

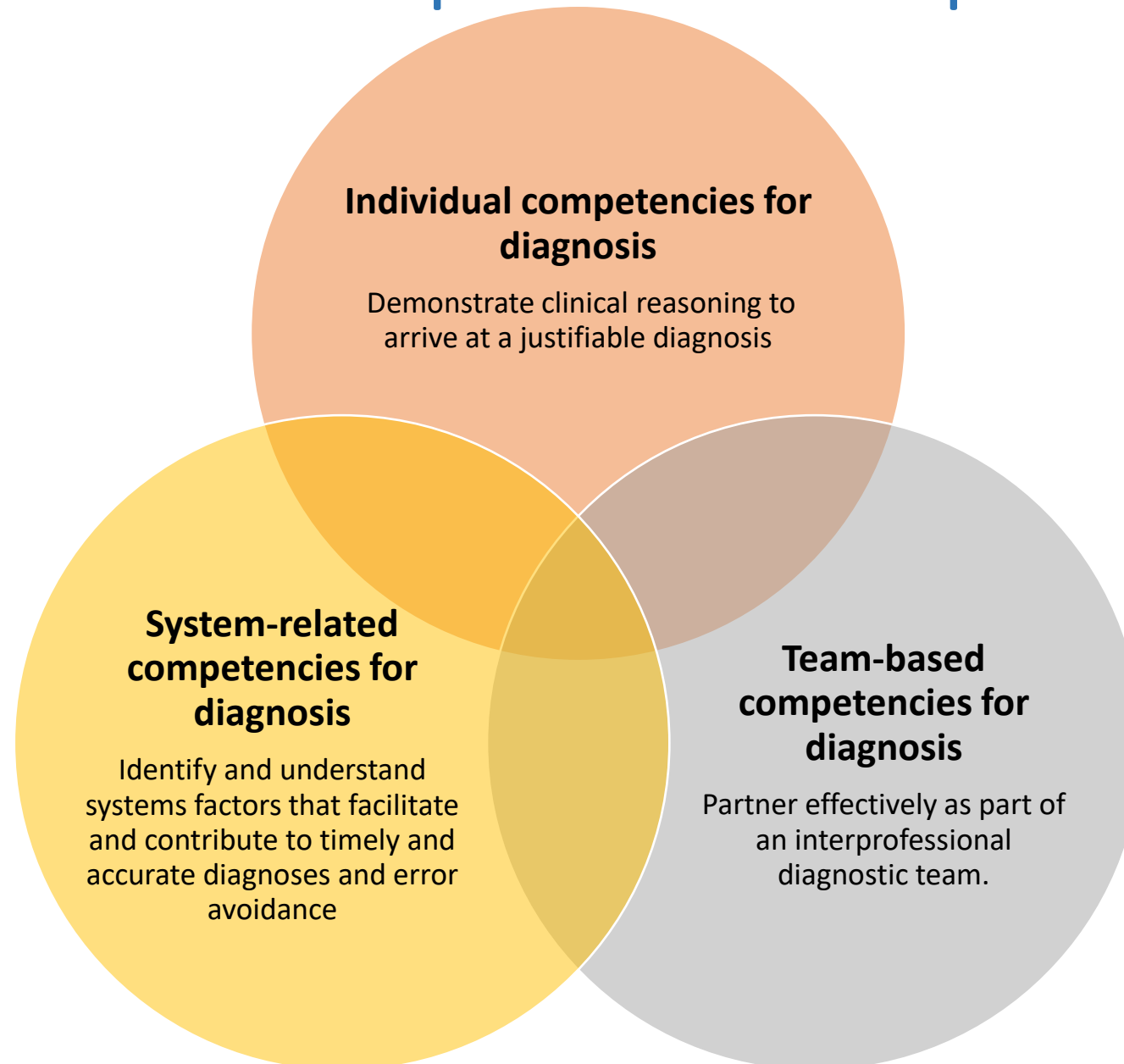


# Interprofessional Competencies in Nursing Education to Improve Diagnostic Safety

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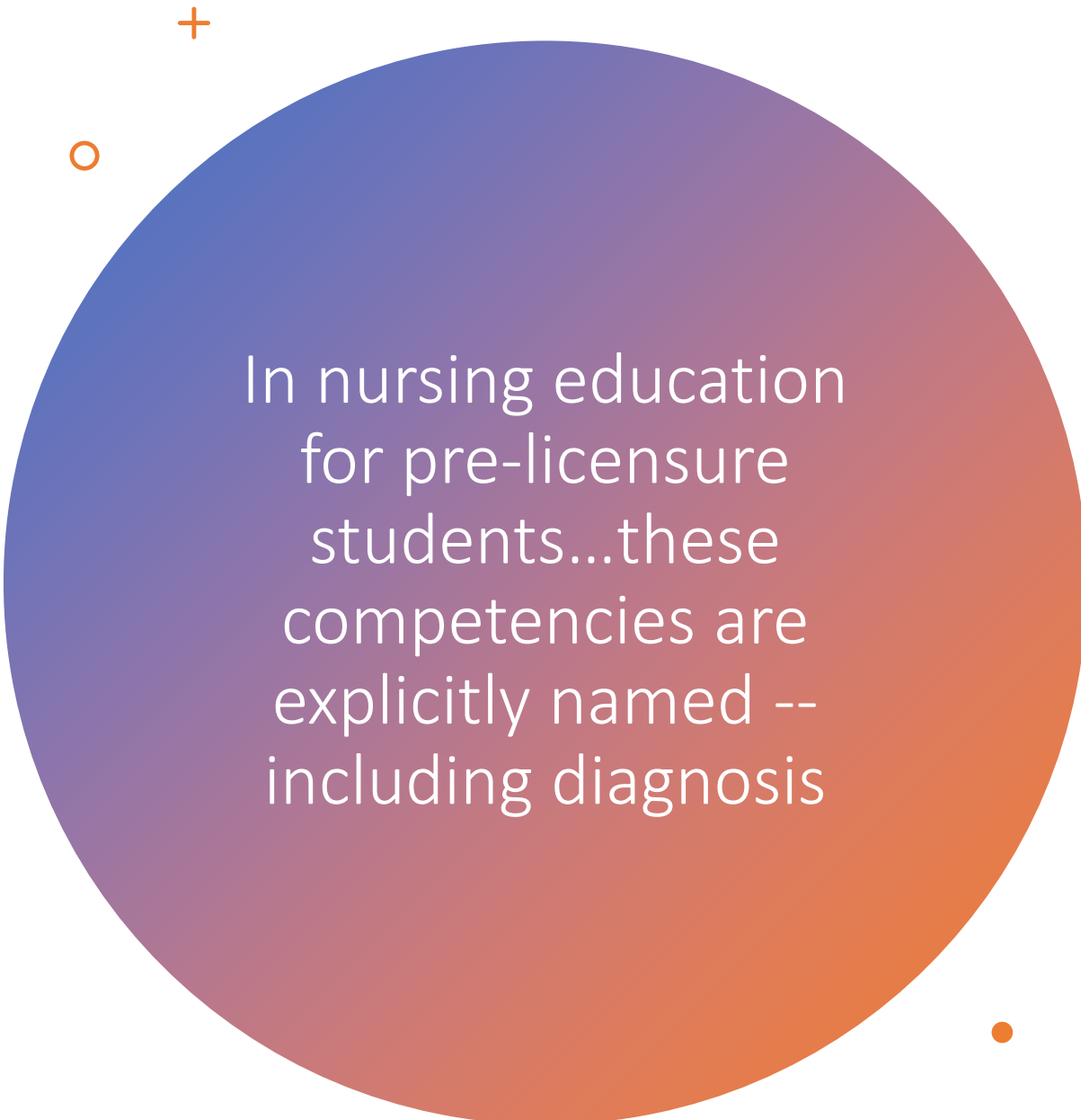
# Interprofessional competencies for improving diagnosis



**Competencies for improving diagnosis: an interprofessional framework for education and training in health care**

•Andrew Olson , Joseph Rencic , Karen Cosby , Diana Rusz , Frank Papa , Pat Croskerry , Brenda Zierler , Gene Harkless , Michael A. Giuliano , Stephen Schoenbaum , Cristin Colford , Maureen Cahill , Laura Gerstner , Gloria R. Grice and Mark L. Graber, [Diagnosis](#).

