



National League
for **Nursing**

VISIONSERIES

**TRANSFORMING NURSING EDUCATION
LEADING THE CALL TO REFORM**

**NLN VISION STATEMENT:
INTEGRATING COMPETENCY-BASED
EDUCATION IN THE NURSING CURRICULUM**

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NLN VISION STATEMENT: INTEGRATING COMPETENCY-BASED EDUCATION IN THE NURSING CURRICULUM

MISSION

The National League for Nursing promotes excellence in nursing education to build a strong and diverse nursing workforce to advance the health of our nation and the global community.

CORE VALUES

The National League for Nursing implements its mission guided by four dynamic and integrated core values that permeate the organization and are reflected in its work: Caring, Integrity, Diversity, and Inclusion and Excellence.

INTRODUCTION

Competency-based education (CBE) is a learning model that focuses specifically on student outcomes in the form of demonstrating knowledge and skill mastery of identified key competencies. It shifts the educational focus from inputs (curriculum, learning objectives, content, syllabi) to outcomes (assessments, evaluations, performance) and considers that the path to mastery is not the same for every learner. The identification of competencies (outcomes) provides clarity and visibility of goals for the learner and requires greater learner engagement and accountability. This model shifts from a focus on the delivery of content to a focus on the ability of learners to demonstrate their competence. Unlike concept-based learning, which is another form of education focused on inputs (concepts), CBE focuses specifically on outputs, the learner's ability to analyze, formulate relevant actions, and perform them with confidence (mastery) (Bouchrika, 2021).

Competencies are an integrated whole of knowledge, skills, and abilities that can be used to make effective decisions and/or take effective action in a specific setting or situation. Competencies are measurable, occupationally relevant, and behaviorally based characteristics or capabilities of people. Well-written competency statements promote a shared understanding of an entity's expectations of what individuals must know and be able to do. Competency statements should:

- ◆ Embody a single, readily identifiable, observable, and measurable action or behavior
- ◆ Be clear, concise, and precise in describing the action or behavior
- ◆ Characterize mutually exclusive, non-overlapping actions or behaviors, when making up a set

Well-written competency statements describe an intended outcome, not the learning process. They depict the student's performance, not instructor activities, learning plans, or instructional strategies. Development of relevant competencies requires the use of multiple sources (Jones-Schenk, 2014) including:

- ◆ National standards and professional references (e.g., American Association of College of Nursing [AACN] Essentials, American Nurses Association [ANA] Scope and Standards, ANA Code of Ethics, National Academy of Medicine Future of Nursing report 2020-2030, Quality and Safety Education for Nurses [QSEN], National Council of States Boards of Nursing [NCSBN] NCLEX test plans)
- ◆ Conceptual framework and cross-cutting themes
- ◆ Clinical framework (nursing's version of entrustable professional activities [EPAs])
- ◆ Advice from industry experts, advisory councils, and employers
 - Subject matter experts

BACKGROUND

Nursing education is at a crossroads. Challenges include growing workforce demand, nurses' disillusionment with practice realities, long-standing disparities in care delivery, acknowledged history of racism and bias within the profession and its educational processes, digital transformation, and employer dissatisfaction with new graduate capabilities (Kavanagh & Sharpnack, 2021). All these challenges prompted nursing education leaders across the nation, including the National League for Nursing, to reevaluate nursing education methods and long-standing practices and turn toward CBE as a model for the future. Nursing has used aspects of CBE in its education models for many years. Licensure exams and certification exams are examples of criterion-based assessments that are fundamental parts of the development of nursing students and nursing professionals. Nursing education leaders, beginning with Carrie Lenburg in the early 2000s, have written about the value of a focus on competencies (Lenburg et al., 2009). In recent years, professionals have observed a slow but steady growth in interest around competency-based education. "CBE adoption efforts span all institution types, and we see indications of growth in the number of programs; however, much adoption activity remains piecemeal, with many institutions adopting some but not all elements of CBE" (Bouchrika, 2021).

