# Program Policy Statement Proposal for Doctor of Nursing Practice (DNP) Program

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This document is submitted by the School of Nursing Faculty of the College of Health Sciences



#### PART I. PROGRAM HISTORY

#### A. Statement of Purpose and Expectation of Graduate Study

#### **Purpose**

The Doctor of Nursing Practice (DNP) program proposed by the School of Nursing in the College of Health Sciences prepares graduates to perform at the highest level of advanced nursing practice. With a focus on population health and leadership, students will gain competencies that will allow them to become leaders in practice innovation and policy development that will improve the health of diverse populations. The foundation for practice expertise with a population health focus will enable the graduate to plan and lead evidenced-based interventions, quality improvement strategies and health policy changes that address patient safety, promote patient-centered care, and reduce health disparities among diverse groups. The focus on practice that integrates both primary health care and mental health competencies will enable graduates of this program to provide health care in diverse settings to communities and populations that are currently unable to easily access care. The proposed program is timely because it coincides with recent legislation in Delaware that supports independent practice of nurses prepared as advance practice registered nurses (APRN) such as those who will be prepared in the School of Nursing's Doctor of Nursing Practice program.

The DNP degree is designed for nurses seeking a terminal degree in nursing practice and offers an alternative to the research-focused doctoral program. This degree prepares students to translate research into the practice setting. It does not prepare the student to conduct original research. Students will develop a practice question and critically appraise available research to develop and implement a practice initiative that represents best practices for improvement of the delivery of healthcare services. Coursework is designed to provide the student the skills to understand the complexities of the health care delivery system in order to influence change and develop policy that improves patient outcomes in a variety of settings.

The final product of the degree will not be a thesis or dissertation. There are no comprehensive exams. The program culminates in the successful completion of a DNP Project and its mandatory final products, which include the DNP Project Brief, DNP Project Presentation, and the DNP Project Manuscript. In addition, the DNP Portfolio will be submitted as a final product to showcase achievement of program outcomes and competencies. The DNP project is conceptualized in the early stages of the program and is further developed each semester, with coursework supporting the student's growth throughout. Planning and implementation of the DNP Project provides a mechanism to apply concepts learned and to achieve program outcomes and competencies.

This proposal includes a description of the post-baccalaureate and post- master's DNP programs. The current master's program for nurse practitioners will be phased out and all students will complete requirements for nurse practitioner certification within the DNP program. Students who have already completed a master's degree will enter the post-master's DNP program.

## **Background: Evolution of the Doctor of Nursing Practice Degree**

The American Association of Colleges of Nursing (AACN) affiliated member schools voted in October 2004, to endorse the *Position Statement on the Practice Doctorate in Nursing* (DNP). In this statement the AACN recommended that education of advanced practice nurses be transitioned from master's to doctoral level preparation by the year 2015. Since then, the number of DNP programs across the country has substantially increased. As of June, 2015, 264 programs are currently operating in the United States with another 60 programs reporting to be in the planning stages of development (AACN, 2015). DNP programs are now available in 48 states.

In 2008, the National Organization of Nurse Practitioner Faculties (NONPF) officially endorsed the DNP as the entry level for nurse practitioner practice. In April, 2015, the NONPF Board of Directors reaffirmed this position and called for all NP educators to facilitate the transition from master's to doctoral preparation. In September 2015, a white paper, the Doctor of Nursing Practice NP Preparation: NONPF Perspective, was released. In this

paper, NONPF makes the definitive statement that "now- 2015 – is the time" for the profession to make the commitment to move forward with the plan for DNP preparation for all nurse practitioners (NONPF, 2015). In this statement, the recommendation was for schools to offer a "seamless, integrated curriculum with a post-baccalaureate DNP pathway for preparation as entry to the NP role". They also recommended that post-master's programs be available as a pathway for students who had already completed a master's degree, in order to enhance their skills in doctoral level competencies. Our proposed DNP brings the advance practice programs in nursing in line with the now well-accepted national standard.

#### **Market Assessment Doctor of Nursing Practice**

Compatibility with the Mission of the University of Delaware: The proposed doctor of nursing practice program (DNP) builds on the five core values of the University of Delaware "Delaware First, diversity, partnership, engagement, and impact. The proposed DNP program is designed to prepare advanced practice nurses who are equipped as population health and evidence based practice specialists who can provide leadership in addressing the major health problems of Delawareans. Eligible for licensure as nurse practitioners, graduates of the DNP will be specifically educated to address the basis for health disparities among the most vulnerable populations in Delaware. These advance practice nurses will be able to engage communities and partner with leaders in those communities to address social and community level barriers that impede health. As the only DNP program in Delaware that will offer admission to baccalaureate prepared nurses, and the only program that prepares graduates to provide both health and mental health care, the proposed DNP program will have significant impact on improving the health of Delawareans. The proposal comes on the heels of recent state legislation that authorizes the independent practice of advanced practice nurses, the product of the proposed program.

The proposal planning process has encompassed several years of faculty discussions culminating in a retreat of graduate faculty in early 2015, preliminary data gathering by the Graduate Education Committee during the Spring semester of 2015, the appointment of a task force in late spring 2015 and a proposal to the faculty in October, 2015. The DNP task force included Dr. Barbara Habermann, Associate Dean for Translational Research, Dr. Andrea Wolf, nurse practitioner coordinator, Dr. Cynthia Diefenbeck, Dr. Susan Conaty-Buck, a nurse practitioner and Dr. Susan Hall, Deputy Dean, College of Health Sciences. A nationally recognized DNP scholar, Dr. Kimberly Udlis provided on-going consultation during the development of the program. Impact on other university programs will be minimal. Students must have a baccalaureate degree in nursing or a master's degree in nursing to be accepted into the DNP. No other majors will be eligible to apply to this program.

Use of Existing Resources: The proposed DNP program primarily will use existing resources at the university. Individuals with expertise and experience in doctoral level instruction are currently faculty members in the School of Nursing. Several of these have experience teaching in DNP programs specifically. Faculty in the School of Nursing and the College of Health Sciences already teach similar core courses in the master's of science program (e.g. Health Assessment, Advanced Pathophysiology, etc.) and clinical courses in the nurse practitioner program. Some of the proposed coursework will be shared with the PhD program in the School of Nursing and with faculty from the Hotel Restaurant and Institutional Management School. Additional faculty is requested with the DNP proposal because some existing members of the nurse practitioner faculty are not prepared at the doctoral level and thus ineligible to teach in the program, and because the proposed DNP projects are faculty intense.

**Target Population:** Students with a baccalaureate degree or master's degree in nursing who wish to pursue a practice doctorate with specialty preparation as a nurse practitioner are the intended targets of the program. Both full and part-time students will be encouraged to apply. A hybrid/blended, executive program approach will attract nurses who often need to continue to work while they pursue an advanced degree. There are opportunities to transfer credits for both core and clinical courses.