<https://doi.org/10.1515/dx-2018-0107>



In nursing education  
for pre-licensure  
students...these  
competencies are  
explicitly named --  
including diagnosis

These competencies are there, including:

Interprofessional partnerships

System-based practice

Demonstrating clinical judgment

Diagnose actual or potential health problems  
and needs, which includes

- Contributing as a team member to the formation and improvement of diagnoses
- Understanding and applying the results of social screening, psychological testing, lab data, imaging studies, and other diagnostic tests in actions and plans of care

# State of Nursing Education for Pre-Licensure Students

*Crisis in Competency: A Defining Moment in Nursing Education* called out that new graduates of nursing have lower clinical judgment and reasoning scores than previously seen:

- A decade of performance-based development system assessments representing more than 10,000 new graduate RNs reveals an alarming year-over-year decline in initial competency.
- Less than 10% of new graduate nurses possess safe clinical judgment skills
- 40% fail to recognize a patient's urgent problem
- 50% don't intervene appropriately.
- Study by the National Council of State Boards of Nursing revealed that 65% of new graduate nurses don't notice a patient's clinical deterioration and respond

Kavanagh & Sharpnack. (2021). Crisis in competency: A defining moment in nursing education. *OJIN: The Online Journal of Issues in Nursing*, 26(1). <https://ojin.nursingworld.org/table-of-contents/volume-26-2021/number-1-january-2021/crisis-in-competency-a-defining-moment-in-nursing-education/>

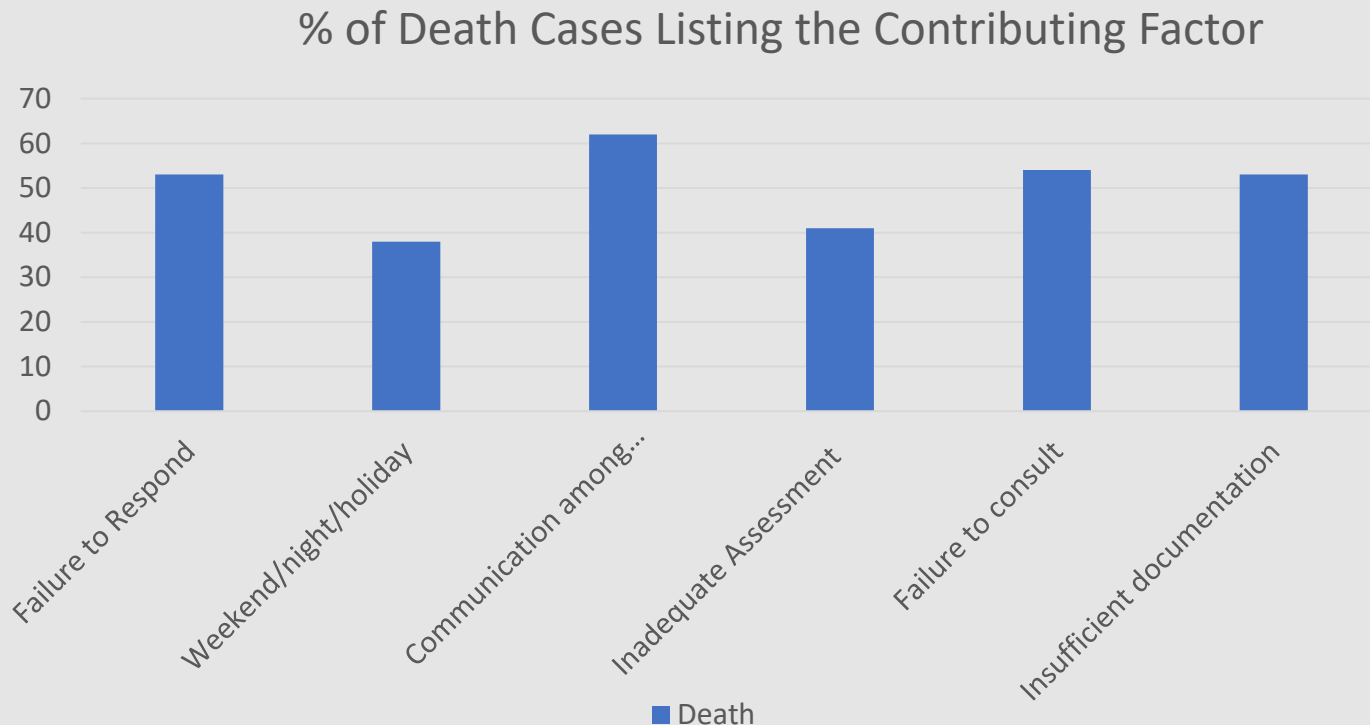


Nurses have always been responsible to make their own, independent judgments.

- Controlled Risk Insurance Company (CRICO) Strategies' repository of malpractice claims, contains ~30% of United States claims.
- 139 malpractice claims related to diagnosis (n=139) naming nurses as primary responsible party
- 647 malpractice claims related to physiologic monitoring naming nurses

\*Gleason, K.T., Jones, R., Rhodes, C., Greenberg, P., Harkless, G., Goeschel, C., Cahill, M., & Graber, M. (2019). Evidence that nurses need to participate in diagnosis: Lessons from malpractice claims. *Journal of Patient Safety*. Doi: 10.1097/PTS.0000000000000621.

