

## **ORGANIZATIONAL FRAMEWORK**

The organizing framework of the associate degree in nursing program is derived from the Philosophy of the Division of Nursing. It supports the Values of the College, which include accountability, service and respect, professionalism, critical thinking, scholarship, knowledge, and skills. It provides rationale for curriculum decision-making and organizes learning in a logical, sequential manner. The curriculum is designed to prepare graduates to become licensed professional registered nurses. The curriculum promotes the value of education, formally and informally, preparing graduates for the process of articulation in other higher educational programs.

The curriculum recognizes the dynamic changes in health care, which are affected by an aging population, high acuity, client demographics, cultural diversity, technological advances and health care trends. The flow of the nursing curriculum is designed to meet the demands of change and to promote learning.

The organizational framework is based on an eclectic philosophy. An eclectic philosophy is one that draws knowledge and assumptions from nursing as well as general education theorists. It will assist to augment and form the basis of the organizational framework for the curriculum and the teaching / learning methods utilized by faculty for student learning.

The curriculum is planned to provide learning experiences in the cognitive, affective, and psychomotor domains. Throughout the curriculum, the study of nursing is coupled with the study of liberal arts, sciences, and humanities to enhance student knowledge and understanding of the client as a holistic being and the environment in which the client functions. General education, nursing concepts and sub-concepts are developed, supported, and expanded as the learner progresses through the curriculum. The curriculum centers on the nurse using the Nursing Process to assist the client across the lifespan of any level of health, to achieve fulfillment of physiological, psychosocial and spiritual needs.

The organizational framework illustrates the articulation of the Philosophy of Nursing concepts (Nursing, Client, Health, Environment and Education), and sub-concepts (Nursing Process, Teaching/Learning, Communication, Professional Behaviors, Safe and Caring Interventions, and Collaborative Care Management). The concepts and sub-concepts are integrated throughout the curriculum via the attainment of semester by semester competencies which lead to the assimilation of program outcomes. This formative and summative developmental process provides the basis for the organizational framework in the study of nursing (Billings & Halstead, 2005).

### **1. Nursing Process.**

The Nursing Process is a systematic, problem solving approach used as a framework to deliver nursing care and influence client outcomes.

Faculty believe that it is important for nurses to be effective in problem-solving approaches for clinical decision-making to achieve optimal client-centered outcomes. The quality of client care is dependent on the ability of the associate degree nurse to effectively combine a problem-solving approach with the Nursing Process in order to formulate plans of care which result in appropriate decision making, or critical thinking judgments. Systematic problem-solving approaches and the Nursing Process are taught early in the curriculum, strengthened and refined by continuous and repeated application in various class/clinical settings, involving varied client populations across the lifespan.

The most crucial step in the nursing process is identification of the problem, which is introduced to students through the use of Gordon's Functional Health Patterns approach. This holistic approach clusters data according to positive / negative behaviors that an individual uses to interact with the environment and to maintain health. Dysfunctional or potential dysfunctional health patterns result in actual or possible risk conditions. Use of the functional health pattern framework for assessment purposes assists the nurse to differentiate among areas for independent, dependent, and interdependent (collaborative) nursing interventions.

The faculty believe that the nursing process is positively influenced by the development of critical thinking. Further, faculty believe that critical thinking is gained through awareness and active learning opportunities. Critical thinking in nursing is a complex activity that is goal-directed thinking with purposeful inquiry and systematic thinking that leads to sound clinical judgment and decision-making. Critical thinking is the difference between learning facts and learning intellectual skills to formulate correct clinical judgments. Critical thinking activities are introduced early in the curriculum, with increasing opportunities for development and practice throughout the curriculum in a variety of situations and settings.

## **2. Teaching/Learning.**

Teaching / Learning is activities that take into account cultural diversity, health beliefs, and learning styles that impart knowledge or skills to promote active goal directed construction of meaning demonstrated through behavioral changes.

Early in the curriculum, basic adult, geriatric and pediatric learning principles and teaching methods are introduced. Students are expected to focus on teaching principles related to client / family learning. Multiple opportunities exist to enhance teaching / learning skills throughout the nursing program. Students learn to apply teaching/learning principles within a variety of situations, among diverse populations, and within acute, intermediate, and long-term care settings.

Teaching/learning principles are vital for health promotion, health maintenance, and health restoration. Health promotion (primary care) increases the client's health awareness, and provides an opportunity to educate clients about health/wellness states and skills. Education about health promotion includes information about resources which can support varying degrees of well-being. The nurse works with the client to maximize strengths that are specific and unique to the client. The nurse identifies client strengths to assist the client to reach optimal system functioning and quality of life, or to meet death with dignity.

Health maintenance (secondary care) involves the identification and promotion of positive health behaviors that preserve the client's current state of health. This includes the provision of ongoing care and education to assist the client to cope with continuous health threats and limitations of health.

Health restoration (tertiary care) focuses on clients who exhibit illness. Activities that support health restoration include nursing and medical interventions designed to return the client to appropriate and optimal health, developmental, and/or functional state(s).

### **3. Communication.**

Communication is the dynamic process of exchanging information through verbal, non-verbal, written, and electronic modes.