In 2013, a School of Nursing survey was sent to all enrolled MSN students, all RN to BSN and RN to MSN students, selected alumni of nearby states from the previous 10 years (from a list of 1200), and area hospitals including Christiana, Bay Health, St. Francis, Union, Nemours, and Beebe. The total number of surveys sent is unavailable, however, over 200 responses were obtained. Most of the respondents (n=146) resided in Delaware. Eighty-eight of the respondents were masters-prepared; 96 held bachelor's degrees.

Data from this survey overwhelmingly supported an active interest among respondents in pursuing a DNP. More than half of respondents indicated that their career goals include obtaining the DNP and 42% indicated that the University of Delaware was their preferred educational institution of choice. More than half indicated that a hybrid on-line program was their preference, similar to the proposed DNP program. Overwhelmingly, this set of respondents preferred a part-time program, something that is built into the proposed plans of study for the DNP. Also built into the program is respondents' desire for a year round program. Thus regional survey data indicate a robust supply of students for a DNP that has been designed with their educational preferences in mind.

**Demand and Employment Factors:** In 2004 the American Association of College's of Nursing (AACN) set the minimal standard for entry level advanced practice as the DNP. In 2006 the AACN issued a position paper urging Schools of Nursing to adopt this standard by 2015. That the DNP serve as the entry level of nurse practitioner practice was also adopted by the National Organization of Nurse Practitioner Faculty in 2008. This position was reaffirmed in a statement issued to its membership in August 2015, indicating that all NP educators should strive to overcome barriers to this transition. Thus the proposed DNP is responsive to the national standards set by major national nursing organizations.

Doctorates in nursing practice have proliferated across the country and are responsible for a growing proportion of advanced practice nurses across the country. About 30% of Schools of Nursing currently offer a BSN to DNP program but that is expected to expand to 50% by 2016 (Auerbauch, et al.). The number of Schools offering the DNP has expanded from 20 in 2006 to 251 in 2013 (Auerbach et al.) indicating that the proposed DNP is part of the growing adoption of the national standard for entry level advanced practice. The proposed BSN to DNP is the only program of its kind in the state; the University of Wilmington offers a post-master's DNP and is the only other DNP program offered in Delaware. Other DNP programs offered regionally include Thomas Jefferson University, University of Pennsylvania, Widener University, University of Maryland, Johns Hopkin's University, and Salisbury University. These programs vary from fully online to hybrid/blended and from post-BSN to post-master's.

Graduates of DNP programs fulfill a number of clinical and management roles in practice settings as well as serve as faculty in Schools of Nursing. Data from the Educational Advisory Board (Hickson & Dowdy, 2015) showed that there were just under 5000 job postings in the mid-Atlantic region (Delaware, Pennsylvania, Maryland, Virginia, West Virginia, North Carolina) in 2014 for DNP qualified candidates. In Wilmington, Delaware alone, 128 jobs for DNPs were posted in 2014. The skill sets sought include those to be taught in the proposed DNP program including collaborative practice, patient care, primary care, program evaluation, and curriculum development. Data from the Robert Graham Center, a research arm of the American Academy of Family Practitioners (Petterson, et al., 2013) and a white paper from the Delaware Health Commission indicate that there are current and anticipated shortages in primary care and mental health care in Delaware, roles that graduates of the proposed DNP will be able to fill. Other data show a profound nursing faculty shortage that shows a vacancy rate for faculty at almost 7% (Rossiter, 2015). The proposed DNP program will be a source of new nursing faculty for all of the nursing education programs in Delaware. Thus graduates from the proposed DNP program will have a ready job market filling vital roles in Delaware's health care sector.

#### **B.** Date of Permanent Status

The date of permanent status is expected to be Academic Year 2023/2024.

#### C. Degree Offered

Students who successfully complete this program will be awarded the degree of Doctor of Nursing Practice (DNP) from the School of Nursing in the College of Health Sciences.

#### PART II. ADMISSION

#### A. Admission Requirements, Prior Degree Requirements and Special Competencies

Students will be admitted as either post-baccalaureate or post-master's students depending on their prior educational achievement. Admission requirements differ for post-baccalaureate and post-master's

applicants. Admission decisions will be made by the School of Nursing Graduate Education Committee and DNP Subcommittee. Students will be admitted to the program based on their ability to meet the following minimum recommended entrance requirements and enrollment availability.

#### Post-baccalaureate Applicants:

- Baccalaureate degree in nursing from an NLNAC or CCNE accredited School of Nursing
- Undergraduate GPA of 3.0 or higher
- Copy of active Registered Nurse (RN) license(s) in the state of Delaware or a compact state (state which has license reciprocity with the Delaware State Board of Nursing) or demonstrated eligibility for licensure

#### Post-master's Applicants:

- Master's degree in nursing from an NLNAC or CCNE accredited School of Nursing with national certification in an area of advanced nursing practice
- Graduate GPA of 3.5 or higher
- · Letter from the master's program indicating the number of clinical hours completed

#### All Applicants (as applicable):

- Relevant professional experience
- Copy of license in a state where clinical practice may be arranged
- Completion of a master's level statistics course in the past 5 years with a grade of B- or better
- Official results from the TOEFL or IELTS exam taken within the last 2 years (for nonnative English speaking applicants only). The minimum TOEFL score is 100; the minimum IELTS is 6.5.

#### **B.** Application Deadlines

Applications will only be accepted once a year during the Spring semester. The deadline is February 1, for consideration of enrollment for the Fall semester of the same year.

#### C. Admission Categories

Students will usually be admitted under regular status. However, provisional status may be granted for post-baccalaureate students whose RN licensure is pending for up to one semester. Provisional status may also be granted for post-master's applicants whose national certification is pending, for up to one semester.

#### D. Other Documents Required

- A written statement that clearly identifies the applicant's career goals and how admission to the program will facilitate his or her professional objectives.
- Three letters of recommendation: two from an academic, and one from employer and/or
  other professional source. Academic references must be from someone who is doctorally
  prepared and who can attest to the student's capacity to complete a doctoral program..
- A successful interview with the DNP Program Coordinator and members of the DNP Subcommittee.
- Demonstrated competence in written communication through submission of a writing sample
- A curriculum vitae or resume

#### E. University Statement

Admission to the graduate program is competitive. Those who meet stated requirements are not guaranteed admission, nor are those who fail to meet all of the requirements necessarily precluded from admission if they offer other appropriate strengths.

## **PART III. ACADEMIC**

The program was developed using the *Essentials for Doctoral Education for Advanced Nursing Practice* (AACN, 2006), the *NONPF NP Core Competencies Curriculum Content* (NONPF, 2014), and the *Clinical Prevention and Population Health Curriculum Framework* (Association for Prevention Teaching and Research [APTR] 2015), The *Essentials* document is considered to be the national standard for education of all advanced practice registered nurses (APRNs) at the doctoral level. It consists of eight categories of curricular elements and competencies that should be included in all practice doctorate programs for the four APRN roles: nurse practitioners, clinical nurse specialists, nurse anesthetists and nurse midwives. It also outlines criteria for the number of clinical hours (1,000) and the types of clinical practice experiences that should be included in all DNP programs. Finally, it describes the characteristics of the final DNP project as the culmination of the student's scholarly work applied in the clinical setting, which represents mastery of an advanced practice specialty.