## Impact of Contributing Factors on Likelihood of Death among Diagnosis-Related Malpractice Cases

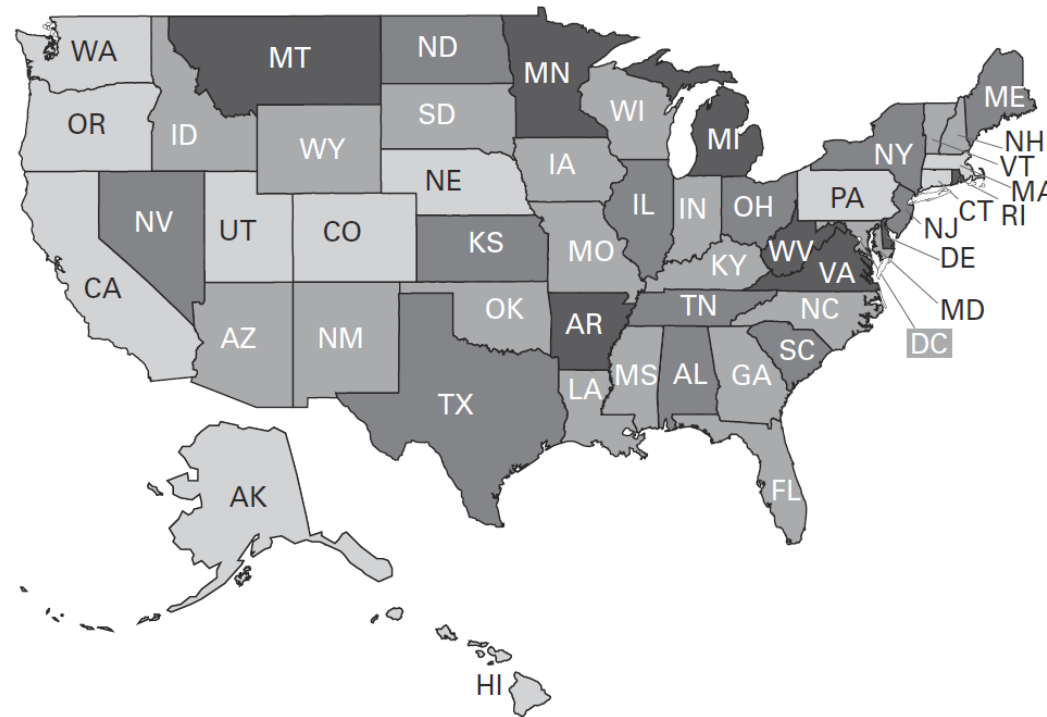


- Communication among providers was the only statistically significant contributing factor.
- Communication among providers was associated with significantly higher indemnity incurred (\$86781, 95% CI: \$18058, \$175505), and higher expenses incurred (\$20575, 95% CI: \$3685, \$37465)
- It was associated 3.01 greater odds of death (95% CI: 1.50, 6.03)

# Regulation

We identified variability in restrictions on RN participation in diagnosis:

- In some states, participation in diagnosis is expressly prohibited.
- In other states, nursing diagnosis is specifically allowed, but not medical diagnosis.
- A few states do not restrict RNs from participating fully in contributing to a patient's diagnosis.



- No specific language addresses diagnosis in the NPA
- Restricted language: NPA expressly restricts RNs from contributing to medical diagnosis
- *Nursing diagnosis* language is used in the NPA
- Unrestricted language: NPA allows RNs to contribute to a patient's diagnosis as within their scope of practice

*Note.* APRN = advanced practice registered nurse; NPA = nurse practice act; RN = registered nurse.

*Source.* National Council of State Boards of Nursing. (2018, April 23). APRN consensus implementation status.

M., Gleason, K.T., Harkless, G., Stanley, J., & Graber, M. (2019). The regulatory implications of engaging registered nurses in diagnoses. *Journal of Nursing Regulation, 10*(2). DOI: [10.1016/S2155-8256\(19\)30110-3](https://doi.org/10.1016/S2155-8256(19)30110-3)

# What can help us be more effective at clinical judgement?

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Coaching and evaluating new graduate nurses using Tanner's Clinical Judgment Model has great potential, which involves recognizing a change in condition, interpreting the cause, responding, and reflecting

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Team-based interprofessional training, such as AHRQ's TeamSTEPPS

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Moving nursing education to be adaptive and competency-based, with more interprofessional components, versus the currently more common cohort-based, one-size fits all format

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Questions?  
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