In 2013, the Higher Learning Commission, an institutional accreditor, issued guidelines for schools that were implementing CBE; regional accrediting bodies also began to address CBE in their standards. In 2015, the US Department of Education offered a series of funding opportunities for experiments in CBE. By 2019, it determined that CBE was proven to be effective and implemented new rules for disbursement processes for CBE programs (Fair, 2019).

In 2013, the NCSBN began to surface through its Strategic Practice Analysis work, identifying dramatic increases in the complexity of nursing decision-making and practices that were not well captured in current national licensing exams. NCSBN began the work of redefining the NCLEX exam to focus more on clinical decision-making and the use of knowledge, shifting from measuring knowledge to measuring practice-ready competence (NCSBN, 2017).

Over the last 10 years, the NLN has challenged and supported nurse educators in their development and use of teaching methodologies that prepare novice nurses for professional practice. NLN publications such as *Hallmarks of Excellence in Nursing Education* (NLN, 2020), *NLN Core Competencies for Nurse Educators: A Decade of Influence* (Halstead, 2018), and NLN vision

statements focus on the use of advancing teaching strategies and faculty expertise to teach higher level reasoning skills throughout a program of learning (NLN 2015a, 2015b, 2015c). These publications advocate for faculty development and, importantly, engaging our practice partners as we extend and operationalize new teaching and learning strategies for our next generation of professionals.

Specifically, over the last five years, the NLN has examined the transition-to-practice dilemma, with a focus on curriculum innovation to address the gaps and support a strong, ready-for-practice nursing workforce. With a focus on curriculum innovation, the NLN transition-to-practice work over the last five years has generated a competency-based curriculum framework foundation. This curriculum framework provides: 1) a guide for teaching and learning strategies that align with QSEN and the Carnegie three apprenticeships and 2) a means of evaluating novice nurse transition to practice using observable performance measures (Forneris et al., 2022).

In 2019, after several years of deliberation and iteration, the AACN issued its first revision of the nursing essentials standards documents since 2011. With that draft, AACN stated that its new vision for nursing education included a full transition of all nursing programs to CBE within five years. The essentials documents were finalized in 2022 (AACN, 2021).

Nursing education leaders have acknowledged and agree that nursing education must be transformed to meet the challenges of nursing practice into the future. CBE holds promise for being able to lift and shift education beyond traditions of credit hours, clinical hours, and grades into a new, more fluid future of confident, competent new graduate nurses, at all levels of entry and practice, who will feel prepared and will be prepared to persist in high quality nursing practice across their careers.

COMPETENCY-BASED EDUCATION FRAMEWORK

The primary aspects of the curriculum are the competencies and the assessments. Course development begins with the end in mind (competencies), and learning assets are assembled to create learning experiences that prepare the student for assessment. The assessments are criterion-referenced measurements as opposed to norm-referenced measurements, and there is recognition that learner proficiency may require multiple attempts at proving mastery. Unlike norm-referenced assessments, where grades (ranking) are determined by norming of the group and the assessment is typically “one and done,” criterion-referenced assessments are aligned to standards (in this case competencies), much like licensure or certification exams. This difference requires a shift of lens to connect learning to competency-based assessments, which are harmonized and map directly to the competencies. Structured assessments can be objective exams or performance tasks and are standardized, including adaptive methods. Performance tasks can include papers, presentations, projects, skills labs, simulations, and video reflections, among others. Performance task evaluation is guided by rubrics and grading standards that ensure consistency and freedom from bias in evaluation. All forms of measurement/assessment must be psychometrically sound, reliable, and valid as measurement tools.

