

"How We Did it: NMNEC project 2000-2015"

Timeline and How-To Steps

When	Category	Title	Description
		Document Purpose/Use	The purpose of this document is for reference only. This is a compilation of a lot of different sources, documents, presentations, and memories from NMNEC Leadership and Committee Members. This spreadsheet was compiled by Becky Dakin, NMNEC Program Leader. If you have additions/edits/clarifications/corrections/questions, please email NMNEC at nmnec@salud.unm.edu or call 505-272-4125.
2000	Legislation	Nursing Enrollment	The New Mexico Legislature mandated that nursing programs would double their enrollment. This started serious discussion throughout the state of how this might be possible.
2006	Initial Discussion	Initial Discussion	Prior to the project, statewide schools got together to discuss common prerequisites nursing courses and did not come to agreement on anything. There was no funding to pursue this. There was no agreement of how to proceed. There was no collaborative buy-in. There was lots of contention.
Pre-2009	Changing Healthcare	Nursing Ed System	Changes in health care, health policy, education policy, and funding for public higher education have led to the development of new nursing education models designed to increase the number of baccalaureate-prepared nurses entering the workforce. Specific Influences Driving Change in Nursing Education: Evolving American health care system Changing patient needs Increased number of older Americans Increased diversity in our population Increased complexity of health care needs Nursing programs are adding more and more content - information overload Additional content - memorization of content and less time for critical thinking Development and piloting of QSEN in nursing ed curriculum (quality, safety). A toolkit and source document was made available nationally.

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Pre-2009	Changing Healthcare	Nursing Ed System	Additional Influencing Factors: -Barriers to BSN Degrees Rural communities with ADN programs only Two state-supported pre-licensure BSN programs in the state filled to capacity Lack of Diversity Among Healthcare Workers Non-transferability of Nursing Course work within the state
2009-2010	Academic Progression	Calls for Academic Progression	Carnegie Foundation for Advancement in Teaching - 2009 Report Clearly linked nursing education level to enhanced patient outcomes Tri-Council for Nursing - an alliance between the American Association of Colleges of Nursing, the American Nurses Association, the American Organization of Nurse Executives, and the National League for Nursing Policy statement on Educational Advancement of Registered Nurses - 2010
2009	Project Ideas	Beginning Conversations	Dean Nancy Ridenour began conversations pertaining to common statewide curriculum and university/community college partnerships to offer BSN
12/4/2009	Project Ideas	First Meeting	Socorro, New Mexico 19 nurse educators present Overview of the Statewide Curriculum Concept Paper presented Overview of the Oregon Consortium Model Breakout Session 4 groups formed to discuss top issues
12.4.2009	Project Ideas	First Meeting issues	Issues Discussed at First Meeting: Statewide curriculum concept paper (common curriculum) Accreditation TRUST/Academic Community Curriculum creep Faculty involvement Differing admission requirements Sharing of faculty Funding Political support How to get started

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			<p>Concept Paper (White Paper), Dr. Jean Giddens</p> <p>Concern: Most RNs in the state have ADN degrees that do not contribute to the potential supply of nurse practitioners and nursing faculty in the state</p> <p>Barrier: Rural areas' access to BSN degree (two locations available)</p> <p>Issue: Lack of diversity among health care workers</p> <p>Solution: UNM and NMSU nursing programs propose the formation of the New Mexico Education Consortium (NMNEC)</p> <p>Goal: Increase number of BSN-prepared nurses throughout the state</p> <p>Goal: Facilitate attainment of BSN through RN-to-BSN programs</p> <p>Goal: Enhance pre-licensure BSN education across the state placing BSN in community colleges</p> <p>Goal: Common curriculum</p> <p>Goal: Share faculty and teaching/learning resources</p> <p>Goal: Seamless articulation across nursing schools</p> <p>Outcome: Improved quality and consistency of nursing education across the state</p> <p>Outcome: increased numbers of BSN graduates within the state</p> <p>Outcome: Consensus building within and among communities</p>
12/15/2009	Coalition Building	Concept Paper Written	
2009	Goals and Vision	Goals and Vision Developed	Conversations took place to develop and define common goals and overall goal
2009	Research	Foundational Research	Researched other states/models/projects pertaining to common curriculums and collaboration between universities and community college nursing programs