The NONPF NP Core Competencies were developed as guidelines for educational programs preparing nurse practitioners (NP) to practice as licensed independent practitioners. Initially, core competencies for NPs were developed at the master's level. However in 2008, NONPF initially endorsed the DNP as entry level for NP education. Following that endorsement, the NONPF Core Competencies were revised in 2011 and again in 2012 to reflect DNP level competencies. The *Core Competencies* consist of nine categories that should be mastered by all nurse practitioners, regardless of their population focus.

The *Clinical Prevention and Population Health Curriculum Framework* was developed by the APTR to provide a common core of knowledge related to Individual health, population health and health promotion. The Framework was designed to be used by health professions educators in curriculum planning. It consists of four components with 23 domains that address the delivery of clinical services using a population health approach.

A consultant was contracted to guide curriculum development in the early stages of planning. Our consultant, Dr. Kimberly Udlis is a nurse practitioner educator with experience in the development of DNP programs. She has conducted research and published in the area of DNP education and is a member of the AACN DNP Task force.

#### A. Degree Requirements

The DNP Program is available at two entry levels – post-baccalaureate and post-masters. There is a core curriculum that all students must complete, and courses specific to population-focused advanced practice nursing concentrations that lead to eligibility to sit for national certification. The course requirements for this program include 14 DNP core courses, 5 NP core courses and 7-8 courses specific to the population foci. These include family nurse practitioner (FNP), adult-gerontology nurse practitioner (AGNP) and psychiatric/mental health nurse practitioner (PMHNP).

All students must complete the DNP and NP core courses. Clinical hours are included in course requirements for both core courses and for population-focused concentration courses. Students are admitted as cohorts into 3-year full-time and 5-year part-time plans of study and are expected to maintain progression with their cohort as outlined upon admission. However, students must complete all course work within a 7-year time frame in order to be eligible to earn the degree.

#### Post-Baccalaureate DNP Program

The Post-baccalaureate DNP program requires the completion of 78 course credits. Students entering the Post-baccalaureate DNP Program will choose a population-focused clinical concentration and complete all courses to meet eligibility requirements to become certified and licensed as an advanced practice registered nurse (APRN). There are full time and part time options for the post-baccalaureate program. Upon program completion, students will be eligible to apply for a national certification exam in one of the population foci. Credits for the specific population-foci are as follows:

Family Nurse Practitioner (FNP): 78 credit hours and 1120 clinical hours (direct care: 784 /indirect: 336) Adult-Gerontology Nurse Practitioner (AGNP): 78 credit hours and 1120 clinical hours (direct care: 784 /indirect: 336)

Psychiatric-Mental Health Nurse Practitioner (PMHNP): 78 credit hours and 1008 clinical hours (direct care:

672 /indirect: 336)

Tables below indicate all courses, credits and clinical hours required for the specific concentrations. The full-time and part-time plans of study for the post-baccalaureate program are found in Appendix 1 and 2 respectively.

#### **DNP Core Courses\***

Courses	Credits	Clinical Hours
NURS881 Population Health I	3	
NURS882 Population Health II	3	
NURS813 Leadership and Innovation	3	
NURS844 Population Healthcare Informatics	3	
NURS843 Policy and Finance for Healthcare Delivery	3	
NURS883 Evidence-based Practice I: Methods	3	
NURS886 Evidence-based Practice II: Translation	3	
NURS852 Integrated Healthcare Delivery I	3	
NURS873 DNP Project I: Problem Identification	3(1+2)**	112
NURS874 DNP Project II: Planning & Development	3(1+2)**	112
NURS900 DNP Project III: Implementation	3(1+2)**	112
NURS910 DNP Project IV: Evaluation & Dissemination	1	
NURS920 Clinical Role Immersion – Post-master's*** OR NURS921 Clinical Role Immersion- Post-baccalaureate	1-3 (Variable or course waiver*** 5 (2+3)	56-168 or course waiver*** 168
NURS870 Writing for Dissemination	2	
TOTAL	36-41	336-504

<sup>\*</sup> Post-master's students are required to take only DNP Core Courses

## **Nurse Practitioner Core Courses\***

Courses	Credits	Clinical Hours
NURS621 Advanced Pathophysiology	3	
NURS622 Advanced Pharmacology	3	
NURS677 Advanced Health Assessment & Diagnostic Reasoning	3	
NURS853 Integrated Healthcare Delivery II	3	
NURS818 Advanced Nursing Science	1	
TOTAL	13	

<sup>\*</sup>NP Core Courses are taken by students in all concentrations.

Course requirements for the available concentrations are listed on the following tables:

Population-Focus: Family Nurse Practitioner\*

Courses	Credits	Clinical Hours	
NURS691 Primary Care I	4		
NURS692 Primary Care NP Practicum I	4	224	
NURS693 Primary Care II	4		
NURS694 Primary Care NP Practicum II	4	224	
NURS679 Primary Care of Children	3		
NURS678 Primary Care of Women	2		

<sup>\*\*1+2</sup> indicates 1 credit of didactic hours and 2 credits of clinical hours

<sup>\*\*\*</sup>This course may be waived for post-master's students who have completed 664 or more clinical hours in their master's program.

NURS696 Primary Care NP Practicum III	3	168
FNP Total	24	616
NP Core Courses Total	13	
DNP Core Courses Total	41	504
TOTAL	78	1120

<sup>\*</sup>Post-baccalaureate students also take DNP Core Courses

Population-Focus: Adult- Gerontology Nurse Practitioner\*

Courses	Credits	Clinical Hours
NURS691 Primary Care I	4	
NURS692 Primary Care NP Practicum I	4	224
NURS693 Primary Care II	4	
NURS694 Primary Care NP Practicum II	4	224
NURS695 Primary Care of Frail/Older Adults	3	
NURS678 Primary Care of Women	2	
NURS696 Primary Care NP Practicum III	3	168
AGNP Total	24	616
NP Core Courses Total	13	
DNP Core Courses Total	41	504
GRAND TOTAL	78	1120

<sup>\*</sup>Post-baccalaureate students also take DNP Core Courses

Population-Focus: Psychiatric/Mental Health Nurse Practitioner\*

Credits	Clinical Hours
3	
3	
3	
3	168
3	
3	168
3	
3	168
24	504
13	
41	504
78	1008
	3 3 3 3 3 3 3 3 24 13

<sup>\*</sup>Post-baccalaureate students also take DNP Core Courses\*

## Post-master's DNP Program

The post-master's DNP program includes completion of all DNP core courses, a total of 36 course credits. Additional credits (1-3) will be required in a clinical immersion final course, depending on the number of clinical hours completed in the previous master's program. The purpose of these credits is to ensure that students complete a total 1,000 clinical hours as recommended by the AACN. Students who apply to the post-master's DNP option must hold national certification in an area of advanced nursing practice. Their pathway through the program will vary by the credentials they present upon admission and will also depend on their career goals. There is a part time option for the post-masters program. The plan of study for the post-master's DNP can be completed in either 2 or 3 years. Appendix 3 contains the post-master's plans of study. Pathways include:

<sup>\*\*</sup>NURS921 is substituted for NURS920

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1. Post-master's with license and certification as an advanced practice registered nurse (APRN) [clinical nurse specialist, nurse anesthetist, or nurse midwife] for the individual who seeks certification as a nurse practitioner.