Competency-based learning utilizes an equity-based approach as students are treated equally based on demonstration of competency. In this approach, progression is not achieved in the same manner or timeframe for all. Some learners may progress to assessment within a given domain more quickly than others. Some learners require more time or, more likely, may have non-academic challenges that distract from progress. The use of student-specific learning data, guidance, and progression planning is an essential aspect of CBE, so even within a set course structure that may have a time limit, educators can personalize the learning path for students, allowing for acceleration and deceleration as needed for students to achieve mastery. Faculty become experts in co-creating pathways for student success, and students are held to the same high standards, but with greater accountability for achievement and more flexibility on progression.

Many studies have shown that CBE increases student accountability and engagement through increased ownership of the learning experience (Hodges et al, 2019; Lau et al. 2020; Wilson et. al., 2021). Faculty take on the role of learning facilitators, and students retain ownership of their individual learning. Faculty skills in understanding the social determinants of learning™ (Sanderson et.al., 2021) and fostering student progression using data are essential for success in CBE. Such skills have the potential to improve faculty satisfaction through a change in how faculty and students interact.

ASSESSMENT OF COMPETENCY-BASED EDUCATION

Competencies are the observable abilities of students for which performance can be assessed (Oermann, 2022; Oermann & Gaberson, 2021). The aim of assessment is to determine if students are progressing in their development of essential competencies and to evaluate their performance at a specified point in time. Few competencies are performed adequately with only one or two learning activities—the performance of most competencies is refined over time with repetitive practice. For this reason, assessments should be done throughout the program, not as a one-time occurrence at the end.

Assessment emphasizes formative evaluation and feedback to students for their continued learning (Lockyer et al., 2017). Assessment is accomplished not only by the teacher but becomes an important component as students self-assess their progress and learn when to seek guidance. At some point in a course and program, assessment shifts to validation of students' mastery. At the end of the program, this assessment results in decisions about whether students are practice ready.

Assessment in CBE should be planned for the program as a whole. This avoids focusing the assessment on a few competencies in a course, which would lead to potential gaps in assessment and fail to address the development of proficiency across courses and experiences. A program of assessment avoids relying on the same assessment methods in each course and allows faculty to build complexity in assessment. By planning across the program, educators can track students' progress in competency development and attainment, as well as identify competencies not being adequately addressed in the curriculum.

Understanding the intended meaning of the competency and standard of performance to be met guides assessment and ensures that students are not expected to perform at a proficient or an expert level as they develop their abilities. Most competencies are multidimensional, integrating knowledge, skills,

abilities, and values (Frank et al., 2010). Understanding the behaviors that are required to perform the competency guides the selection of methods for assessment. Differentiating normal from abnormal diagnostic results may be assessed adequately using a quiz or test. A quiz or test, however, is less likely to be effective for assessing ability to perform effectively in various team roles; that competency would be best evaluated with a strategy in which students have an opportunity to perform in various roles, such as in a simulation with behaviors observed and rated using a validated instrument. Most assessment methods provide data on multiple competencies. As faculty map assessment methods to competencies, multiple competencies that can be evaluated with those methods should be designated. Observing the performance of students in different roles in providing team-based care in a simulation may also provide data for assessing their abilities to collect data, respond to rapidly changing patient conditions, delegate and communicate relevant information to team members, among others.

A wide range of methods should be considered in a program of assessment in CBE. These may include, but are not limited to, methods such as case study and analysis, unfolding cases, written assignment, skill demonstration, role play, simulation, objective structured clinical examination, observation, e-portfolio, quiz, and test. Faculty should not rely only on testing as a measure of competency attainment but instead should select or develop a wide range of assessment methods. The key is ensuring that the methods provide relevant information to determine student ability to perform specific competencies or their progress toward an accepted level of performance.