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			<p><i>(The New Mexico Nurse, April, May, June 2014 "New Mexico Nursing Education Consortium (NMNEC), D. Evans-Prior, N. Morton, D. Brady)</i></p> <p>The NMNEC curriculum will be concept-based. This differs from a traditional, medical-model that most practicing nurses in NM experienced as part of their nursing education. Medical-model teaching presents a disease process and nursing instruction generally begins with pathophysiology, sign/symptoms, abnormal lab values, collaborative care, then nursing specific interventions and outcomes. Students learning in this paradigm often spend a great deal of time memorizing data with limited focus on application. In contrast, concept-based teaching identifies a patient need such as Gas Exchange, for example. Students are introduced to the scope and categories of the concept. They identify not only risk factors, but individuals and populations at risk. The instructor engages the student to identify strategies to assess for the problem and how those assessments might change based on client age, culture, comorbidities, and condition. Exemplars (typical examples of a condition encompassed by the concept) are identified, and students work in groups to compare and contrast findings between the examples. Ultimately, the student can then demonstrate that while a client might have atelectasis, pneumonia, or asthma, all three populations require similar assessments and interventions. They can also describe how the treatments are different, based on specific client needs.</p>
2009	Curriculum Development	Concept-Based Rationale	
FY09-10	July 1, 2009 to June 30, 2010		
2009-2010	Project Phase	Phase I begins	Phase I: "Organizational Development"
2009-2010	Funding	Ridenour grant Rcvd	<p>\$53,314 RWJF Executive Nurse Fellowship, Dr. Nancy Ridenour (UNM grantee)</p> <p>No staff in place - all volunteer run.</p> <p>Monies used for meetings and travel reimbursement</p>
2010	Staff	Project Staff	Program Planning Mgr.: started Feb, 2010

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2009-2010	Coalition Building	Mission and Vision Built	Mission and Vision of Consortium built: "The mission of the New Mexico Nursing Education Consortium is to prepare nurses for entry and educational advancement through developing and sustaining a resource-efficient and unified system of accessible, innovative, and state-of-the-art nursing education." Vision: "The New Mexico Nursing Education Consortium is a collaborative partnership with a vision for nursing education that addresses the healthcare needs of New Mexicans by preparing a qualified, diverse, and professional nursing workforce."
2009-2010	Coalition Building	Leadership Structure	Leadership structure determined
2009-2010	Coalition Building	Leadership Council	Seven member Leadership Council put in place and regular meetings held
2009-2010	Coalition Building	By-laws written	By-Laws developed and written
2009-2010	Faculty Development	Nursing Educators Conference	"Nursing Education of the Future"
2009-2010	Meeting	Initial Meeting	Initial Meeting with Stakeholders
2009-2010	Membership	Membership Structure	Membership Structure and MOUs developed. Full Members committed to implementing common curriculum (state-funded nursing programs). Associate Members committed to being involved but would not implement the curriculum (non-accredited programs and non-academic organizations or nursing organizations)
FY10-11	July 1, 2010 to June 30 2011		
2010-2011	Project Phase	Phase I continues	Phase I continues: "Organizational Development"
2010-2011	Funding	BON grant Rcvd	\$70,265 grant received from NMBON (UNM grantee)
2010	Funding	BC/BS	Blue Cross/Blue Shield \$10,000 grant for unrestricted use (UNM grantee)
2010-2011	Staff	Project Staff	1 FTE Program Planning Manager housed at UNM. Manage grants/budget; meeting logistics; historical record keeping; travel reimbursements; clerical duties; committee meetings/minutes; website management; project support

