaire to determine the satisfaction of 41 nursing students in an Associate Degree Nursing (ADN) CBC curriculum and 54 students in a partnering

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Registered Nurse-to-Bachelor of Science in Nursing (RN-to-BSN) CBC program. They found that students felt that participation in a CBC fostered critical thinking and the ability to transfer knowledge rapidly in clinical practice. They also viewed group discussions and assignments in the curriculum as a facilitator to learning and thought that the peer relationships developed during group learning were helpful in becoming novice nurses. In contrast, students identified redundancies in the curriculum and ineffective pedagogy as areas of dissatisfaction (Goode & Cantwell, 2016).

Because of the relative newness of concept-based curricula in nursing programs and the complexity of establishing a causal relationship between the type of curriculum offered and the resulting student outcomes (National Council Licensure Examination pass rates and attrition, graduation, and employment rates), there are no longitudinal, multisite studies that evaluate the impact of a CBC upon nursing student outcomes. However, Lewis (2014) reports that when the results of NCLEX-RN pass rates, retention and graduation rates, and program satisfaction of one prelicensure diploma RN program was compared before and after a change to a CBC, the results were positive. Although the study represents only the experience of one school before and after changing to a CBC, it does provide initial data to support that the use of a CBC in nursing education results in positive outcomes (Lewis, 2014).

Research Questions

As leaders in the CBC movement began to report in the literature on experiences in developing and implementing a concept-based curriculum, questions arose about the number of programs actually using a CBC and the effectiveness of such an approach. This article explores the trajectory of nurse educators as they embraced a CBC to prepare nursing students for practice. It answers the following questions: What is the interest by nursing programs in transitioning to a CBC? What has been the experience of faculty and administrators who have made the leap? What are the factors that made this transition successful? Two surveys of nurse educators, one in 2014 and one in 2016, and focus groups, also in 2016, sought to answer these questions.

2014 Survey

In 2014, an electronic survey was sent to a list of administrators in nursing education programs that were part of a publisher's data base. The purpose of the survey was to (a) determine the extent to which concept-based curricula have been implemented in nursing programs in the United States and (b) to elicit initial perspectives from program administrators regarding the effectiveness of the CBC approach (Sportsman, 2014). The survey was developed, implemented, and analyzed by Hanover Research. A total of 348 programs responded, and a donation of \$5 was given to the Nurse Faculty Leadership Academy, a program of Sigma Theta Tau International, for every response received. The largest percentage of respondents identified themselves as directors of nursing programs. The respondents were divided into two groups:

- Respondents representing organizations that adopted a CBC.
- Respondents representing organizations that were nonadopters of a CBC.

At the time of the survey (2014), 27% of the programs surveyed had adopted a concept-based nursing curriculum. Thirty-four percent of the programs considered nonadopters were in the process of developing or implementing a CBC. Those who reported that they had implemented a CBC or were planning to do so represented all types of nursing programs (ADN, BSN, and Licensed/Vocational Practical Nurse). However, adoption or development seems to be occurring at the fastest rate in ADN programs, followed by BSN, and, then, Licensed/Vocational Practical Nurse programs. Sixty percent of the respondents reporting

implementation of a CBC had graduated at least one student cohort. One-third of these respondents reported higher NCLEX pass rates for graduates of a CBC program, whereas 42% witnessed no change. Only 5% reported a drop in the pass rate (Sportsman, 2014).

The survey responses suggest that CBC adopters tend to believe in the beneficial quality of this approach to curriculum organization. For example, when asked whether CBC students were more likely to demonstrate better clinical performances than traditional students, more than a third of adopters agreed with this statement as compared with only 11% of nonadopters. CBC adopters felt that their students were also more confident in a clinical setting compared with those who were not involved in a CBC (Sportsman, 2014).

2016 Survey

In the 2 years following the initial survey, additional nursing programs adopted a CBC. Some of these were individual nursing programs, and some were part of a consortium of programs. A number of schools had moved beyond the development stages and were either in the midst of initial implementation of the curriculum or had actually graduated at least one cohort of students. The faculty and administration of these pioneering nursing programs have much to offer to those who were beginning the CBC journey. To capture this valuable experience, we sent another survey to nursing education leaders who had been involved in a CBC that had graduated at least one cohort of students. Again, the leaders were identified from a publisher's network of nursing programs that had implemented a CBC in the last 5 years. The IRB of a university affiliated with one of the authors approved the research process for this project. The purpose of the survey was to gather advice from these experienced nurse leaders regarding the following questions:

- What were the actual challenges experienced by the nurse leader and their faculty members as part of the development and/or implementation of a CBC?
- What strategies did the nurse leaders use to prepare faculty to transition to teaching in a CBC?
- How successful were the identified strategies in supporting the faculty transition?
- Have there been any changes in student outcomes (informally reported or documented) after implementation of the CBC?
- What strategies have supported the successful continuation of the CBC over time?

In March 2016, an e-mail was sent to 490 nurse leaders requesting that they complete a brief survey to capture the experience of implementing a CBC. Those who completed the survey were eligible for a drawing for a \$25 gift card. Nurse leaders were given 5 weeks to complete the survey, and a reminder e-mail was sent at week 3. Forty-four nurse leaders completed the survey, an 11.14% return rate. The majority of the respondents were nurse leaders in prelicensure programs. Slightly more ADN programs responded than BSN programs. Table 1 demonstrates the types of programs represented by the survey respondents.

As illustrated in Table 2 below, the majority of nurse leaders who participated in the survey were faculty members. In addition, slightly more than 27% of the respondents identified themselves as members of the curriculum committee for the program.

Focus Groups

To validate the results of the 2016 survey and to gather further qualitative data regarding the experience of developing and implementing a CBC, four concurrent focus groups, each made up of approximately 19 nursing educators participating in a 2016 Concept-Based Curriculum Symposium, discussed their experiences. These groups were

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