

THE CAROLINA CORE

The purpose of the **Carolina Core** is to provide a curricular framework for students to achieve the knowledge, skills, and attitudes essential in a graduate of the UNC School of Nursing.

Consisting of 11 tenets, the **Carolina Core** was developed following rigorous review of national recommendations, analysis of the best available evidence, and consultation with education experts. Each Carolina Core tenet includes a title, a definition, and a narrative designed to apply the definition to the Carolina Nursing graduate. Corresponding references and resources for each tenet are also supplied.

At Carolina, we believe nursing is an evidence-based, caring practice that is grounded in a commitment to improving health — of individuals, families, communities, populations and systems. Central to the Carolina Nurse is a consideration of the whole person, a commitment to the greater good, and a dedication to populations.

At Carolina Nursing, the high calling of caring for human beings is a central and founding ethos that is transmitted to its graduates as a core value and an essential dimension of nursing practice in all of its contexts. Practice refers to all types of roles our students will leave prepared to assume. Nurses educated at the University of North Carolina at Chapel Hill excel at advancing the art and science of nursing care.

	Core Tenet	Definition	Narrative	Resources
I	Diversity & Inclusion	<p><i>Affirmation of the uniqueness of and differences among persons, ideas, values, and ethnicities; which encompasses organizational, institutional, and system-wide behaviors in nursing, nursing education, and health care (NLN, 2006)</i></p> <p><i>“We are determined to chart a course where we can all work together to create and sustain the kind of community where we all feel welcomed, respected and free to pursue our goals and dreams and to become our best and truest selves. To realize that course, we must create a diversity structure that is coordinated and integrated, that celebrates all forms of diversity, and which ensures equitable and inclusive educational and social benefits for all.”</i> Carol L. Folt Chancellor</p>	<p>Carolina Nurses affirm the uniqueness among persons, ideas, and values. We commit to inclusion of all forms of diversity demonstrating culturally responsive approaches in our practice.</p>	<p>Achieving Diversity and Meaningful Inclusion in Nursing Education (NLN, 2016)</p> <p>Diversity & Inclusion Toolkit (NLN, 2017)</p> <p>Branche, J. (2007). <i>Diversity across the curriculum : a guide for faculty in higher education</i>. Bolton, Mass.: Anker Pub. Co.</p> <p>BSN Essentials (1, 9) MSN Essentials (1,4, 6, 7, 8); definition p.34 DNP Essentials (5,7, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>

II	Ethics	<p><i>Ethics in nursing can be defined as understanding and demonstrating what is right and good measured against principles, virtues, core professional values, and relevant legislation (Adapted from ANA, 2015; Kozier & Erb, 2007; NHS, 2012).</i></p>	<p>Carolina Nurses uphold what is right and good, measured against principles, virtues, core professional values, and relevant legislation.</p>	<p>Code of Ethics for Nurses (ANA, 2015)</p> <p>Guide to the Code of Ethics for Nurses: Faculty Pak (ANA, 2015)</p> <p>Berman, A. (2007). <i>Kozier & Erb's fundamentals of nursing : concepts, process, and practice</i> (8th ed.). Upper Saddle River, N.J.: Pearson Prentice Hall.</p> <p>Advanced Practice Toolkit</p> <p>Ethical Principles for Nursing Education (NLN, 2012)</p> <p>BSN Essentials (8) MSN Essentials (4) DNP Essentials (1, 2, 4, 5)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
----	--------	--	--	---

III	Global Health	<p><i>An area for study, research, and practice that places a priority on improving health and achieving equity in health for all people worldwide. Global health emphasizes transnational health issues, determinants, and solutions; involves many disciplines within and beyond the health sciences and promotes interdisciplinary collaboration; and is a synthesis of population based prevention with individual- level clinical care (Koplan et al., 2009 p. 1995).</i></p>	<p>Carolina Nurses practice with a global mindset to achieve health equity locally and globally.</p>	<p>Koplan, J.P., Bond, T.C., Merson, M.H., Reddy K.S., Rodriguez M.H., Sewankambo N.K., et al. (2009). Towards a common definition of global health. Lancet 373: 1993-5.</p> <p>A Vision for Expanding US Nursing Education for Global Health Engagement (NLN, 2017)</p> <p>BSN Essentials (1, 5, 7, 8, 9) MSN Essentials (4: policy; 7, 8; 9) DNP Essentials (1, 5, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
-----	---------------	--	---	---

