A Formative Program Evaluation of Electronic Clinical Tracking System Documentation to Meet National Core Competencies

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Disclosures

Presenters have nothing to disclose.

Learning Objectives

The learner will be able to:

- Describe the formative program evaluation process used to systematically determine how students' clinical documentation in an ECTS meets national core competencies.

- Apply supporting evidence of students' clinical documentation in an ECTS to meet Family/Across the Lifespan NP Competencies.

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Background

- ECTS use in APRN education[12]
    - Documentation of students' clinical experiences
    - Faculty track documentation of students' clinical experiences

- Support for ECTS use
    - Institute of Medicine (IOM)[9]
    - Technology Informatics Guiding Education Reform (TIGER)[10]

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Background

- NONPF Core Competencies in APRN education[11]
    - Entry level expertise
    - Population focused core competencies

- FNP Programs Foci Competency Areas[11]
    - Leadership
    - Independent Practice

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Literature Review

- Paucity of research in the literature

- One integrative review[8]
  - Evaluated Technology and Information Literacy

Formative Program Evaluation

Inputs	Activities and Outputs	Outcomes	Impacts
ECTS Documentation of students' clinical experiences **Core Competencies** Leadership and Independent Practice	Process of reviewing and matching ECTS documentation to Core Competencies and developing a side-by-side grid	Evaluation of ECTS documentation of students' clinical experiences to meet Core Competencies	Discussion of how ECTS documentation meets Core Competencies

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Competency Evaluation

Directly Met

- Evidence is objectively documented in ECTS

Indirectly Met

- Requires evaluation by preceptor and/or faculty to support the objective documentation of the student as appropriate and accurate

Not Met

- ETCS does not support objective documentation, requires other methods of evaluation

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Table 2. Alignment of ECTS in Meeting Core Competencies

Competency Areas	Family/Across the Lifespan NP Competencies[11]	Evidence of ECTS Documentation to Meet Core Competencies	Directly Met*	Indirectly Met**	Not met***
Leadership	1. Works with individuals of other professions to maintain a climate of mutual respect and shared values.	1 & 2. Ability to track interdisciplinary referrals, patient education, and counseling in clinical encounters.	X	X	
	2. Engages diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs.		X	X	
	3. Engages in continuous professional and interprofessional development to enhance team performance.				X
	4. Assumes leadership in interprofessional groups to facilitate the development, implementation and evaluation of care provided in complex systems.				X

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Independent Practice Competencies	*Assessment* 1. Obtains and accurately documents a relevant health history for patients of all ages and in all phases of the individual and family life cycle using collateral information, as needed.	1, 2, & 3. Ability for students to complete clinical note and/or encounter log templates developed by educational institution faculty, which document relevant health histories, physical examination finding, age appropriate screenings, risk assessment findings, mental health evaluations, consultations, and referrals in clinical encounters.	X	X	
	2. Performs and accurately documents appropriate comprehensive or symptom-focused physical examinations on patients of all ages (including developmental and behavioral screening, physical exam and mental health evaluations).		X	X	
	3. Identifies health and psychosocial risk factors of patients of all ages and families in all stages of the family life cycle.		X	X	
	5. Assesses the impact of an acute and/or chronic illness or common injuries on the family as a whole.	5. Ability to document diagnosis and social history.		X	

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	Diagnosis				
	9. Plans diagnostic strategies and makes appropriate use of diagnostic tools for screening and prevention, with consideration of the costs, risks, and benefits to individuals.	9. Ability to document diagnostic tools utilized in ECTS.		X	
	10. Formulates comprehensive differential diagnoses.	10. Ability to document differential diagnosis in clinical notes.		X	
	Outcome Identification				
	6. Distinguishes between normal and abnormal change across the lifespan.	6 & 20. Ability to document assessment findings in clinical notes and encounter logs.		X	
	20. Analyzes the impact of aging and age-and disease-related changes in sensory/perceptual function, cognition, confidence with technology, and health literacy and numeracy on the ability and readiness to learn and tailor interventions accordingly.			X	
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	Planning & Implementation				
	4. Identifies and plans interventions to promote health with families at risk.	Planning focus: 4, 15, 18, 21, & 24. Ability to document interventions, plans of care, and referrals in clinical notes and encounter logs.		X	
	15. Assesses and promotes self-care in patients with disabilities.			X	
	18. Uses knowledge of family theories and development stages to individualize care provided to individuals and families.			X	
	21. Demonstrates knowledge of the similarities and differences in roles of various health professionals proving mental health services, e.g., psychotherapists, psychologist, psychiatric social worker, psychiatrist, and advanced practice psychiatric nurse.			X	
	24. Develops patient-appropriate educational materials that address the language and cultural beliefs of the patient.			X	

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	Planning & Implementation 11. Manages common acute and chronic physical and mental illnesses, including acute exacerbations and injuries across the lifespan to minimize the development of complications, and promote function and quality of living.	Planning & intervention implementation focus: 11, 12, 13, 14, 16, & 17. Ability for sequential documentation of recurring clinical encounters over time. Ability to document prescribing medications, therapeutic devices, performance of primary care procedures in clinical notes and encounter logs.	X	X	
	12. Prescribes medications with knowledge of altered pharmacodynamics and pharmacokinetics with special populations, such as infants and children, pregnant and lactating women, and older adults.		X	X	
	13. Prescribes therapeutic devices.		X		
	14. Adapts interventions to meet the complex needs of individuals and families arising from aging, developmental/life transitions, co-morbidities, psychosocial, and financial issues.		X	X	
	16. Plans and orders palliative care and end-of-life care, as appropriate.		X	X	
	17. Performs primary care procedures.			X	

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	Planning & Implementation	Synthesis of knowledge for planning and implementation focus: 7, 8, 19, & 23.			
	7. Assesses decision-making ability and consults and refers, appropriately.				X
	8. Synthesizes data from a variety of sources to make clinical decisions regarding appropriate management, consultation, or referral.				X
	19. Facilitates family decision-making about health.				X
	23. Applies principles of self-efficacy/empowerment in promoting behavior change.				X
	Evaluation				
	22. Evaluates the impact of life transitions on the health/illness status of patients and the impact of health and illness on patients (individuals, families, and communities).				X
	25. Monitors specialized care coordination to enhance effectiveness of outcomes for individuals and families.				X

Conclusions

Education

- Assists in meeting some APRN entry into practice competencies

Teaching

- Assists in meeting graduate program certification

Research

- Further/continued development of ECTS
- Further/continued development of ways to meet core competencies

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Questions

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