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2010-2011	Coalition Building	Committees developed	Six Committees developed. It was determined that committees would have a culture of flexibility, accommodation, and cooperation to accomplish the work of the project 1. Prerequisite Committee 2. Policy Action Committee 3. IT Collaborative Committee 4. Community Partner Engagement Committee 5. Advisory (Student Srvs) Council 6. Admissions Committee
10/5/2010	IOM	IOM Report	The Future of Nursing: Leading Change, Advancing Health report (commissioned by RWJF) 1. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression 2. Achieve Higher Levels of Education and Training Goal: Increase BSN-prepared nurses to 80% by 2020 (40% of NM active nurses have BSN. Recommended increase of 10,000 BSN nurses in New Mexico by 2020) Goal: Double the number of doctorally prepared nurses by 2020(1% of NM active nurses have are doctorally prepared. Recommended increase of 300 doctorally prepared Nurses in New Mexico by 2020) 3. Improved Education System Nursing curricula needs to be reexamined and updated: Curriculum should be more adaptive to changes in patients' changing needs and advances in science and technology. New approaches, competencies, and educational models need to be developed to respond to increasing amounts of information in the healthcare field. Include more "application" of knowledge instead of rote memorization. Move from task-based proficiencies to higher-level competencies 4. Seamless Academic Progression Improve the nursing education system ☐ increase the number of nurses with baccalaureate degrees ☐ achieve a more educated workforce
Oct, 2010	Government Support	House Memorial 50	HM50 sponsored by Rep Eleanor Chavez and passed by NM House of Rep to ensure momentum toward a timely development of a statewide plan for nursing education
2010-2011	Coalition Building	Website started	NMNEC website started

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2010-2011	Committees	Faculty Committees	BSN Faculty Committee and ADN Faculty Committee formed comprised of co-chairs from each Full Member school. (Curriculum Development Committee was formed out of these Faculty Committees.)
2011	Committees	Admissions Committee	With an eye toward transferability, committee determined what qualifications would work across all schools. The goal of transferability kept the consortium working toward commonality
			<p>This committee worked to identify the concepts in keeping with the decision to develop a concept-based curriculum. 51 concepts were identified.</p> <p>Concept Category: Professional Nursing Concepts</p> <p>-Mega Concepts:</p> <ul style="list-style-type: none"> Professional Attributes (6 concepts) Care Competencies (6 concepts) Care Delivery (5 concepts) Emotional Processes (4 concepts) Cognitive and Behavioral Processes (2 concepts) <p>Concept Category: Participant Attributes</p> <p>-Mega Concepts:</p> <ul style="list-style-type: none"> Health Care Participant (3 concepts) Diversity (5 concepts) <p>Concept Category: Health and Illness</p> <p>-Mega Concepts:</p> <ul style="list-style-type: none"> Homeostasis and Regulation (8 concepts) Oxygenation and Hemostasis (3 concepts) Sexual/Reproductive (2 concepts) Protection and Movement (6 concepts)
2011	Committees	Concept Committee	
2011	Committees	Program Evaluation Committee	Prog Eval committee worked on an evaluation plan to be used throughout the ADN and BSN curriculums. They recognized the need to start the program evaluation process as soon as the curriculum was implemented.
2011	Committees	Committee Work	All committees strove to have an evidence-base to support their decisions or used IOM, NLN, or CCNE accreditation standards to help inform those decisions about the products of the committees.
2010-2011	Curricular Policies	Curricular Policies	Admission and Progression policies developed

