The conceptual model for the Division of Nursing that illustrates the relationship of the College core values, the philosophy of the Division of Nursing and the MSN curriculum is below as Figure 1. I-A.2.

**Figure 1. I-A.2 Division of Nursing MSN Conceptual Model**

**Nursing Program**

Presentation College believes that an effective, comprehensive education will encompass the spiritual, intellectual, socio-cultural, emotional, environmental, physical, and career dimensions of the whole person. The College has been a leader in healthcare education, in establishing outreach sites, in utilizing technology and in offering online education. Based on that history of innovation and of responding to needs, Presentation College continues to embrace creativity, originality, imagination, and vision to promote resourcefulness.
The **mission and philosophy of the Division of Nursing** exhibits congruence with the College mission which is “Welcoming people of all faiths, Presentation College challenges learners toward academic excellence and, in the Catholic tradition, the development of the whole person.” In keeping with the College mission statement, the mission of the Division of Nursing-Bachelor of Science in Nursing program is to provide an education that is “foundational for students pursuing self-actualization, professional excellence, and lifelong learning.”

The Master of Science in Nursing mission builds upon the BSN mission in “preparing leaders for rural advanced practice nursing delivering evidence-based care across the lifespan to improve health outcomes in diverse populations.” In addition, the core values of wholism, Catholic tradition, lifelong learning, and education encompass the nursing program's philosophical model.

The **philosophy of the Division of Nursing** reflects the core values of the College, which is to develop professional nurses and advanced practice nurses who are contributing members of society and who demonstrate integrity and respect for humanity by promoting the development of the students’ spiritual, intellectual, socio-cultural, emotional, environmental, physical, and career dimensions of life.

**Nursing Metaparadigm**

The nursing faculty has developed a nursing program based on a nursing metaparadigm that includes four concepts central to the mission of the College and Division: Environment, Humanity, Health, and Nursing. Along with the nursing metaparadigm, the conceptual framework for both the BSN and MSN programs, contains concepts identified essential to the role and functions of the professional nurse: caring, diversity, healthcare, quality improvement, nursing informatics, evidenced based practice, nursing process, social justice, safety, and roles. The following concepts are integrated into the Metaparadigm and further elaborate on programmatic outcomes. The following concepts are defined as:

**Environment:** The composite of those changing external and internal biological, physical, social, political, and economic forces that surround and influence humanity at any given point in time. As part of the environment, individuals perform and function within familial and societal roles. Society serves the collective needs of humanity which bring about the establishment of rules, expectations, and mores. Nursing studies the **wholeness or health** of humanity, recognizing that humans are in continuous interaction with a changing environment. Secondary themes of the environment include healthcare (culture, and rural geographic environment), safety, and quality improvement.

**Humanity:** Part of the holistic creation of God that encompasses the totality of humankind. Individually, humanity is the totality of the human person. Globally, an interconnectedness binds the individual to humanity in the form of relationships. Full development of humanity is the greatest pursuit that can evolve only from an interconnectedness and harmony with God, humankind, and the environment.

**Health:** A dynamic state in which an individual adapts to internal and external environments so that there is a state of physical, emotional, intellectual, social, and spiritual well-being. Every person has an optimal level of functioning on the wellness/health continuum to achieve a good and satisfactory existence. The wellness/health continuum model organizes wellness within the ability of all people. Wellness begins with the person and stimulates the demand for growth and change. Within this model, the physical self is nurtured, emotions are expressed, creativity is fostered, and the environment remains important, despite any physical incapacities. The wellness model has a neutral point or a point of no discernable disease. The steps above the neutral point are as follows: education, growth, self-actualization, and high-level wellness (well-being). The steps below the neutral point on the wellness/health continuum are: signs, symptoms, disability, and premature death. Within this model, an individual moves in a positive direction, reaching a higher level of wellness, or regressing to a lower level because of illness. The illness can stimulate growth potential and assist the person to move along the wellness/health continuum (Craven, Hirnle, & Jensen, 2013). The nursing domains of health promotion, illness prevention, health maintenance, and health restoration/rehabilitation function within the wellness/health continuum across the lifespan.
**Nursing:** The art and science of caring. Caring, inherent throughout nursing, involves the whole client—physical, emotional, socio-cultural, and spiritual dimensions. When caring ceases, nursing ceases. Nursing encompasses autonomous, evidence-based, and collaborative care and is committed to illness prevention and the promotion, restoration, rehabilitation, and maintenance of the health of individuals, families, groups, communities, and society as a whole. Nurses provide a point of human contact in the face of a complex healthcare system. Professional standards provide the framework for the competent use of the nursing process. State and federal statutes and regulations set the parameters for nursing practice. Ethical guidelines are core to the implementation of the nursing process.