#### Requirements:

Students will complete all DNP core courses (listed on page five) and all nurse practitioner courses specific for the population focus of their choice in order to be eligible to apply for national certification. Applicants who have completed more than 500 hours in their master's program and desire credit for these hours must submit a letter from their master's program documenting the number of hours completed. The advanced pharmacology course taken in previous master's coursework will only be approved provided it has been taken within the previous 3 years before matriculation. If the course is older than 3 years, it must be completed prior to beginning population-specific clinical courses.

The following table is an example of a plan of study for a post-master's student seeking a new advanced practice nurse role:

Required courses for a post-master's DNP student licensed as a CNS with a Master's degree, seeking

certification as a Adult-Gerontology NP (Sample)

Courses	Credits	Clinical Hours
NURS881 Population Health I	3	
NURS882 Population Health II	3	
NURS813 Leadership & Innovation	3	
NURS844 Population Healthcare Informatics	3	
NURS843 Policy and Finance for Healthcare Delivery	3	
NURS852 Integrated Healthcare Delivery I	3	
NURS883 Evidence-based Practice I: Methods	3	
NURS886 Evidence-based Practice II Translation	3	
NURS873 DNP Project I: Problem Identification	3 (1+2)*	112
NURS784 DNP Project II: Planning and Development	3 (1+2)*	112
NURS900 DNP Project III: Implementation	3 (1+2)*	112
NURS910 DNP Project IV: Evaluation & Dissemination	1	
NURS870 Writing for Dissemination	2	
NURS691 Primary Care I	4	
NURS692 Primary Care Practicum NP I	4	224
NURS693 Primary Care II	4	
NURS694 Primary Care Practicum II	4	224
NURS695 Primary Care of Frail/Older Adults	3	
NURS678 Primary Care of Women	2	
NURS696 Primary Care Practicum III**	3**	112
NURS853 Integrated Healthcare Delivery II	3	
TOTAL	63	896

<sup>\*1+2</sup> indicates 1 credit of didactic hours and 2 credits of clinical hours

2, Post-master's with RN license and national certification in a non-APRN area of nursing practice (e.g. nurse educator, nurse administrator).

#### Requirements:

Students will complete all DNP core courses. Applicants will be given credit for 500 clinical hours upon entering the program.

3. Post-master's with previous nurse practitioner certification and licensure seeking certification in an additional nurse practitioner population focus

<sup>\*\*</sup>This course will be offered for 1 credit with 56 hours of clinical. Three credits of this course will be required with a total of 112 hours.

#### Requirements:

Students will complete all DNP core courses. Because these students will enter with different clinical backgrounds, the clinical component of the program will include an individualized plan of study. Student transcripts and previous syllabi may be evaluated for equivalence to selected required course work for national certification.

#### Post-DNP Certificate

DNP-prepared nurses with national certification in an area of nursing practice may seek preparation as a nurse practitioner in one of the concentrations offered. In this case, students will complete only those courses required for the population-focused NP program of their choice that will allow them to apply for national certification. A certificate will be awarded.

## **Program Format and Course Delivery**

The DNP program will utilize a cohort model. Students will follow a prescribed plan of study and progress through the program in a cohort group.

The program will be offered as a blended/hybrid program. Some courses will be offered fully online; others will be primarily online with periodic in-person class sessions. In general, classes will meet on campus for 2-3 days at the beginning and 2-3 days at the end of the semester. Some courses may meet more frequently. During the semester, synchronous web conferencing will be scheduled twice monthly.

#### **Clinical Hours**

According to the AACN *DNP Essentials*, DNP students need a minimum of 1,000 hours of post-baccalaureate supervised clinical practice hours to achieve the DNP competencies. Beyond the traditional MSN, clinical experiences at the DNP level expand the student's practice to DNP level expectations. Post-baccalaureate students will receive all required hours in the program. Post-master's students will complete the number of hours required to have a total of 1000 hours, including hours completed in their master's program. Post-master's applicants will be required to submit, at the time of admission, a letter from their master's degree-awarding institution that indicates how many hours they completed in their master's program.

All students will be expected to complete a minimum of 336 indirect care clinical hours at the DNP level. Indirect care hours refer to experiences in clinical settings that do not involve direct care of patients and generally support the development and execution of the DNP Project (see below). For students who need additional hours in order to satisfy the 1,000 hour requirement, these can be completed by registering for the Clinical Role Immersion course which can be taken for variable clinical credits (1-3). This course may be waived for students with greater than 664 clinical hours in their previous master's program.

Particular areas of focus for indirect care practice experiences include:

- 1. Translation of research evidence into practice, including the complexities of motivating and achieving sustainable practice changes and staff behaviors in clinical environments.
- 2. Systems leadership for improving patient and healthcare outcomes.
- 3. Specific DNP competencies that the student may lack or has yet to develop. Students are encouraged to review the AACN *DNP Essentials* document and identify specific competencies in their practices that they would like to strengthen through their clinical hour requirements.
- 4. Development of skills that support successful completion of the student's DNP Project.

## B. Committees (DNP Project Teams)

Students will lead DNP Project Teams that will consist of a Faculty Mentor and 2 Team Members. Team members will consist of an additional faculty member and a member who is an expert in the student's area of clinical interest. Details outlining the roles of team members are found in Appendix 4, section 2.

#### **DNP Project Policies**

All DNP students will complete an evidence-based practice project as a requirement for graduation. Students will identify a practice problem, perform a critical appraisal of the evidence for best practices, and propose and implement a practice change in the health care setting. The DNP project is a culmination of the knowledge and skills gained throughout the DNP program. The entire experience provides students the opportunity to integrate and apply the knowledge and skills gained. The planning, implementation, evaluation and dissemination of the project is an opportunity to demonstrate an analytical approach to programmatic, administrative, policy, or practice issues in a format that supports the synthesis, transfer, and utilization of knowledge.

## **Types of DNP Projects**

The following is a list of examples of projects (not exhaustive) that may be developed and implemented by a DNP student:

- System modification for quality improvement processes
- Information technologies applied in the health care setting to improve health outcomes
- Health care delivery innovations
- Analysis and application of a health care policy
- Health education program with consumer or professional teams
- Elements of a clinical practice guideline in the health care setting

Students will be encouraged to consult the NONPF Recommended Criteria for NP Scholarly Projects in the Practice Doctorate Program (NONPF, 2007) for criteria for project development and suggestions for types of projects.