When making high-stakes decisions in CBE, faculty and other evaluators need to be well prepared in observing and rating performance. Valid and reliable tools and rubrics are critical in assessment, and these and the process for the assessment need to be pilot tested before being used in a program. A best practice in any high-stakes assessment is to use more than one evaluator who ideally does not know the students (Oermann, 2022). Ryan, Holmboe, and Chandra (2022) identified the need to develop better measurement for competencies in medical education that are traditionally difficult to assess, such as professionalism, interprofessional teamwork, and care coordination among others. This is also true for nursing education. Equally important are validated methods for assessing values and attitudes of nursing students. New performance-based assessments, mapped to competencies and with assurance of their validity and reliability, would facilitate CBE in nursing education (Oermann, 2022).

COLLABORATION WITH PRACTICE PARTNERS

A call to foster greater collaboration among academic and practice partners has emerged. We must confront the issue that the academic, or preparation-to-practice, gap is increasing despite current efforts to mitigate the gap (Kavanagh & Sharpnack, 2021). Alignment of essential competencies for professional nursing practice is critical to safe patient care. However, the concept of competence is complicated and is often regarded in silos by academic and practice partners. Frequently, academic partners are judged for producing nurses insufficiently prepared to practice safely, and service leaders are criticized for having impractical expectations of new graduates. As early as 1972, Aydelotte first raised the dichotomy of separation between practice and education: "Nursing leadership must reorient itself and restructure itself in such a way that nursing education and practice are inseparable, are symbolic, and are united in purpose" (Aydelotte, 1972, p. 23).

The transition from student to professional nurse is demanding and difficult. The trajectory of this transition influences nurses' development and commitment to the profession (Numminen et al., 2015). Therefore, it is critical that academe and practice collaborate closely to establish appropriate competencies that promote the preparation of practice-ready nurses and ultimately foster professional commitment. The identification of key competencies has the potential to narrow the preparation-to-practice gap. To achieve acquisition of these competencies will require strong partnerships that provide clinical and classroom experiences and innovative strategies that validate that learners are achieving the critical outcomes required of the profession.

COMPETENCY-BASED EDUCATION BEST PRACTICES

Best practices require that students have visibility of the competencies they are required to develop across the program and the methods used for demonstrating competence. Faculty use student data, both individualized and in aggregate, to develop personalized learning plans for students. Students who need additional time to develop competencies or require additional support, instruction, or the ability to retake assessments or courses have an understanding of what they must do to succeed. (e.g., coaching reports or other tools that both faculty and students can use to plan learning development, similar to the Mountain Measurement Reports, 2022). Transparent assessment-retake policies and additional validated forms or rubrics are essential to allow students to progress to mastery.

Faculty plan courses around competency development incorporating concepts of variable student pacing. Identifying strategies for students who move at different paces within a course may require the use of different or additional resources for mastery. Student pacing will vary, which makes personalization at the course level important.

CALL TO ACTION

With 2022 declared the Year of the Nurse Educator, the NLN recognizes and celebrates the deep commitment of nurse educators in preparing nurses who are safe and practice with high quality and confidence (NLN, 2022). The NLN also recognizes that the competency of new nurses, further impacted by changes to the learning environment brought about by the pandemic, is an increasing concern for nurse educators and practice partners to ensure practice readiness, whether through the measurement of clinical judgment (NCSBN, 2017) or through expected competencies across roles and academic levels (AACN, 2021).

This call to action is for collective commitment by nurse educators and practice partners to achieve strong outcomes and graduate practice-ready nursing professionals through the embrace of competency-based education. CBE will transform nursing education by shifting the teaching-learning paradigm from content to competencies and from student interactions to student engagement.

RECOMMENDATIONS

For National League for Nursing

- ◆ Provide professional development programs to prepare faculty to develop various specializations to support learners to teach in a competency-based education (CBE) program.
- ◆ Develop faculty resources to include a toolkit for facilitating and assessing the mastery of core competencies across all academic levels.
- ◆ Support education research to identify best practices and evidence-based strategies to foster and sustain CBE.
- ◆ Collaborate with practice partners and national and international organizations to promote the utilization of CBE.
- ◆ Offer expert consultation in assisting schools in developing CBE as a viable model.