IV	Health Innovation	<p><i>Health innovation is to develop and deliver new or improved health policies, systems, products and technologies, and services and delivery methods that improve people's health. Health innovation responds to unmet needs by employing new ways of thinking and working with a special focus on the needs of vulnerable populations. Health innovation adds value in the form of improved efficiency, effectiveness, quality, safety and/or affordability. Health innovation can be in preventive, promotive, therapeutic, rehabilitative and/or assistive care. (WHO Health Innovation Group, 2017)</i></p>	<p>Carolina nurses engage in new ways of thinking to develop, deliver, and evaluate innovations to improve health.</p>	<p>Definition of Health Innovation (WHIG, 2017)</p> <p>Health Care Innovations Exchange (AHRQ, 2017)</p> <p>Weberg, D. (2009). Innovation in healthcare: a concept analysis. <i>Nursing Administration Quarterly</i>, 33(3), 227-237. doi:10.1097/NAQ.0b013e3181accaf5</p> <p>Omachonu, V. K., & Einspruch, N. G. (2010). Innovation in healthcare delivery systems: a conceptual framework. <i>The Innovation Journal: The Public Sector Innovation Journal</i>, 15(1), 1-20.</p> <p>BSN Essentials (2, 4, 6, 7, 9) MSN Essentials (1, 3, 4, 5, 7, 8, 9) DNP Essentials (2, 3, 4, 6, 7, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
----	-------------------	---	---	---

IV	Health Innovation	<p><i>Health innovation is to develop and deliver new or improved health policies, systems, products and technologies, and services and delivery methods that improve people's health. Health innovation responds to unmet needs by employing new ways of thinking and working with a special focus on the needs of vulnerable populations. Health innovation adds value in the form of improved efficiency, effectiveness, quality, safety and/or affordability. Health innovation can be in preventive, promotive, therapeutic, rehabilitative and/or assistive care. (WHO Health Innovation Group, 2017)</i></p>	<p>Carolina nurses engage in new ways of thinking to develop, deliver, and evaluate innovations to improve health.</p>	<p>Definition of Health Innovation (WHIG, 2017)</p> <p>Health Care Innovations Exchange (AHRQ, 2017)</p> <p>Weberg, D. (2009). Innovation in healthcare: a concept analysis. <i>Nursing Administration Quarterly</i>, 33(3), 227-237. doi:10.1097/NAQ.0b013e3181accaf5</p> <p>Omachonu, V. K., & Einspruch, N. G. (2010). Innovation in healthcare delivery systems: a conceptual framework. <i>The Innovation Journal: The Public Sector Innovation Journal</i>, 15(1), 1-20.</p> <p>BSN Essentials (2, 4, 6, 7, 9) MSN Essentials (1, 3, 4, 5, 7, 8, 9) DNP Essentials (2, 3, 4, 6, 7, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
----	-------------------	---	---	---

V	Informatics	<i>The use of information and technology to communicate, generate and manage knowledge, prevent or mitigate error, and support decision making. (adapted from QSEN, 2012)</i>	Carolina Nurses skillfully utilize information and technologies to improve health.	<p>AMIA Health Informatics Core Competencies Health Professions Education: A Bridge to Quality (IOM, 2003)</p> <p>Nursing Informatics Competencies (NILC, 2016)</p> <p>QSEN Competencies(QSEN, 2012)</p> <p>Nursing Informatics: Scope and Standards(ANA, 2015)</p> <p>Technology Informatics Guiding Education Reform (TIGER) Competencies (TICC, 2009)</p> <p>BSN Essentials (3, 4, 6, 9)</p> <p>MSN Essentials (3, 4, 5, 7, 8, 9); definition p. 36</p> <p>DNP Essentials (3, 4, 6, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
---	-------------	---	---	---

VI	Leadership	<p><i>As leaders, nurses must act as full partners in redesign efforts, be accountable for their own contributions to delivering high-quality care, and work collaboratively with leaders from other health professions... Nursing leaders must translate new research findings to the practice environment and into nursing education and from nursing education into practice and policy. (IOM, 2010)</i></p>	<p>Carolina nurses intentionally lead through advocacy, scholarship, and influencing policy to improve health.</p>	<p>The Future of Nursing (IOM, 2010)</p> <p>ANA Leadership Institute Competency Model (ANA, 2013)</p> <p>Nurse Executive Competencies (AONE, 2015)</p> <p>Wilmoth, M. C., & Shapiro, S. E. (2014). The intentional development of nurses as leaders: A proposed framework. <i>JONA: The Journal of Nursing Administration</i>, 44(6), 333-338. doi: 10.1097/NNA.0000000000000078</p> <p>BSN Essentials (2, 5) MSN Essential (2, 3, 4, 6, 7, 9) DNP Essentials (2,3,4,5,6,8)</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
----	------------	---	---	---