A complete description of the DNP Project policies, including the coursework, the project team, the project proposal and approval process, implementation of the project, and final products leading to degree completion, are found in Appendix 4.

#### C. Timetable and Satisfactory Progress toward the DNP Degree

#### **Academic Load**

The Post-baccalaureate DNP degree may be completed on a full- or part-time basis. Two plans of study for each of the concentrations are available- the 3-year full-time plan, or the 5-year part-time plan. The post-master's DNP may be completed by following either a 2- or 3-year plan of study. All students are required to complete the degree in a 7-year timeframe. (Please see Appendices 1,2 and 3 for all full-and part-time plans of study).

#### Grade Requirements and Consequences for Failure to Make Progress

Successful progress toward completion of the DNP degree is determined by the student's performance in the courses for which he/she is registered. Graduate students in nursing are subject to the standards for academic status set forth in the University of Delaware Graduate Catalog. To be eligible for an advanced degree, a student's cumulative grade point average must be at least 3.0. The progression policy is as follows:

1. If a student receives a grade below a B- in a graduate nursing course, the course will not be counted toward the requirements for a degree, but is calculated in the student's cumulative grade point average. A graduate student who receives a grade less than a B- in a required nursing course must repeat the course. Only two courses may be repeated and each course may be repeated only one time. Students may not progress if they have not earned a B- or better in the prerequisite course/s. If a student fails to obtain a B- or better after repeating a course, it will be recommended to the Office of Graduate Studies that the

student be dismissed from the program.

2. If a student receives a failure in a clinical practicum course that is graded on a pass/fail basis, the student will not proceed in the program until the course is re-taken and a grade of pass is obtained.

Clinical practicum courses and population-focused specialty didactic courses must be taken as corequisites unless otherwise specified in the course syllabus. When these courses are offered only once/year, receiving a non-passing grade in any of these courses may result in delaying the expected date of graduation by one year.

**Monitoring of Progress:** Each student is evaluated according to the requirements established by course faculty. Didactic courses generally include a combination of the following evaluation measures: written examinations, class presentations, term papers, and self and/or group evaluations. A practicum course may be evaluated by clinical observations, supervision, logs, clinical papers, clinical projects, performance testing, self-evaluation, and preceptor/faculty evaluation.

Each student's record is reviewed each semester by the student's advisor. If academic difficulties are identified, the faculty advisor counsels the student and files the recommendations with the Committee for Graduate Education in the School of Nursing.

**Change of Program Concentration:** Students in good standing may request a change in concentration by discussing their interest to change with their academic advisor and the DNP Coordinator. They must complete the appropriate form available from the graduate secretary, School of Nursing. The decision to grant a request for a change in program concentration is made by the DNP Coordinator. Once permission is granted, the appropriate form must be signed and put into the student's record. It must be noted that a change in program concentration may delay the expected graduation date.

**Maintaining Student Status:** All students are expected to maintain continuous registration. Failure to comply with the requirement of maintaining continuous registration in courses, in sustaining status, or with approved leave of absence, will be taken as evidence that the student has terminated his/her graduate program, and the admitted status to the graduate program will be terminated. The date of termination will be recorded on the student's transcript.

Leave of Absence: Students who do not register for courses at the University in Fall or Spring semester must request a leave of absence for that semester. Matriculated students who seek a leave of absence from the program must write a letter to their advisor requesting a leave of absence. The school will forward the request to the Office of Graduate Studies. The length of time needed for the leave should be indicated. Upon approval by the Office of Graduate Studies, the student's academic transcript will note the approved leave in the appropriate semesters. The period of absence will not affect the limitation of time for completion of the degree requirements as stated in the student's official letter of admission.

**Resignation from the University:** A graduate student wishing to resign from the University (i.e., terminate his/her association with the University and a specific degree program) may do so by submitting a letter to the Office of Graduate Studies and the School of Nursing Graduate Program Director indicating the reasons for the resignation. The Office of Graduate Studies will cancel the student's matriculation and indicate the effective date of the resignation on the student's transcript.

**DNP Project Progress Timetable Guidelines:** The timetables for DNP Project completion for each concentration are outlined in the plans of study (Appendices 1-3). All DNP Project steps are completed within specific courses. The process for obtaining approval of the project proposal, presentation of the project results and forms required are addressed in Appendix 4.

Protocol for Grievance Procedure: Students who think that they have been graded inappropriately or receive

what they perceive as an unfair evaluation by a faculty member may file a grievance in accordance with the University of Delaware polices. (See <a href="http://www.udel.edu/stuguide/15-16/grievance.html">http://www.udel.edu/stuguide/15-16/grievance.html</a>) Students are encouraged to contact the School of Nursing DNP Coordinator to file a formal grievance in an effort to resolve the situation informally.

#### IV. ASSESSMENT PLAN

The following represent the Doctor of Nursing Program outcomes:

- 1. Integrate nursing science and practice to plan and develop new practice approaches that lead to improvement of health outcomes for diverse populations.
- 2. Apply leadership skills to influence Interprofessional teams that foster creative innovation in complex healthcare systems.
- 3. Analyze evidence for translation of research into best practices to improve quality of care.
- 4. Integrate population health measures to monitor health outcomes of individuals, groups, systems, and populations.
- 5. Evaluate and utilize healthcare informatics practices and technologies used to promote health improvement and wellness of individuals and populations
- 6. Translate principles of population health into clinical care through community engagement and public health initiatives.
- 7. Contribute to health policy change on the local, national and global levels to improve efficiency and effectiveness of an integrated health care model.
- 8. Demonstrate competencies in various advanced nursing practice roles with diverse populations across integrated healthcare systems.

In addition to these program outcomes, the DNP curriculum was developed using the *Clinical Prevention and Population Health Curriculum Framework* (Association for Prevention Teaching and Research (2015), the *NONPF NP Core Competencies Curriculum Content* (NONPF, 2014), and the *Essentials for Doctoral Education for Advanced Nursing Practice* (AACN, 2006). (See Appendix 5 for the *Summary Crosswalk* linking courses with these documents). Course objectives for every course are linked to these documents. Students will be required to submit the DNP Portfolio as a requirement for DNP Project Evaluation of Dissemination. The Portfolio will be one method to evaluate whether all program outcomes and competencies are achieved.

All students are graded using a standard University of Delaware grade distribution. All courses have the same grading scale to ensure consistency. Students in the graduate program must have a B- or better to pass a course. The course syllabi are the formal documents in which students are informed of assignments, grading practices and grading rubrics.