For Leadership in Nursing Programs (Deans/Directors/Chairs)

- ◆ Develop faculty expertise and identify expert resources to guide the implementation of CBE.
- ◆ Develop a strong change management plan in navigating the transformation to a competency-based approach in teaching and learning.
- ◆ Prioritize opportunities for faculty development in integrating CBE into the curriculum with a particular emphasis on assessments as key for measuring learning and the mastery of competencies.
- ◆ Invest in resources, including technology, that support data-informed teaching, learning, and assessment to facilitate learner progression toward mastery and practice readiness.
- ◆ Revise/update policies and practice to support implementation of CBE.
- ◆ Determine financial model to support CBE and assessment.
- ◆ Establish a learning environment that empowers students' ownership of learning, including self-assessment of progress toward mastery and practice readiness.
- ◆ Facilitate clear communication and transparency of competency outcomes with all stakeholders, including students and practice partners.
- ◆ Revise and establish new policies related to the implementation of CBE.

For Faculty

- ◆ Utilize the NLN faculty resource toolkit for evidence-based teaching and learning strategies related to CBE.
- ◆ Utilize a competency-based framework to conduct a curriculum and assessment crosswalk to transition to CBE.
- ◆ Develop assessment and evaluation strategies that support CBE and learner mastery.
- ◆ Develop/review policies, resources, and practices to support personalized learning and course progression (e.g., assessment retake policies, prior learning)
- ◆ Collaborate with practice partners to identify and verify key competencies for contemporary practice.

- ◆ Make program and course competencies visible to students and use coaching to enhance student success, progression, and accountability.
- ◆ Use student data and analytics by course or domain to guide instructional strategies, including which competencies are best achieved by learning activities, such as independent learning sessions, lecture, discussion, simulation, or group work.
- ◆ Develop specialization in assessment development (including developing rubrics) and data analytics to advance the use of personalized data to promote mastery of competencies.
- ◆ Develop specialization in instructional methods to assist students at various stages in competence development (pacing and personalization at the course level).
- ◆ Provide counseling and non-academic support for students for whom external forces create barriers to learning and develop personalized coaching plans as needed.
- ◆ Implement CBE program to ensure practice-ready graduates.

For Collaboration with Practice Partners

- ◆ Determine a shared vision, goals, and measurable outcomes for the partnership, the costs and resources required, organizational responsibilities, and value attained for both academic and practice organizations.
- ◆ Ensure a commitment from each organization to the development of alternative models for engagement with the partnership.
- ◆ Co-create clinical experiences that engage nurses and faculty in the preparation of new nurses for professional practice.
- ◆ Determine financial models to promote joint appointments for leaders in academia and practice to expand the faculty and clinical pool, encourage retention in preferred sphere of employment, facilitate research streams, and promote transformative collaborations.
- ◆ Create robust internships throughout the educational journey, culminating in precepted experiences that facilitate transition to practice.
- ◆ Engage nurses and faculty at all levels in designing immersion experiences and competency assessments that ensure practice-ready nurses.
- ◆ Invest in technology that transforms learning experiences and improves student outcomes.

CONCLUSION

Competency-based education focuses on students' abilities to demonstrate knowledge and skill mastery of key competencies. This model shifts from an emphasis on delivering content to promoting learner development of essential competencies for practice. Competencies are an integrated whole of knowledge, skills, and abilities. They are observable, measurable, and promote a shared understanding of what individuals should know and be able to do. Assessment in CBE determines if students are progressing in their development and meeting identified competencies. It is critical that academe and practice partners closely collaborate to establish competencies that promote the preparation of practice-ready nurses and ultimately foster professional commitment. This document from the NLN provides a vision of CBE in nursing and translates that vision into

actions that the NLN, nurse faculty, and leaders in schools of nursing can undertake to prepare nursing graduates who can meet the realities of practice in our current and future health care system.

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Vision Statement: Integrating Competency-Based Education in the Nursing Curriculum

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