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2010-2011	Curriculum Development	Curriculum framework	<p>Curriculum framework built. Defined as a BSN Program OR an ADN program (not a 2+2 or an ADN opt-out/step-out). Universities partner with community colleges to offer the BSN at the community college campus. The university acts as a "hub" and partners with community colleges based on geographic location, previous relationships, or branch campuses.</p> <p>The NMNEC model enhances opportunities for nursing students across New Mexico to earn a prelicensure bachelor of science in nursing (BSN) degree while also preserving the integrity and accessibility of associate degree nursing education.</p>
2010-2011	Curriculum Development	Curriculum Vote	<p>Membership unanimously votes to develop concept-based curriculum with competencies for clinical education. The philosophy behind this is this:</p> <ul style="list-style-type: none"> -NMNEC students are taught in a conceptually-based manner throughout their coursework -Creates nurses who are patient-centered, able to think critically and recognize the needs of patients -Promotes student understanding and application of health/illness and professional nursing concepts in the provision of nursing care -Includes health and illness concepts illustrate "patterns" observed in diseases/disorders regardless of etiology or population. -Recognition of these patterns can then be translated to many different nursing situations. -Exemplars (diseases/disorders) of the concepts were selected for the curriculum based on state, national, and global incidence and prevalence. -Teaching of the concepts and exemplars includes lifespan, health promotion continuum (primary, secondary, tertiary care), and nursing care in various environments (i.e. community, in-patient.) <p>This decision included agreement to develop common nursing courses and prerequisites</p>
2010-2011	Curriculum Development	Flexible Delivery	<p>Consortium agreed to a flexible delivery because of differences in resources and differences in environments where schools have their learning activities</p>
2011	Curriculum Development	Prerequisite Committee	<p>Committee developed prerequisites recognizing that BSN would have many more prerequisites. This built the foundation for the ADN and BSN common curriculums</p>

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2010-2011	Faculty Development	Nursing Educators Conference	"Transforming Clinical Education"
2011	Faculty Development	Faculty Development	Faculty development concentrated on retraining faculty to understand common concept-based BSN curriculum. They also worked on a long-range plan.
2010-2011	Meetings	Statewide Meetings held	Nine statewide meetings held. Average attendance 35. Format: 9-3pm Attendees: Nursing Programs and other interested parties across the state NMNEC-provided breakfast Vendor-provided lunch Trust building - helped members get to know one another and see different schools
2010-2011	Membership	Membership MOUs	Membership MOUs signed with 25 schools and organizations agreeing to: FULL MEMBERSHIP -Actively participate in the work of NMNEC -Agree to develop and deliver statewide plan -Commit to mission/curriculum set by NMNEC -Maintain national accreditation -Contribute resources to support NMNEC ASSOCIATE MEMBERSHIP - interested in the work of the consortium but do not meet the above requirements
2010-2011	Project Phase	Phase I complete	Phase I "Organizational Development" complete
FY11-12	July 1, 2011 to June 30, 2012		
2011	NM Action Coalition	Action Coalition formed	The IOM report made eight recommendations of which the national strategy (through RWJF) included the formation of state Action Coalitions; each AC selected one or more recommendations from the <i>Future of Nursing</i> report to address within their state. The NMAC chose: 1. lifelong learning, 2. healthcare/community collaboration, 3. nursing data
2011-2012	Project Phase	Phase II begins	"Curriculum & Resource Development"
6/1/2012	Funding	BON grant Rcvd	\$128,624 grant received from NMBON (UNM grantee)

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2011	Staff	Project Staff	Program Planning Manager through April 2012. Program Manager started Sept 2011
2011-2012	Curriculum Development	Skeleton Curriculum	Skeleton curriculum developed by Leadership Council, through brainstorming and collaboration - developed a skeleton curriculum that focused on outcomes
2011-2012	Curriculum Development	Curricular Model	NMNEC graphic Curriculum Model developed and approved by membership
2012	Curriculum Development	Curriculum Committee	Curriculum Committee (aka Super Committee because they would focus and get this essential element completed) appointed by Leadership Council
2012	Curriculum Development	Curriculum Committee	<p>Scope/charge defined: develop courses, include titles, credits, descriptions, prerequisites and co-requisites, course objectives. This was accomplished over a six-month period where the committee met weekly through phone conferences as well as four or five two-day retreats.</p> <p>They had to work intently and intensively on the development of the concepts. They used the program objectives to derive what type of course objectives were needed.</p> <p>They moved concepts to where they would be appropriate so that clinical experiences and the concepts in Health and Illness courses would most likely reflect each other.</p> <p>The committee started to choose exemplars based on evidence.</p> <p>The writing of the concepts was farmed-out to various content experts (faculty) around the state and then reviewed by the Super Committee.</p> <p>The Super Committee and NMNEC Staff edited and formatted the concepts. Exemplars were based on DRG data (data about discharges from the hospital) and HCUP data (based on prevalence) from national sources but focused on New Mexico data, so this allowed for incidence and prevalence data. They also looked at various other sources for both health and Illness and for professional concepts, WHO data, Healthy People 2002 and their recommendations, QSEN and their directives toward nursing education.</p>
2012	Curriculum Development	Core Objectives	Core Objectives were derived from the work of the Clin/Sim Committee. They leveled the program directives and developed level objectives for each level that were derived from and built toward the program outcomes.
2012	Curriculum Development	Curriculum blueprint	Curriculum blueprint received statewide approval