Students are evaluated in the clinical setting by both preceptors and faculty. A preceptor evaluation tool is used for preceptor input, however course faculty make grading decisions. Preceptors provide midterm and end-of – semester evaluations and are asked to review their feedback with the student. The faculty member makes contact with clinical preceptors throughout the semester. Site visits are made twice each semester by course faculty and provide both formative and summative evaluation. Additional site visits may be made for the student requiring more intensive monitoring of clinical performance. Remediation plans are utilized at the discretion of course faculty.

Evidence for aggregate achievement of program outcomes in the DNP program will be captured using the *New Graduate* online exit survey, which is sent electronically to graduates. Alumni surveys will be sent to new DNP graduates 1 year and 5 years after graduation. The results and trends of data from both surveys are systematically reviewed by the GEC and used to make appropriate program/course changes. Benchmarks are established for completion rates (70%), certification rates (80%) and employment rates (70%).

The SON's evaluation plan allows for review of courses, curriculum, student and faculty outcomes, and overall program evaluation. The Evaluation Committee has created a Program Evaluation Assessment Calendar which provides a timeline of the various types of program evaluations including the responsible committee or person, and the process for handling and storing results. This calendar is reviewed and updated at least

biennially. Data are analyzed by SON administrators and/or faculty committees and trends are reviewed and compared to established benchmarks or state and national standards. The faculty is kept informed through committee reports and discussion at School of Nursing monthly meetings. Faculty workshops also provide opportunities for analysis of data and strategic planning based on data.

#### V. Financial Aid

Financial aid information for all nursing courses can be found at the following link: http://sites.udel.edu/nursing/grad-tuition/

#### VI. Departmental Operations

## A. General Student Responsibilities and Resources

Students must make sure that their current correct name, home address, e-mail address, and home and work telephone number(s) are on file in the Graduate Office of the SON so that they can be reached as needed. Students must also update the University Student Information System records through UDSIS (<a href="www.udel.edu/udsis">www.udel.edu/udsis</a>). Students teaching and/or doing research in the School of Nursing laboratories and/or affiliated clinical agencies must comply with the Mandatory Clinical Requirements. Additional requirements may be necessary dependent on the healthcare agency to which a student affiliates. Vehicles are not provided for School of Nursing students. Students are responsible for their own transportation to class, laboratory, research and clinical sites. Students will have access to computer labs to access emails, course pages and for printing purposes.

## **B. Student Government and Organizations**

A student representative will be a member of the DNP Program Committee. Participation in other SON committees will be solicited as needed. Students will be encouraged to become involved in the University's Graduate Student Senate. Doctoral students also will be encouraged to become active members of professional organizations such as the Eastern Nursing Research Society, American Nurses Association, Delaware Nurses Association, Sigma Theta Tau International (including the University's Beta Xi chapter), and other professional organizations representing their clinical specialty and research interests.

## C. Graduate Student Travel Support

Travel for professional meetings or presentations will be funded as grants as SON funds allow. Decisions will be made on an individual basis. The SON will help with support for travel expenses incurred by full-time graduate students who are making formal presentations of their scholarly work at regional, national, and international meetings of recognized professional organizations. Full-time graduate students who are presenting at a conference will need to provide verification of acceptance with the travel request. If travel involves reporting on sponsored research, it will be appropriate to pay for that travel with grant monies.

Information on how to request travel funds is found below. This will be strictly adhered to for all graduate student travel. All requests for travel support must be sent to the DNP Program Coordinator no later than October 7 of each year for travel anticipated in the academic year.

#### **Travel Application Process**

Students must complete the Professional Development Award for Graduate Students Application Form (http://www.udel.edu/gradoffice/forms/profdevaward.pdf) and submit it to the Coordinator of the DNP program by October 7 of each year. Applications will be reviewed quickly and students will be notified if their application was approved at the SON level.

If students have applied to present at a conference but do not know their acceptance status by the October 7 deadline, or, if students are considering submitting a conference abstract for presentation, they should still apply for funding from the SON by the deadline. All SON travel awards will be approved for the year by

November 30 and no additional travel awards will be approved later in the academic year, except in extenuating circumstances with permission of the DNP Program Coordinator.

After approval by the SON, students must submit the Professional Development Award for Graduate Students Application Form to the Office of Graduate and Professional Education (OGPE). Students must apply to the OGPE for travel funding in order to receive any travel funds from the SON.

Students must refer to the maximum award available from the OGPE for the academic year; however, funds may be provided at a lower level. The SON will match up to the maximum allowable award provided by the OGPE. If the total amount of a trip is less than the combined SON/OGPE award, each unit will provide up to half of the cost of the trip. A student can generally receive the OGPE award two times during the time s/he is a student. If SON funds permit, money for a third or fourth trip might be possible.

Students will follow procedures instituted for making conference arrangements. As soon as students receive confirmation that their paper or poster has been accepted for presentation, they should make an appointment immediately with SON Associate Dean's Administrative Assistant (AA). A request will be made for a debit card for students with a maximum balance equal to the amount of travel funds they have been approved to receive and will assist students in making travel arrangements for transportation and hotels as needed. Students may not use their own credit card(s) to make reservations. Students will not be reimbursed for any expenses charged to their own account(s). There will be NO exceptions to this rule.

Only conference registration, travel arrangements (air, train, and ground) and lodging/hotel will be reimbursed. Food, beverages and incidentals (newspapers, internet charges, phone calls, etc.) will not be reimbursed, even if they are under amount of the award.

All receipts, including travel documents (airline or train tickets and boarding passes), conference registration, and lodging/hotel invoices must be kept and submitted to the SON Associate Dean's AA upon the student's return. Students should schedule another meeting with the Associate Dean's AA within 15 days of return from the conference and she will help navigate the University's Works Program to reconcile the debit card statement.

Students must be able to provide verification that they were a conference presenter/participant, not just an attendee. Conference programs listing student's name and notification of presentation must be submitted along with all receipts.

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## **Appendix 1: Full Time Plans of Study**

## A-GNP 3 Year FT

## Year 1

FALL	SPRING		SUMMER		
Population Health I	3	Advanced Pharmacology	3	Advanced Health 3 Assessment and Diagnostic Reasoning	
Nursing Science for Advanced Practice Nursing	1	Population Health II	3	EBP I: Methods 3	
Advanced Pathophysiology	3	Policy and Finance for Healthcare Delivery	3		
Leadership and Innovation for Population Health	3	Population Health Care Informatics	3		
Integrated Health Care Delivery I	3				
TOTAL	13	TOTAL	12	TOTAL 6	

## Year 2

FALL		SPRING		SUMMER	
Primary Care I	4	Primary Care II	4	DNP Project II: Planning & Development (112 hours)	3 (1+2)
Primary Care NP Practicum I (224 hours)	4	Primary Care NP Practicum II (224 hours)	4	Elective (optional)	(3)
DNP Project I: Problem Identification (112 hrs)	3 (1+2)	EBP II: Translation	3		
TOTAL	11	TOTAL	11	TOTAL	3(6)

