Concept-Based Curriculum and Conceptual Learning: Lessons Learned
Implementing a Concept-Based Curriculum Conference
University of Kansas
10.5.12

Paradigm Shift in Education
- Recognition for new approaches for teaching
- Better understanding how people learn
- Greater diversity of learners in the classroom
- Technology for learning
- Information Age
  - content saturation within curricula
  - information management

Changes in Healthcare and Nursing
- Changing patient and nurse demographics
- Increased patients with complex health care needs
- Emerging technologies that change the way we practice
- Complex health care environment
- Interprofessional collaboration for quality care

Overview of Presentation
- Lessons from the past
- Lessons from the literature
- Recent lessons learned: Where we are now
- Moving forward into the future

Professional Identify
- Nursing’s identity was largely under the umbrella of medicine
  - care the ill/war wounded, mentally ill, disenfranchised/neglected populations
  - Education largely consisted of “training” programs within hospitals
  - Rule-bound education and practice
  - Early movement to begin transition from “training” to “academic degrees” in early 20th century

LESSONS FROM THE PAST: THE EARLY YEARS
Emergence of Nursing Grand Theories

- 1960s and 1970s nursing was in an identification stage and a separate and distinct profession from medicine.
  - What is nursing?
  - Who are we?
  - What are we about?

Nursing Grand Theories

- Paplau 1952: Interpersonal Relations Model
- Henderson 1955: Nature of Nursing
- Abdellah 1960: Topology of Nursing problems
- Orlando 1962: Deliberative Nursing Process
- Johnson 1968: Behavioral Systems Model
- Rogers 1970: Unitary Human Beings
- Orem 1971: Self-care theory.
- King 1971: Goal Attainment Theory
- Neuman 1972: Health Systems Model
- Roy 1979: Adaptation model
- Watson 1979: Philosophy and Science of Caring

Nursing Theory

- Nursing theory aims to describe, predict, and explain the phenomenon of nursing practice.
- Nursing theory provides foundations of practice and provides direction for nursing’s future development.
- Theory helps to distinguish professional practice and maintain professional boundaries.

Theory-Based Curricula

- Movement of using nursing theory as a basis for nursing education.
- Concepts from the theories were used as a basis for these curricula.
- Example
  - Orem’s Self-Care Framework was widely used for curriculum development.

Concepts from Orem’s Theory

- Self-care
- Self-care agency
- Therapeutic self-care demand
- Self-care deficit
- Nursing agency
- Nursing system
**PERSONAL REFLECTIONS**

**End of an Era**

- Some schools were successful and excelled with the theory-based approach and use of concepts.
- Many schools faced challenges taking abstract theory and making it useful for the faculty member and learner.
- Movement away from theorist and conceptual approach.
  - Many felt conceptual approach was better situated in graduate nursing education.

**Take Home Points**

- Concept-based curriculum in nursing has origins to the Theory-based nursing curricula era.
- There was often a disconnect between the curriculum structure and teaching practices.
- Although there were some successes, many schools abandoned this approach because of challenges applying an abstract theory as a framework for nursing curriculum.

**LESSONS FROM THE LITERATURE**

**Nursing Education Literature**

- Growing body of literature reflecting concern about:
  - How students are taught
  - Volume of content in curricula
  - Growing complexity of health care

**Themes from the Nursing Literature**

- Bevis (1988) “...reform efforts in nursing rarely change the substance of the curriculum itself but merely ‘switch, swap, and slide content around’.”
Themes from the Nursing Literature

- AACN (1998) “…is it possible to “prepare beginning level professional nurses for the future in a four-year time frame?” (p.19).

- Tanner (1998) questioned if the expectations set forth in Essentials was a “blueprint for 21-year curriculum” p. 383

Themes from the Nursing Literature

- Burton (2000) students… “are expected to learn a large volume of material in a short period of time. As a consequence, students tend to rely on rote memorization to pass exams.”

- Diekelmann (2002) “….textbooks are thicker and course content more complex. Students complain of ‘too much content’ as they appear to have reached their limits with memorization.”

Themes from the Nursing Literature

- IOM (2003) specifically cites “overly crowded curricula” as one of many challenges in health education reform (p. 38).

- NLN (2003) …. “many nurse educators continue to teach as they were taught and for a health care system that no longer exists…”

- Ironside (2004) “The dilemma nurse educators are increasingly facing is not what to include in a course, but what to leave out.”

- AACN (2006) “Generalist education at the baccalaureate level is foundational to specialty practice”

Themes from the Nursing Literature

- Belleck (2008) “Most of our teaching ‘innovations’ offer incremental ideas for tinkering at the edges, rather than true transformation in the way we conduct nursing education…..By and large, nursing education is still ‘teaching heavy’ and ‘learning light.’

- Benner, et al., 2010
  - There is a significant gap between today’s nursing practice and the education for that practice.

  - U.S. nursing programs are very effective in forming professional identity and ethical comportment........but health care professions know surprisingly little about the contributions of others!”
Themes from the Nursing Literature

- Institute of Medicine (2011)
  “An improved education system us necessary to ensure that the current and future generations of nurses can deliver safe, quality, patient-centered care across all settings”
  “Care has become more complex, nurses must make critical decisions associated with care for sicker, frailer patients and work with sophisticated technology.”

Education Literature - Concepts

Distinctions between factual information and concepts.

