

OREGON CONSORTIUM FOR NURSING EDUCATION (OCNE)

CURRICULUM COMPETENCIES

The competencies guide the Oregon Consortium for Nursing Education (OCNE) curriculum, are defined by faculty in OCNE partner programs, and are based on a view of nursing as a theory-guided, safety-oriented, evidence-based discipline. The competencies support patient-focused care across a variety of settings. The term patient is used to broadly identify the recipient of care and includes direct care recipient, family, patient community, or population. At times, population or community is identified for specific purposes.

The competencies recognize that effective nursing requires a person with particular values, attitudes, and practices. Accordingly, there are two categories of competencies: professional competencies and nursing care competencies. Professional competencies define the values, attitudes, and practices that competent nurses embody and may share with members of other professions. Nursing care competencies define relationship capabilities that nurses need to work with patients and colleagues, the knowledge and skills of practicing the discipline, and competencies that encompass understanding of the broader health care system. In all cases, the patient is a member of the health care team, and is defined as the recipient of care, considered an active partner in care, and includes the individual, family, or community. A competent nurse provides safe care across the lifespan directed toward the goals of helping a patient (individuals, families, or communities) promote health, recover from acute illness and/or manage a chronic illness, and support a peaceful and comfortable death.

Students are expected to integrate all competencies into their learning experiences, as they are relevant to the situation. By the end of the OCNE curriculum program, the student integrates all ten competencies into their emerging practice.

OCNE Competency #1: A competent nurse bases personal and professional actions on a set of shared core nursing values

1.1 Nursing is a humanitarian profession based on a set of core nursing values. As affirmed in the ANA Code of Ethics and other nursing literature, these values include social justice, caring, advocacy, protection of patient autonomy, prevention of harm, respect for self and others, collegiality, authority, accountability, responsibility for nursing practice, and ethical behavior.

1.2 Ethical dilemmas are encountered in clinical practice. Nurses are obligated to notice, interpret, respond, and reflect on these dilemmas using ethical principles and frameworks as a guideline.

1.3 Nursing has a legal scope of practice and professionally defined standards that enable nurses to practice at the top of their license.

OCNE Competency # 2: A competent nurse uses reflection, self-analysis, and self-care to develop insight.

2.1 Ongoing reflection, critical examination, and evaluation of one's professional practice and personal life improves nursing practice.

2.2 Reflection and self-analysis encourage self-awareness, self-regulation, and self-care.

OCNE Competency # 3: A competent nurse engages in intentional learning.

3.1 Engaging in intentional learning develops self-awareness of the goals, processes, and potential actions of this learning and its effects on patient care.

3.2 Purposely seeking new, relevant knowledge and skills guides best practice development, supporting safe and effective patient care.

3.3 Integrative thinking establishes connections between seemingly disparate information and sources of information that will be applicable in any situation.

OCNE Competency # 4: A competent nurse demonstrates leadership in nursing and health care.

4.1 Nurses take a leadership role to meet patient needs, improve the health care system, and facilitate community problem solving.

4.2 Nurses effectively use management principles, strategies, and tools to improve systems, processes, and outcomes.

4.3 Nurses are skilled in working with assistive nursing personnel including the assignment/delegation of responsibilities and supervision.

OCNE Competency #5: A competent nurse collaborates as part of a health care team.

5.1 The patient is an essential member of the health care team.

5.2 Successful health care depends on a team effort, and collaboration with others in a collegial team is essential for success in serving patients.

5.3 Learning and growth depend on providing, receiving, and using feedback in a constructive manner.

5.4 Supporting the development of colleagues creates a *just culture* in the health care setting.

OCNE Competency #6: A competent nurse is able to practice within, utilize, and contribute to all health care systems.

6.1 Components of the system must be considered when coordinating or planning care and when engaging with the interprofessional team.

6.2 Improvements to health care utilize information technology for the collection and analysis of data.

6.3 System-level thinking is required in the development and implementation of health policy to achieve health equity.

6.4 Improving health literacy and expanding access to health care are essential to improve outcomes.

6.5 Responsible management and utilization of health care resources is essential.

OCNE Competency # 7: A competent nurse practices relationship-centered care.

7.1 Patient-centered care is based on developing mutual trust and respect for the autonomy of the patient.

7.2 Culture, history, health disparities, family, and community must be considered in a patient-centered approach.

OCNE Competency #8: A competent nurse communicates effectively.

8.1 Therapeutic communication establishes a caring relationship with patients, families, and/or communities to advocate, develop, and facilitate care.

8.2 Accurate and complete communication with both patients and the health care team is essential to ensure patient safety and provide for comprehensive continuity of care.

8.3 Successful communication requires attention to social and cultural influences and the use of appropriate communication modalities and technologies.

8.4 Health teaching requires attention to the patient's and family's health literacy, cognitive and physical abilities, as well as community values and beliefs.

OCNE Competency #9: A competent nurse makes sound clinical judgments

9.1 Nurses use a variety of frameworks, classification systems, and information management systems to organize data and knowledge for clinical judgment.

9.2 Nursing judgment is an iterative process of noticing, interpreting, responding, and reflecting.

9.3 Noticing, interpreting and responding require use of best available evidence, a deep understanding of the patient experiences and cultural influences, recognition of contextual factors, as well as one's own biases that may influence judgments and sound clinical reasoning.

9.4 Clinical judgment involves the accurate performance of cognitive, affective, and psychomotor skills in the delivery of care while maintaining safety of the patient, family, community, environment, and self.

OCNE Competency # 10: A competent nurse, locates, evaluates and uses the best available evidence.

10.1. Legitimate sources of evidence for decision-making include research evidence, standards of care, community perspectives, a deep understanding of patient experience and preferences, and practical wisdom gained from experience and participation in professional organizations.

10.2. Knowledge from the biological, social, medical, public health, and nursing sciences is constantly evolving.

10.3 Best practice in nursing is continuously modified.