FALL		SPRING		SUMMER	
Primary Care of Frail/Older Adults	3	DNP Project IV: Evaluation and Dissemination	1		
Primary Care of Women	2	Clinical Role Immersion- Post-baccalaureate (168 hours)	5 (2+3)		
Primary Care NP Practicum III: Special Populations (56 hours: 3 credits required for total 168hrs; may be taken separately)	3	Integrated Health Care Delivery II	3		
DNP Project III: Implementation (112 hours)	3 (1+2)				
Writing for Dissemination	2				
TOTAL	13	TOTAL	9	TOTAL	

Total credits: 78

Total clinical hours: 1120 (direct: 784 /indirect: 336)

## FNP 3 Year FT

## Year 1

FALL		SPRING		SUMMER	
Population Health I	3	Advanced Pharmacology	3	Advanced Health Assessment and Diagnostic Reasoning	3
Nursing Science for Advanced Practice Nursing	1	Population Health II	3	Evidence-Based Practice I: Methods	3
Advanced Pathophysiology	3	Policy and Finance for Healthcare Delivery	3		
Leadership and Innovation in Population Health	3	Population Health Care Informatics	3		
Integrated Health Care Delivery I	3				
TOTAL	13	TOTAL	12	TOTAL	6

## Year 2

FALL		SPRING		SUMMER	
Primary Care I	4	Primary Care II	4	DNP Project II: Planning & Development (112 hours)	3 (1+2)
Primary Care NP Practicum I (224 hours)	4	Primary Care NP Practicum II (224 hours)	4	Elective (optional)	(3)
DNP Project I: Problem Identification (112 hours)	3 (1+2)	Evidence-Based Practice II: Translation	3		
TOTAL	11	TOTAL	11	TOTAL	3(6)

FALL		SPRING		SUMMER	
Primary Care of Children	3	DNP Project IV: Evaluation and Dissemination	1		
Primary Care of Women	2	Clinical Role Immersion- Post-baccalaureate (168 hours)	5 (2+3)		
Primary Care NP Practicum III: Special Populations (56 hours, 3 credits required for total 168 hrs; may be taken separately)	3	Integrated Health Care Delivery II	3		

DNP Project III: Implementation (112 hours)	3 (1+2)				
Writing for Dissemination	2				
TOTAL	13	TOTAL	9	TOTAL	

Total credits: 78

Total clinical hours: 1120 (direct: 784 /indirect: 336)

## Psych NP 3 Year FT

## Year 1

FALL		WINTER	SPRING				SUMMER			
Population Health I	3	Advanced Clinical Neuroscience	3		Advanced Pharmacology	3		Advanced Health Assessment and Diagnostic Reasoning	3	
Nursing Science for Advanced Practice Nursing	1				Population Health II	3		Evidence-Based Practice I: Methods	3	
Advanced Pathophysiology	3				Policy and Finance for Healthcare Delivery	3				
Leadership and Innovation in Population Health	3				Population Healthcare Informatics	3				
Integrated Healthcare Delivery I	3									
TOTAL	13	TOTAL	3		TOTAL	12		TOTAL	6	

## Year 2

FALL		SPRING		SUMMER	
Psych/Mental Health Nursing I	3	Psych/Mental Health Nursing II	3	DNP Project II: Planning & Development (112 hours)	3 (1+2)
Psych/Mental Health NP Practicum I (168 hours)	3	Psych/Mental Health NP Practicum II (168 hours)	3	Elective (optional)	(3)
DNP Project I: Problem Identification (112 hours)	3 (1+2)	Evidence-Based Practice II: Translation	3		
Advanced Psychopharmacology	3				
TOTAL	12	TOTAL	9	TOTAL	3 (6)

FALL		SPRING		SUMMER	
Psych/Mental Health Nursing	3	DNP Project IV: Evaluation	1		
III		and Dissemination			
Psych/Mental Health NP	3	Clinical Role Immersion-	5		
Practicum III (168 hours)		Post-baccalaureate (168	(2+3)		
		hours)			
DNP Project III:	3	Integrated Health Care	3		
Implementation (112 hours)	(1+2)	Delivery IICare Model II			

Writing for Dissemination	2				
TOTAL	11	TOTAL	9	TOTAL	

Total credits: 78

Total clinical hours: 1008 (direct: 672 /indirect: 336)

## Appendix 2: Part-Time Plans of Study

## A-GNP 5 Year PT

## Year 1

FALL		SPRING		SUMMER	
	3	Population Health II	3		
Population Health I					
Nursing Science for	1				
Advanced Practice Nursing					
TOTAL	4	TOTAL	3	TOTAL	

## Year 2

FALL		SPRING	SUMMER			
Leadership and Innovation in Population Health Integrated Health Care	3	Policy & Finance for Healthcare Delivery Population Health Care	3	Evidence-Based Practice I: Methods	3	
Delivery I	6	Informatics	6	TOTAL	3	

## Year 3

FALL		SPRING			SUMMER			
Advanced Pathophysiology	3	Advanced Pharmacology	3		Advanced Health Assessment and Diagnostic Reasoning	3		
DNP Project I: Problem Identification (112 hrs)	3 (1+2)	Evidence-Based Practice II: Translation	3					
Writing for Dissemination	2							
TOTAL	8	TOTAL	6		TOTAL	3		

FALL		SPRING	SUMMER			
Primary Care I	4	Primary Care II	4	DNP Project II: Planning 3 & Development (112 (1+2) hours)		
Primary Care NP Practicum I (224 hours)	4	Primary Care NP Practicum II (224 hours)	4			

## Year 5

FALL		SPRING				
Primary Care of Frail/Older Adults	3	DNP Project IV: Evaluation and Dissemination	1			
Primary Care of Women	2	Clinical Role Immersion- Post-baccalaureate (168 hours)	5 (2+3)			
Primary Care NP Practicum III: Special Populations (56 hours, 3 credits required for total 168hrs; may be taken separately)	3	Integrated Health Care Delivery II	3			
DNP Project III: Implementation (112 hours)	3 (1+2)					
TOTAL	11	TOTAL	9		TOTAL	

Total credits: 78; Total clinical hours: 1120 (direct: 784 /indirect: 336)

## FNP 5 Year PT

## Year 1

oui i						
FALL		SPRING	SUMMER			
	3	Population Health II	3			
Population Health I						
Nursing Science for	1					
Advanced Practice Nursing						
TOTAL	4	TOTAL	3	TOTAL		

## Year 2

FALL		SPRING			SUMMER			
Leadership and Innovation in Population Health			Policy and Finance for Healthcare Delivery	3	3 Evidence-Based Practi I: Methods			
Integrated Health Care Delivery I	3		Population Health Care Informatics	3				
TOTAL	6		TOTAL	6		TOTAL	3	

# Year 3

FALL		SPRING				SUMMER			
Advanced Pathophysiology	3		Advanced Pharmacology	3		Advanced Health	3		
						Assessment and			
						Diagnostic Reasoning			
DNP Project I: Problem	3		Evidence Based Practice II:	3					
Identification (112 hrs)	(1+2)		Translation						
	2								
Writing for Dissemination									
	8		TOTAL	6		TOTAL	3		
TOTAL	•		IOIAE	)		TOTAL	)		