<table>
<thead>
<tr>
<th>Learning Factual Information</th>
<th>Conceptual Learning</th>
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<tbody>
<tr>
<td>Emphasizes the acquisition and storage of information to be retrievable on demand</td>
<td>Emphasizes the kinds of things one is able to do with information one has acquired</td>
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<tr>
<td>The delivery of factual information by the teacher is paramount</td>
<td>Factual material is subordinate to the larger patterns and relationships which define the subject area.</td>
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<tr>
<td>Surface learning is marked by memorization, rote learning, and unquestioning acceptance of textual information</td>
<td>Deep conceptual learning is characterized by making connections between concepts and real world situations.</td>
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Themes from Education Literature

There is a need to bridge factual knowledge and concepts in the learning process.

Themes from Education Literature

- Factual knowledge is important to conceptual thinking; a person can’t generalize without a concrete information.
- An emphasis on conceptual learning in the classroom builds on knowledge entailed by the subject matter of the course.
- Factual information must be seen as a necessary means to a higher end, and not as an end in itself.

RECENT LESSONS LEARNED: WHERE WE ARE NOW

Concept-based Curricula: Circa 2010

- Conceptual approach is viewed not as just a curriculum, but rather as an approach for teaching and learning.
- Conceptual learning is supported and enhanced through a concept-based curriculum.
Selecting Concepts

- Concepts are not selected based on any one theory – rather, concepts represent nursing practice as aggregate representation of the literature.
- A scan of the nursing literature reveals countless nursing concepts.
- Concepts are selected based on importance or relevance to nursing practice; they should be sustainable, and useful from an educational perspective.
- Selection of concepts should not be an emotional process.

Designing a Curriculum

- Concept categories or themes provide framework for concept courses.
- Concepts should be featured in all courses
  - Didactic courses
  - Laboratory courses
  - Clinical courses
- Exemplars should be specifically selected to be used for deep learning.

Designing the Curriculum

- Featured concepts within a course and taught in depth; interrelated concepts thereafter
- Concepts clustered within themes to enhance recognition of interconnectedness
- Clinical courses build on additional exemplars

Teaching Conceptually

- Purposeful focus on the concept through a concept analysis.
- Link to foundational knowledge and previous experiences is essential.
- Use of exemplars for context learning.
- Purposeful linkages to other concepts, other exemplars.

Concepts and Building Connections

Benefits of Conceptual Approach

- Focus on problems across disease categories and populations
- Fosters systematic observations about events or conditions that influence problem
- Fosters understanding of relationships among events or conditions that impact situation
- Focus on nursing actions and interdisciplinary efforts
Challenges related to Changing Curriculum

- Limited number of faculty with curriculum expertise among today’s faculty
- Too many concepts
- Too many exemplars
- Faculty feel threatened about change and perceived loss of teaching content
- Feel overworked – don’t have time to change

Challenges related to Changing Curriculum (Cont.)

- Lack of understanding regarding the conceptual approach
- Undermining efforts to stop change
- Curriculum creep (going back to old way)
- Perspective that current system works fine (as evidenced by acceptable NCLEX pass rates)
- Concept curriculum doesn’t work (referring to previous attempts theory based curricula)

Challenges in Teaching

- Retooling teaching skills
- Student engaged with learning is essential

Learning in higher education as become a passively process of knowledge “merely received into the mind without being utilized, or tested, or thrown into fresh combinations. This form of education is not only useless; it is, above all things, harmful in that it produces ‘mental dry rot.’” (Alfred Whitehead)

Challenges with Students

- Student perspectives and expectations
  - Want information “given” to them
  - Expect instructor to do the work
- Preparedness
- Nursing faculty need to help students in this paradigm shift in learning.

Take Home Points

- Adopting concept-based curriculum is challenging
- Need to have a comprehensive implementation plan
- Faculty development in conceptual teaching practices is needed
- Changes in student learning experiences are needed

LOOKING AHEAD USING BEST PRACTICES
Fundamentals Elements for Conceptual Learning
Conceptual learning means learning to advance from the particular to the general, synthesize relationships, and extrapolate from the known into the unknown.

- Connect to prior learning
  - Build on experiences/prior knowledge
- Context
  - Connect concepts to the real world
- Student engagement
  - Students must be involved in the learning process

Best Practices
- Transfer is goal of conceptual teaching and learning
- Focus on concepts over content
  - Infuse/utilize factual knowledge within conceptual learning
- Less is more
- Think discriminatively
- Value thinking, nurture it and make it visible
- Authentic assessment

Reenvisioning Role of Instruction
Learning Coach vs Information Disseminator

Curriculum Change Process
- Change management = understanding and working toward desired outcome and how to get there.
  - Change process requires letting go of old and beginning the new
- Transition management = convincing people to leave old way.
  - Transition begins with the old and ends with the new

Begin with an Ending
- Identify who is losing what
- Accept / acknowledge importance of loss
- Expect behaviors:
  - Overreaction
  - Grieving
- Provide information (over and over)
- Make clear what is over and what is not over
- Take a piece of the old forward

“The single biggest reason organizational changes fail is that no one has thought about ending or planned to manage their impact on people.” (Bridges, 2009).
Neutral Zone

• Anxiety rises; motivation falls
• People tend to become polarized
  – Some want to rush forward and others want to go back to old ways; discord rises.
• Strategy is to “normalize” the neutral zone
  – Temporary systems
  – Reframe end/loss from negative to positive
  – Strengthen communication
  – Transition monitoring team

End with a Beginning

• Clarity and strategic timing
• Ambivalence
• Communicate purpose; create a picture of what successful change looks like
• Create and communicate thoughtful plan
• Reinforce change
  – Recognize and celebrate early success
  – Symbols of “new identity”

QUESTIONS