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2012	Curriculum Development	Curriculum posted	Curriculum posted on the website
2012	Curriculum Development	Exemplar Committee	Exemplar Committee formed
2012	Curriculum Development	Clin/Sim Committee	Clinical/Simulation Education Committee formed. They developed level competencies and level psychomotor skills based on evidence-base of what most nurses did most commonly, while recognizing that there might be other skills taught. Worked on clinical course descriptions and objectives and developed a simulation plan based on what the concepts were and where they were placed in the curriculum.
2012	Curriculum Development	Curriculum Approval	Curriculum receives formal statewide vote of membership with a 93% approval
10/1/2012	Curriculum Development	Curriculum Approval	Individual institutional curricular approval process begins
2012	Faculty Development	Nursing Educators Conference	"Best Practices in Conceptual Teaching"
30-Jun-12	Meetings	Statewide Meetings Held	Eight statewide meetings held. Average attendance 47.
FY12-13	July 1, 2012 to June 30, 2013		
2012-2013	Project Phase	Phase II continues	Phase II continues: "Curriculum & Resource Development"
2012-2013	Funding	BON grant Rcvd	\$129, 929 BON grant (UNM is the grantee)
2012-2013	Funding	APIN grant Rcvd	\$150,000 APIN grant (UNM is the grantee) Academic Progression in Nursing project through RWJF awarded nine two-year grants to Action Coalitions in nine states that demonstrated the ability to make significant strides toward developing an academic progression model in their state, specifically toward increasing the number of BSN-prepared graduates, increasing the diversity of the nursing workforce, and increase employer demand for BSN-prepared nurses. The NMAC recommended that the grant funds and the management of the project take place through NMNEC, not the Action Coalition as NMNEC was better-prepared and already in the midst of the project.
2012-2013	Staff	Project Staff	Program Manager 2012; Program Assist started Sept 2012; Program Coord (APIN) 2012
2012-2013	Committees	Committee Work	116 Committee meetings held
2013-	Course Development	Course Development	in-depth planning for courses

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8/20/2013	Curricular Policies	Selection Requirements	NMNEC Selection Requirements formally approved by NMNEC membership with unanimous vote
10/18/2013	Curricular Policies	Grading Scale	NMNEC Grading Scale approved by unanimous membership vote
2013-	Curriculum Development	Concept Development	Concept development and placement - moved them around as we further developed the courses and recognized where things needed to go based on level objectives
2013-	Curriculum Development	Exemplar Selection	Exemplar selection took place
2013-	Curriculum Development	Competency placement	Competency placement took place
2013-	Curriculum Development	Teaching Strategies	Super Committee working with the Faculty Development Committee, made suggestions for teaching/learning strategies
2013-	Curriculum Development	Vet-centric content	Super Committee built vet-centric content into the curriculum
2013-	Curriculum Development	Intellectual Property	Met with UNM legal experts to discuss the value of NMNEC's intellectual property. It was determined by the Leadership Council that the NMNEC documentation would be available in general, but specifically, the curricular documents would be made available to NMNEC faculty only. Requests for access to the curricular documents would be considered on a case by case basis. NMNEC would make no effort to self-publish their work.
6/1/2013	Faculty Development	Nursing Educators Conference	"Bridging Education and Practice"
2012-2013	Implementation	Implementation statewide	HED Urges Schools to Move Forward and commit to timeline
2012-2013	Partnerships	Partnership MOU developed	Framework built for partnership MOUs
2012-2013	Partnerships	Readiness Tool developed	Partner School Readiness Assessment Tool developed
2013-	Partnerships	Student Advisement	Consistency in student advisement became very important with partner schools because they needed to work together to admit, teach, and confer the BSN students.
2013-	Partnerships	Partnership MOUs	Partnership MOU developed and completed with the assistance of the university and community college legal departments. These became agreements between the two colleges and did not involve NMNEC.
2012-2013	Student Services	Student Services Engaged	Financial Aid and Registrar Departments engaged

