



**REQUEST FOR PROPOSALS**  
**December 2004**  
**IMPLEMENTING THE CLINICAL NURSE LEADER<sup>sm</sup>**

**SUMMARY**

---

This Request for Proposals from the American Association of Colleges of Nursing (AACN) is intended to identify schools of nursing, in conjunction with practice partners, committed to implementing a master's level education/practice model for the Clinical Nurse Leader (CNL)<sup>sm</sup> role. The CNL role and outcome competencies are delineated in the AACN *Working Paper on the Clinical Nurse Leader<sup>sm</sup>* (May 2003, revised June 2004). A copy of the document can be downloaded at <http://www.aacn.nche.edu/Publications/WhitePapers/CNL.htm>.

The overall goal of the initiative is to develop, implement and evaluate Clinical Nurse Leader (CNL)<sup>sm</sup> education and practice models to improve patient outcomes and care environments while maintaining or improving cost effectiveness and efficiency. The purpose of the RFP is to identify a select cohort of schools, with committed practice partners, who agree to:

- Develop and implement one of three CNL education models resulting in a master's degree in nursing.
- Implement a care delivery model in one or more practice settings that allows the full scope of practice of the CNL role as delineated in the AACN *Working Paper on the Clinical Nurse Leader*. Partnering with practice settings across the continuum of care, including acute, long term, and ambulatory care, is encouraged but not required.
- Fully participate in the evaluation of the education and practice models as designed by AACN.

Education Models

One of three education models that leads to a master's degree with a major in nursing must be implemented. Each education model allows for differing entry points and curriculum format. The exit point, however, must be a master's degree with a major in nursing.

Model A: Master's program designed for BSN graduates.

Model B: Master's program for BSN graduates that includes a post-BSN residency that potentially awards master's credit.

Model C: Master's program designed for post-high school entry that includes a pre-nursing baccalaureate degree and a master's degree in nursing. This also could be a master's degree program for individuals with a baccalaureate degree in another discipline (second-degree program).

A description of the three education models can be found at <http://www.aacn.nche.edu/NewNurse/models.pdf>

**ADVANCING HIGHER EDUCATION IN NURSING**

### Proposal

The proposal, **not more than two (2) pages** in length, 12 point font, Times Roman preferred, should address the following four numbered items:

1. Description of the model/type of master's education program to be implemented.
2. Description of practice setting(s) where care delivery model will be implemented.
3. Identification of individuals on the academic team who will be responsible for the implementation of the CNL graduate level curriculum as developed by AACN.  
**Include name, credentials, title and contact information, including address, telephone, fax, and email for each person identified.**
4. Identification of individuals in the practice setting(s) who will be responsible for the implementation of the CNL care delivery model as designed by the AACN initiative.  
**Include name, credentials, title and contact information, including address, telephone, fax, and email for each person identified.**

### Expectations for AACN

As the convening organization, AACN, with input from the CNL Implementation Task Force, will provide oversight, consultation and coordination for the implementation of the education and practice models. AACN will coordinate collaboration and networking among pilot sites and will serve as a repository for information regarding the CNL pilot education and practice projects. AACN, with consultation from a researcher with expertise in the evaluation of nursing workforce and patient outcomes, will develop and oversee the evaluation component of the CNL project. AACN will disseminate information regarding the CNL project, education and practice models being developed and outcomes of the project. AACN also will continue to work with other national nursing and health care organizations to gain wide support and consensus on the need for transformation of nursing education and health care delivery through the implementation of the CNL role.

AACN will convene a series of regional meetings January – April 2005.

**Deans/directors of schools of nursing and chief nursing officers from the practice agencies whose RFPs are accepted for implementation in this pilot project must attend one of the regional meetings.** Other members of the academic and practice teams are invited and may plan to attend. Additional information and meeting materials will be sent to each Education/Practice Partner.