**MSN Nursing Concepts**

The following MSN nursing concepts are integrated into the Conceptual Framework. The following concepts are defined as:

**Caring:** The essence of nursing that brings forth the connection between nurses and their clients. It is the interaction of the nurse and client in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides hope, support, and compassion to help achieve desired outcomes. Caring is the central and unifying domain for the body of knowledge and practices in nursing (Leininger, 1981). It is the result of role modeling and leads to the development of ethical treatment and compassion. Integrating caring and ethical practice guidelines within the curriculum supports human dignity, altruism, and integrity.

**Diversity:** In the profession of nursing, diversity helps to ensure that quality, culturally competent client care is delivered to all (AACN, 2014). Presentation College prides itself in the recruitment and acceptance of students from various backgrounds and ethnicities. In addition to the student body, the Division of Nursing works to provide diverse academic and clinical opportunities. These opportunities help to develop a culturally aware student who develops into a culturally competent nurse upon graduation.

**MSN Healthcare:** The application of individual, family, community, and population-level practices that promote, maintain, restore, and/or rehabilitate the well-being of the consumer as a holistic entity. The delivery of healthcare includes an interconnection and collaboration of care between other healthcare disciplines to gain additional team perspective to improve the health outcome of patients. The team includes, but is not limited to, technicians, pharmacists, social workers, physicians, occupational therapists, and physical therapists.

**Quality Improvement:** Quality is an inherent approach to doing good work (Sherwood & Zomorodi, 2014). Quality Improvement is the correlation of improved healthcare system delivery and desired health outcomes of the population. Improvement of quality within an education or healthcare system is demonstrated by continuously measuring effect of the implemented changes within the organization.

**Nursing Informatics:** Utilizes technology as a tool to access and analyze data in order to provide evidence of the effects of nursing interventions by linking them with the outcomes of client care. Nursing informatics combines computer science, information science, and nursing science to assist in the management and processing of nursing data, information, and knowledge to support the practice of nursing (Swan, Lang, & McGinley, 2004).

**Leadership in Evidence Based Practice:** Integration of advanced problem-solving approaches within the context of leading to support strategical systematic organizational changes in complex rural health care environments (Stetler, Richie, Rycroft-Malone & Charnes, 2014).
Advanced Nursing Practice (APRN): "APRNs treat and diagnose illnesses, advise the public on health issues, manage chronic disease, and engage in continuous education to remain ahead of any technological, methodological, or other developments in the field. APRNs hold at least a Master’s degree, in addition to the initial nursing education and licensing required for all Registered Nurses“ (ANA, 2017).

Social Justice: Promoting a just society to include equitable treatment, supporting human rights, and not discriminating regardless of economic status, social class, disability, sexual orientation, ethnicity, age, or geographic location (AACN, 2008).

Safety: A core value in healthcare based on the commitment to uphold ethical principles to do no harm, always safeguard the patient, and act with ethical comportment (Egan, 2013). Safety is preventing errors and negative outcomes that happen unrelated to the patient condition being treated and involves constantly scanning the environment to prevent errors from occurring (Barnsteiner, 2012). The goal of safety is zero negative occurrences (Sherwood & Zomorodi, 2014).

Roles: The nursing faculty support and promote the roles of practice and the competencies expected of a graduate of the graduate degree program. Graduate nursing education prepares the nurse to function as an Advanced Practice Registered Nursing (APRN) within their scope and standards of practice. As an APRN, the graduate is able to practice advanced nursing in both structured and unstructured settings while providing care to individuals, families, groups, communities, and/or populations.

In keeping with the College mission statement, nursing education is viewed as a foundation for students pursuing self-actualization, professional excellence, and lifelong learning. Nursing faculty members believe that each student brings unique life experiences to the nursing program. These experiences are used as the base upon which further learning is generated, and mutual enrichment is experienced. Teaching and learning principles are integrated in nursing education. The student and faculty member work together to assist the student in self-reflection, fostering professionalism, valuing integrity, seeking and validating evidence and achieving the course and program outcomes. It is expected that the student be an active participant in the learning process. Ultimately, students are responsible for their own learning.