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2012-2013	Student Services	Advisement Materials	Student Advisement Materials developed, approved, posted, and disseminated
2013-	Student Services	Student Advisement	Student Services Committee determined how to do academic advising and recruitment for the common statewide program; what is needed to be prescriptive and why; what needs to remain "up to each school;" transferability was the basis of these discussions/decisions
2013-	Staff	Project Staff	Program Manager Jan-June 2013; Program Assistant Jan-June 2013; Prog Coord Jan-May, 2013 Program Leader July 1; Program Coordinator July 1; Program Admin Aug 1
2012-2013	Phase II	Phase II complete	Completion Phase II "Curriculum and Resource Development"
FY13-14	July 1, 2013 to June 30, 2014		
2013-2014	Project Phase	Phase III begins	"Implementation of Statewide Curriculum Among Member Schools"
2013-2014	Funding	BON grant Rcvd	\$154,755 BON grant (UNM grantee)
2013-2014	Funding	APIN grant Rcvd	\$150,000 APIN grant (UNM grantee)
2013-2014	Funding	HED grant	\$15,000 HED grant for new NMNEC website (UNM grantee)
2013-2014	Staff	Program Staff	Program Leader, Program Coord, Program Assist FY13-14
Sept, 2013	HED's Support	HED calls school presidents	Glenn Walters of the HED reported that he personally called the Presidents of several colleges to ask why they were "not on board" with the NMNEC Curriculum. Each assured Mr. Walters that their nursing programs were in full compliance with the implementation of the common curriculum
10/1/2013	Governor's Support	Meeting w Gov	NMNEC Leadership Council met w Gov Susanna Martinez and confirmed her ongoing support for the common statewide curriculum and the expansion of BSNs to the community colleges. She was extremely interested in the benefits of seamless transfer
10/18/2013	100% Support	17 nursing programs commit to timeline	All 17 state-funded nursing program directors attended a meeting 10/18/13 and committed to an implementation timeline for the common curriculum
11/7/2013	Governor's Support	Governor's Press Conf	Governor Martinez held a press conference in Albuquerque to highlight the work and accomplishments of NMNEC
Nov, 2013	Partnerships	UNM-CNM Partnership	Partnership MOU signed between UNM and CNM.
Jan, 2014	Students	First NMNEC Cohort	24 students at CNM and 64 students at UNM are the first enrolled in the NMNEC curriculum - a culmination of years of work across the state

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			<p>Current nursing culture</p> <p>Geographic isolation</p> <p>Rural vs. metropolitan</p> <p>Limited formal and informal relationships (CCs and Universities)</p> <p>Funding concerns</p> <p>Trust</p> <p>Institutional buy-in</p>
2013-2014	Implementation	Identified Barriers to Implementation	Limited knowledge regarding CBC and the active-learning teaching format
2013-2014	Faculty Development	Train-the-trainer	Faculty and Employer Development Workshops - "Train-the-trainer" model
2014	Faculty Development	Curricular Documents	Curricular documents organized and posted on "faculty only" portion of the website. Formatted and branded all.
2013-2014	Implementation	Implementation commitment	17 Nursing Programs (100% of state-funded) commit to implementation with target dates
2013-2014	Implementation	NMNEC cohorts	Six schools start NMNEC curriculum
2013-2014	Partnerships	Partnerships implemented	Four partnerships offer BSN at community colleges
2013-2014	Program Evaluation	Prog Eval plan	Program Evaluation plan instituted