VII	Population Health	<p><i>Population health is a collaborative effort designed to improve the health outcomes of a specific population through interventions and policy (adapted from Stoto, 2013)</i></p> <p><i>Population health addresses health outcomes of a group of individuals/population, including the distribution of such outcomes within the group. Population health includes focusing on health outcomes and health determinants, and the policies and interventions that affect those determinants and can improve health outcomes (Adapted from IHI, 2014; Fabius et al., 2016)</i></p>	<p>Carolina Nurses critically appraise and address the contextual complexities that exist across populations and systems to improve health equity.</p>	<p>Populations, Population Health, and the Evolution of Population Management: Making Sense of the Terminology in US HealthCare Today (IHI, 2014)</p> <p>BSN Essentials (7) MSN Essentials (6, 7, 8, 9) DNP Essentials (6, 7)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
-----	-------------------	--	---	---

VIII	Quality & Safety	<p><i>Quality is defined as the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge. (IOM, 2001).</i></p> <p><i>Patient safety “minimizes risk of harm to patients and providers through both system effectiveness and individual performance” (QSEN, 2012).</i></p>	<p>Carolina Nurses are accountable and empowered change agents for the delivery of patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, and safety.</p>	<p>A Framework for Safe, Reliable, and Effective Care (IHI, 2017)</p> <p>Aspden, P. & Institute of Medicine (U.S.), Committee on Data Standards for Patient Safety Staff. (2003; 2004). <i>Patient safety: Achieving a new standard for care.</i> Washington: National Academies Press.</p> <p>QSEN Competencies (QSEN, 2012)</p> <p>Farquhar, M., Sharp, B.A.C., & Clancy, C.M. (2007). Patient safety in nursing practice. <i>AORN Journal</i>, 86(3), 455-457. Doi: 10.1016/j.aorn.2007.08.009</p> <p>Mitchell, P. (2008) Defining Patient Safety and Quality Care. In <i>Patient Safety and Quality: An Evidence-Based Handbook for Nurses</i>. Rockville, MD: Agency for Healthcare Research and Quality.</p> <p>AHRQ</p> <p>Crossing the Quality Chasm: A New Health System for the 21st Century (IOM, 2001) <i>The Institute of Medicine views quality from a systems perspective and that quality must be addressed in these six dimensions: Care must be 1) Safe; 2) Effective; 3) Patient-Centered; 4) Timely; 5) Efficient; and 6) Equitable</i></p> <p>Nurse Practice Act (NCSBN, 2017)</p> <p>BSN Essentials (2, 3) MSN Essential (1, 2, 3, 5, 6, 7)</p>
------	------------------	--	--	---

IX	Relationship-Centered Care	<p><i>Relationship-Centered Care can be defined as care in which all participants appreciate the importance of their relationships with one another and the relationships of clinicians with themselves, with each other and with community are also emphasized. (Beach & Inui, 2006)</i></p>	<p>The Carolina Nurse exemplifies relationship- centered caring as a core value and an essential dimension of nursing practice in all of its contexts.</p>	<p>Beach, M. C., Inui, T., Relationship-Centered Care Research Network, & the Relationship-Centered Care Research Network. (2006). Relationship-centered care: A constructive reframing. <i>Journal of General Internal Medicine</i>, 21(S1), 3-8.</p> <p>Care: A Value Expressed in Philosophies of Nursing Services</p> <p>UNC Medical Center Professional Practice Model</p> <p>BSN Essentials: (4, 6, 7, 8, 9) MSN Essentials: (2, 3,, 4, 6, 7, 8) DNP Essentials: (5, 6, 7, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
----	----------------------------	---	---	---

X	Research	<i>Research provides the scientific foundation for the nursing profession. (AACN, 2006)</i>	Carolina Nurses demonstrate a spirit of inquiry to generate new knowledge and apply evidence to advance the health of individuals, families, communities, populations and systems.	<p>Position Statement on Nursing Research (AACN, 2006)</p> <p>What is Nursing Research? (NINR, 2017)</p> <p>BSN Essentials (1, 3, 4, 9) MSN Essential (1, 2, 4, 5, 7, 9) DNP Essentials (1, 2, 3, 6, 7, 8)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>
XI	Scholarly Communicatio & Writing	<i>Scholarly communciation and writing is an original and unique appriasal and synthesis that presents an objective perspective based on a thorough review of evidence and clinical expertise. Scholarly communciation and writing products should be logical, concise and organized. Evidence and assertions should be cited carefully, both in the text and in a bibliography.</i>	Carolina Nurses effectively appraise, synthesize and communicate evidence to advance science and practice.	<p>Hunker, D. F., Gazza, E. A., & Shellenbarger, T. (2014). Evidence-based knowledge, skills, and attitudes for scholarly writing development across all levels of nursing education. <i>Journal of Professional Nursing</i>, 30(4), 341-346.</p> <p>Scholarly Communication: Association of College and Research Libraries</p> <p>BSN Essentials (1, 6) MSN Essential (1, 2, 4, 5, 6, 7, 9) DNP Essentials (3)</p> <p>IOM Future of Nursing Report</p> <p>AACN The Research -Focused Doctoral Program in Nursing: Pathways to Excellence PhD</p>