### Expectations for Schools of Nursing

Schools of nursing that apply will be expected to:

1. Within the next 12 months, design curricula congruent with AACN parameters for the CNL that address the CNL competencies, professional values and leadership preparation.
2. Within the next 12 months, become fully engaged with the regulatory structures in the institution and state in order to implement the CNL curriculum.
3. Develop quality learning experiences in a variety of settings and using a variety of pedagogies that are challenging and appropriate for nursing leadership development.
4. Maintain partnerships with one or more practice agencies from the initial planning through the evaluation of the CNL role in practice.
5. Fully participate in and implement the CNL evaluation plan as designed by AACN.

6. Maintain communication and a collaborative relationship with AACN and other education/practice partnerships as the CNL project is implemented, including submission of quarterly progress reports as requested by AACN.

#### Expectations for Clinical/Practice Partners

Practice partners will be expected to:

1. Within the next 12 months, develop a pilot, care delivery model in one or more patient care settings to prepare for the utilization of the CNL to the full scope of practice as defined by AACN and as an integral component of the delivery model.
2. Within the next 12 months, become fully engaged with the regulatory structures in the healthcare institution and state necessary to implement the care delivery model.
3. Engage the healthcare institution's staff to embrace the new care delivery model, develop a job description for the CNL within the healthcare setting, and identify individuals who through previous education and practice experiences can practice in this role as CNL graduates are being educated.
4. Maintain a partnership with the School(s) of Nursing from initial planning through the evaluation of the CNL role and patient care outcomes.
5. Fully participate in and implement the CNL evaluation plan as designed by AACN.
6. Maintain communication and a collaborative relationship with AACN and other education/practice partnerships as the CNL project is implemented.

#### Project Guidance

An Implementation Task Force, comprised of nurse executives, deans/directors, graduate nursing faculty, and nursing clinicians, has been appointed who, in conjunction with the AACN staff, will oversee the:

1. Proposal process, including proposal solicitation, review, and recommendation of selection for implementation.
2. Confirmation of participation of education/practice partnerships.
3. Design of the curriculum and practice models/expectations.
4. Implementation of the CNL pilot project.
5. Design of the evaluation plan.
6. Review of evaluation data.

#### **SIGNATURES**

---

The proposal must include the signatures from the following individuals or the equivalent:

Dean/Director of the School of Nursing  
Director of Graduate School  
Chief Nursing Officer of each practice institution  
Chief Executive Officer from each practice institution

**ACADEMIC PARTNERS**

I agree to support the implementation of a master’s degree program that prepares graduates for the Clinical Nurse Leader<sup>sm</sup> role as developed in the AACN initiative.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

I agree to support the implementation of a master’s degree program that prepares graduates for the Clinical Nurse Leader<sup>sm</sup> role as developed in the AACN initiative.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

**PRACTICE PARTNERS**

I agree to support the implementation of a patient care delivery model on one or more patient care departments/units that fully utilizes the Clinical Nurse Leader<sup>sm</sup> as developed in the AACN initiative in \_\_\_\_\_.  
*Name of Institution*

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

I agree to support the implementation of a patient care delivery model on one or more patient care departments/units that fully utilizes the Clinical Nurse Leader<sup>sm</sup> as developed in the AACN initiative in \_\_\_\_\_.

*Name of Institution*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

**IF THERE IS MORE THAN ONE PRACTICE OR EDUCATION PARTNER INSTITUTION, PLEASE MAKE COPIES OF THE ABOVE SECTION IN ORDER TO INCLUDE THE NECESSARY ADDITIONAL SIGNATURES.**

### **INQUIRIES**

All questions about this request for proposals should be directed to:

Joan Stanley, PhD, RN, CRNP  
AACN, Director of Education Policy  
[jstanley@aacn.nche.edu](mailto:jstanley@aacn.nche.edu)  
202-463-6930, ext. 254

Information is also available on AACN's Web site, [www.aacn.nche.edu](http://www.aacn.nche.edu).

### **SUBMISSION OF PROPOSALS**

All proposals must be received by **COB on Thursday, May 6, 2004.**

Proposals should be sent to:  
AACN  
Joan M. Stanley  
One Dupont Circle NW, Suite 530  
Washington, DC 20036

Or proposals can be faxed to 202-785-8320. If faxed please also send original signed copy to the above address.