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2014-	Clinical Education	Clinical Education	
2014-	Program Evaluation	Program Surveys	Two student surveys: 1. Breadth of Knowledge survey taken after each term 2. Level survey to be taken after each Level is complete. One Faculty Survey: 1. Faculty Course Report. Process for dissemination, completion, collection, and analysis was put into place
2013-2014	Student Services	Advisor Training	Student Advisor trainings held
2013-2014	Surveys	Survey data	Academic, Employer, Workforce, and Program surveys developed, disseminated, collected, and analyzed
2013-2014	Website	HED funds website	HED Funds New NMNEC Website for statewide collaboration
March, 2014	Partnerships	UNM-NMJC Partnership	Partnership MOU signed between UNM and NMJC.
Mar, 2014	Governor's Support	Governor's Video	Gov Martinez provided a short video for RWJF/APIN highlighting statewide support for nursing academic progression. This was used to encourage other states to garner the support of their state governments

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May, 2014	Partnerships	NMSU-SFCC Partnership	Partnership MOU signed between NMSU and SFCC. This partnership was formed, not geographically, as the colleges are in the far north and far south of the state, but because of their ability to offer an accelerated program
6/1/2014	Faculty Development	Nursing Educators Conference	"Become a NMNEC SuperUser"
5/5/2014	Curricular Policies	Progression Policy	NMNEC Progression Policy revised and unanimously approved by membership vote
5/29/2014	Curricular Policies	Admission Criteria	NMNEC Admission Criteria revised and unanimously approved by membership vote
6/30/2014	Meetings	Statewide Meetings held	7 statewide meetings held. Average attendance 50-65.
FY14-15	July 1, 2014 to June 30, 2015		
2014-2015	Project Phase	Phase III continues	Phase III continues: "Implementation of Statewide Curriculum among Member Schools"
2014-2015	Funding	BON grant Rcvd	\$158,771 BON grant received (UNM grantee)
2014-2015	Funding	APIN grant Rcvd	\$150,000 APIN grant received (UNM grantee)
2014-2015	Staff	Program Staff	Program Leader, Program Coordinator, Program Assist FY14-15
July, 2014	Partnerships	UNM-SJC Partnership	Partnership MOU signed between UNM and SJC.
10/28/2014	Curricular Policies	Selection Requirements	NMNEC Selection Requirements revised and formally adopted by unanimous vote of membership
April, 2015	Common Numbering	Common Numbering System	Leadership Council and HED consider NMNEC common numbering system
Feb, 2015	Diversity	Diversity Models	Diversity models appropriate for urban and rural nursing programs were presented at statewide meeting
2014-2015	Faculty Development	Workshops	Faculty Development workshops held at statewide meetings and as stand-alone events
2014-2015	Faculty Development	Level Meetings	Bi-weekly "Level Trainings" held via phone conference lead by the SIC committee. These are nuts-and-bolts conversations that provide a forum for any and all questions/concerns pertaining to the common curriculum. Each phone call pertains to a specific Level (or term). The schedule for these meetings is posted on the website and an email reminder is occasionally sent out to the entire membership reminding them of this resource.

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6/1/2015	Faculty Development	Nursing Educators Conference	"Academic and Employer Partners: Transitioning Student Nurses to Clinical Practice"
2015	Faculty Development	Simulation Training	The Clin/Sim Committee has recognized that simulation training is an emerging need.
2014-2015	Marketing	Tell our Story	Developed our story (How we did it and what it is) for internal and external constituents on a local, statewide, and national level
2015	Meetings	Statewide Meeting Structure	Statewide meeting structure changed to include Faculty Development and implementation elements.
2014-2015	Sustainability	Sustainability options	Sustainability taskforce developed to research and evaluate different options
June, 2015	Statewide Meetings	Statewide Meetings held	4 statewide meetings held. Average attendance 80-100. Format changed to include a two-hour workshop for faculty development that offered free CEs.