Confidentiality is considered to be an important aspect of therapeutic nursing care and a legal component of healthcare delivery practices. Therapeutic communication is a nurse/client experience that improves the nurse's ability to perceive and accurately communicate with clients, especially in regards to issues and feelings of sensitive or cultural significance. Effective communication is essential to promote positive outcomes / interactions. Initial nursing courses emphasize respectful nurse-client interactions, working with colleagues, and basic therapeutic communication skills. Succeeding courses continue to focus on communication skills and nurse interaction with individuals, families, groups of clients and the health care team in acute, intermediate, and long term care settings.

### **4. Professional Behaviors.**

Professional behaviors are activities and processes that demonstrate legal and ethical standards of professional practice including knowledge, skills, attitudes, values, and norms which promote accountability for individual actions and behaviors.

The nursing curriculum provides students with opportunities to become responsible, self-directed individuals prepared to make contributions as members of the nursing profession and healthcare community. Professional behaviors such as prioritization, delegation, safe care delivery, accountability, and responsibility are integrated and expanded into performance expectations, as described in semester by semester competencies.

Professional and personal development concepts are learned during initial nursing and general education courses, and are expected to expand both professional and personal horizons throughout the curriculum. Learning activities are designed to stimulate problem-solving and critical-thinking abilities, facilitate behavioral changes, and result in the acquisition of associate degree nursing competencies. The faculty assist the learner to develop increased responsibility for his/her own learning and to incorporate behaviors consistent with a commitment to life-long learning.

Legalities include principles related to criminal activities, nursing practice control, licensure, nurse impairment, nursing disciplinary actions, accreditation, etc. Ethical principles are moral values governing human relationships. Ethical principles include autonomy, beneficence, moral turpitude, nonmaleficence, fidelity, justice, and veracity.

Nurses practice within the ethical, legal, and regulatory frameworks of nursing and standards of professional nursing practice. The concepts of legal /ethical practice are introduced early in the curriculum, with expansion of the concepts within more complex frameworks throughout the curriculum. Students learn that nursing standards provide legal / ethical guidelines for effective nursing care. Faculty assist the student to develop an appreciation for the relevance of legal and ethical implications within a variety of individual, client, and professional situations.

The development of a student portfolio that includes personal goals and professional values provides a means to exhibit and showcase acquired knowledge. This process is facilitated by faculty, albeit through self-directed learner activities. Faculty support the belief that continued personal and professional growth is necessary for the development of professional nursing behaviors, and for the overall and continued benefit of client care.

The organizational framework articulates the faculty's beliefs in regards to the above sub-concepts. These are integrated throughout the curriculum and provide the basis for the study of nursing and the development of the associate degree nurse professional.

## **5. Safe and Caring Interventions.**

Safe and caring Interventions are behaviors derived from the knowledge and understanding of scientific principles, nursing theory, and evidence-based practice / research, that address the physiologic, psychosocial, and spiritual needs of the client / family.

The beginning nursing student learns basic client care skills and service which are technical in nature. Technical nursing skills gradually increase in complexity from the beginning of the program to the completion of the curriculum. The student is given multiple opportunities to practice and incorporate nursing care requisite behaviors in order to function as a competent professional nurse.

Inclusion of basic sciences, liberal art principles, and nursing knowledge are introduced early in the curriculum. Early introduction is employed to assist in the formation of sound evidence-based rationale for nursing practice.

Caring interventions are nursing behaviors and actions employed by nurses that assist clients to meet their physiologic, psychosocial, and spiritual needs. These interventions are based on knowledge and understanding of the natural and behavioral sciences, nursing theory, and evidence-based practice/ research. Nurses are expected to perform nursing skills competently and provide accurate, safe nursing care in a variety of healthcare settings.

Caring interventions are ones that demonstrate caring, compassion, concern, cultural sensitivity, and other client-centered measures.

Caring interventions are introduced early in the curriculum. Basic nursing care interventions related to adult and geriatric clients are introduced first. These basic skills are adapted in subsequent semesters to specialized client populations, with the introduction of additional and more complex skills. The integration of skills and service are expected in the performance of accurate and safe clinical decision-making.

## **6. Collaborative Care Management.**

Collaborative Care Management is effective coordination of human, physical, financial, and technological resources to promote optimal client and organizational outcomes utilizing an interdisciplinary approach.

Nurses are expected to collaborate with physicians, other healthcare team members, peers, community agencies, clients and family members. Collaboration requires the team to focus on client needs and base the coordination and decision-making process on client preferences and the availability of services and resources. Students learn that nurses can play a key and lead role in the promotion of a collaborative team approach which enhances holistic, client-centered care in a variety of healthcare environments.

Early curriculum content introduces collaborative care management principles. Further opportunities exist throughout the nursing program to apply theory to practice across a variety of healthcare settings.

Care management, not only includes an understanding of client-focused social, economic and environmental changes, but, additionally, includes continuity of care perspectives to enhance and optimize client well-being.

References:

Billings, D.M., & Halstead, J.A. (2005). *Teaching in nursing: A guide for faculty* (2<sup>nd</sup> ed.). St. Louis: Elsevier Saunders.

National League for Nursing, (NLN). (2000). *Educational competencies for graduates of associate degree nursing programs*. Sudbury, MA: Jones and Bartlett.

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