QSEN

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Overall Aim

To alter nursing’s professional identity formation so that when we think of what it means to be a respected nurse, we think not only of caring, knowledge, honesty and integrity… but also knowledge and commitment to quality and safety competencies.

QSEN Initiative – Funded by the Robert Wood Johnson Foundation

Health Care System Challenges

• High costs
• Fragmentation
• Health care disparities
• Primary care shortage
• Aging and sicker population

Future of Nursing Campaign for Action

- Initiative of AARP, the AARP Foundation and the Robert Wood Johnson Foundation
- Partners from business, consumer advocates, policy-makers, health care communities

The IOM Vision
2003 Health Professions Education

- All health professionals should be educated to deliver patient centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches and informatics.
What is the Work of Nursing?
Quality and safety cultures require new ways of thinking, specifically inviting nurses and others to:

- Keep the patient experience of care the primary focus for all decisions
- Understand and apply the basics of safety sciences
- Use systems thinking
- Adhere to evidence-based guidelines and interventions
- Embrace continuous quality improvement as part of daily work

QSEN Phase I (2005)
Birth
• Competencies and KSA for pre-licensure programs
• “…a project that will change what and how we teach future professionals” (2007)

Competencies
• Patient-centered Care
• Safety
• Evidenced Based Practice
• Quality Improvement
• Team work and Collaboration
• Informatics

Core Competency Comparisons

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<th>IOM</th>
<th>ACGME</th>
<th>QSEN</th>
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<tbody>
<tr>
<td>Apply Quality Improvement</td>
<td>Practice Based Learning &amp; Improvement Systems Based Practice</td>
<td>Quality Improvement Safety</td>
<td>Quality Improvement Safety Systems based practice</td>
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<tr>
<td>Provide Patient-Centered Care</td>
<td>Patient Care Interpersonal &amp; Communication Skills</td>
<td>Patient Centered Care</td>
<td>Patient Centered Care Communication Leadership</td>
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<td>Work in Inter-Disciplinary Teams</td>
<td>Professionalism</td>
<td>Teamwork and Collaboration</td>
<td>Teamwork and Collaboration Professionalism</td>
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<td>Employ Evidence-Based Practice</td>
<td>Medical Knowledge</td>
<td>Evidence based practice</td>
<td>Evidence based practice</td>
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<td>Utilize Informatics</td>
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Teamwork and Collaboration

QSEN Definition:
Function effectively in nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care

Gaps:
- Need training in team and team-based care
- Need to value patient and family members as essential parts of the health care team
- Need to appreciate the role of communication in errors and near misses
- Need to value and earn respect of team members
Evidence-based Practice

**QSEN Definition:**
Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care

**Gaps:**
- Need to approach practice with a spirit of inquiry
- Need to know how to identify good care from scientific evidence
- Need to scan sources of new knowledge relevant to one's practice
- Need to develop expertise in balancing evidence, clinical expertise and patient values and preferences when planning care

Quality Improvement

**QSEN Definition:**
Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems

**Gaps:**
- Need to own accountability for practice of one’s microsystem
- Need to know how the actual care in one’s microsystem compares to best practice
- Need to use quality improvement methods to close gaps between actual local care and good care

Safety

**QSEN Definition:**
Minimize risk of harm to patients and providers through both system effectiveness and individual performance

**Gaps:**
- Need to know how to create and support “just cultures” and “safety cultures”
- Need to learn from open reporting about adverse events, errors, and near misses
- Need to support a culture that holds teammates accountable for reliable attention to safety practices

QSEN Phase II (2007)

**Infancy**

Introducing the Concept of Autonomy

“Reshape professional identity formation in nursing to include commitment to quality and safety competencies” (2007)

- Pilot Schools
- Teaching strategies
- Collaborative Resources
- Launched website

QSEN Phase III (2009)

**Toddlerhood**

Taking the Initiative to Lead

- AACN
  - Regional meetings
- UNC
  - Graduate competencies
  - Partnership with the VA Quality Scholars Fellowship program

QSEN Phase IV February 2012

**Early Childhood**

Competence: Through Abilities Built in the Past

- AACN
- Graduate Level
Goals

- Continuing the strong foundation of QSEN
- QSEN and practice settings
- QSEN and scholarship
- QSEN and collaboration with organizations
The Future of QSEN
Adolescents

A time of TRANSITION

What can QSEN do for you?

- Faculty Resources
- Teaching Strategies
- Pilot school examples
- Consultants
- Annotated bibliography
- Conferences (past and future)

Forward Movement

- TAKES A VILLAGE
- Welcome ideas

Spread of the QSEN Movement

- Books
- Residency Program
- Partnerships
  - Academic Clinical
  - Interdisciplinary

As we grow...
Early Adulthood

- Clinical Partnerships
- Collaborative Interdisciplinary
- International partnerships

Building Relationships that last

As we grow... old?
Old Age

Passing on the message to the next generation.
Conclusion

• Past – Present- Future
  –Committed Determined Excited

Real change does not come from decree, pressure, permission or persuasion. Real change comes from people who are passionately and personally committed to a decision or direction that they helped to shape.

Margaret Wheatley

Thank You!

TEAMWORK  UBUNTU  MOMENTUM