I Gal 7		
FALL	SPRING	SUMMER

TOTAL	8	TOTAL	8	TOTAL	3
Primary Care NP Practicum I (224 hours)	4	Primary Care NP Practicum II (224 hours)	4		
Primary Care I	4	Primary Care II	4	DNP Project II: Planning & Development (112 hours)	3 (1+2)

## Year 5

FALL		SPRING			
Primary Care of Children	3	DNP Project IV: Evaluation	1		
		and Dissemination			
Primary Care of Women	2	Clinical Role Immersion-	5		
		Post-baccaluareate (168	(2+3)		
		hours)			
Primary Care NP Practicum	3	Integrated Health Care	3		
III: Special Populations (56		Delivery II			
hours, 3 credits required for					
total 168hrs; may be taken					
separately)					
DNP Project III:	3				
Implementation (112 hours)	(1+2)				
TOTAL	11	TOTAL	9	TOTAL	

Total credits: 78; Total clinical hours: 1120 (direct: 784 /indirect: 336)

## Psych NP 5 Year PT

## Year 1

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	FALL			SPRING			SUMMER	
			Population Health II	3				
Po	opulation Health I							
Nu	ursing Science for	1						
	dvanced Practice Nursing							
	TOTAL	4		TOTAL	3		TOTAL	

## Year 2

FALL		SPRING	SUMMER				
Leadership and Innovation in Population Health	3	Policy & Finance for Healthcare Delivery	3	Evidence-Based Practice 3 I: Methods	3		
Integrated Health Care Delivery I	3	Population Healthcare Informatics	3				
TOTAL	6	TOTAL	6	TOTAL 3	3		

FALL		WINTER		SPRING		SUMMER	
Advanced Pathophysiology	3	Advanced Clinical Neuroscience	3	Advanced Pharmacology	3	Advanced Health Assessment and Diagnostic Reasoning	3

DNP Project I: Problem Identification (112 hrs)	3 (1+2)			Evidence Based Practice II: Translation	3	Advanced Psychopharmacology	3
Writing for Dissemination	2						
TOTAL	8	TOTAL	3	TOTAL	6	TOTAL	6

## Year 4

FALL		SPRING				SUMMER			
Psych/Mental Health Nursing 3			Psych/Mental Health Nursing II			DNP Project II: Planning & Development (112 hours)	3 (1+2)		
Psych/Mental Health NP Practicum I (168 hours)	3		Psych/Mental Health NP Practicum II (168 hours)	3					
TOTAL	6		TOTAL	6		TOTAL	3		

#### Year 5

FALL			SPRING			
Psych/Mental Health Nursing	3		DNP Project IV: Evaluation and Dissemination	1		
Psych/Mental Health NP 3 Practicum III (168 hours)			Clinical Role Immersion- Post-baccaluareate (168 hours)	5 (2+3)		
DNP Project III: Implementation (112 hours)	3 (1+2)		Integrated Health Care Delivery II	3		
TOTAL	9		TOTAL	9	TOTAL	

Total credits: 78; Total clinical hours: 1008 (direct: 672 /indirect: 336)

## Appendix 3: Post- master's Plans of Study

## 2 Year

## Year 1

FALL		SPRING		SUMMER
Population Health I	3	Population Health II	3	Evidence-Based Practice 3
				II: Translation
DNP Project I: Problem	3	Evidence Based Practice I:	3	DNP Project II: Planning 3
Identification (112hrs)	(1+2)	Methods		& Development (112 (1+2)
				hours)
Leadership and Innovation in	3	Population Health Care	3	
Population Health		Informatics		
		Policy & Finance for Health	3	
		Care Delivery		
TOTAL	9	TOTAL	12	TOTAL 6

FALL		SPRING	SUMMER	

DNP Project III: Implementation (112 hours)	3 (1+2)	DNP Project IV: Evaluation and Dissemination	1		
Writing for Dissemination	2	Clinical Role Immersion- Post-master's (variable credit 56 minimum to168 hrs. based on number of hours needed to have 1000 total; or course may be waived)	1-3		
Integrated Health Care Delivery I	3				
TOTAL	8	TOTAL	1-4	TOTAL	

Total credits: 36-39 Total clinical hours: indirect: 336-504

## 3 year

#### Year 1

FALL		SPRING		SUMMER	
Population Health I	3	Population Health II	3	Evidence-Based Practice I: Methods	3
Leadership and Innovation in Population Health	3	Population Healthcare Informatics	3		
TOTAL	6	TOTAL	6	TOTAL	3

FALL		SPRING		SUMMER		
DNP Project I: Problem Identification (112 hrs)	3 (1+2)	Policy and Finance for Healthcare Delivery	3	DNP Project II: Planning & Development (112 hours)	3 (1+2)	
		Evidence-Based Practice II: Translation	3			

	TOTAL	3		TOTAL	6		TOTAL	3	
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## Year 3

FALL		SPRING		SUMMER
DNP Project III:	3	DNP Project IV: Evaluation	1	
Implementation (112 hours)	(1+2)	and Dissemination		
Writing for Dissemination	2	Clinical Role Immersion- Post-master's (variable clinical hours 56-168 based on number needed to total 1000; or course may be waived)	1-3	
Integrated Healthcare Delivery I	3			
TOTAL	8	TOTAL	1-4	TOTAL

Total credits: 36-39

Total clinical hours: Indirect: 336-504

#### 1. DNP Project Coursework

Specific coursework is designed to guide students throughout the DNP project experience including:

- NURS883 Evidence-based Practice I- Methods
- NURS873 DNP Project I- Problem Identification
- NURS884 Evidence-based Practice II- Translation
- NURS874 DNP Project II- Planning and Development
- NURS900 DNP Project III- Implementation
- NURS870 Writing for Dissemination
- NURS910 DNP Project IV- Evaluation and Dissemination

The course faculty, and the DNP Project Faculty Mentor and Team (see below) work together to provide the appropriate scaffolding needed for the DNP student to develop, implement, evaluate, and disseminate the DNP Project. The following courses, listed in sequential order, guide the student through the process:

**NURS883 Evidence-base Practice I- Methods:** Students are encouraged to consider and identify their interest area as early as possible in the program. Students in this course may or may not identify the targeted population or area of interest that will become their project focus. Students will learn methods for critically appraising the literature using an evidence-based practice model.

**NURS873 DNP Project I- Problem Identification:** During this course, the student identifies the targeted population and area of interest that will become the focus of the DNP Project. Course faculty will guide students in exploring an area of interest related to primary care, mental health, or current area of practice (post-master's students), while applying principles of leadership in the clinical setting. Students will explore the literature to identify a high priority problem. Students will then conduct a review of available research pertinent to their area of study. When determining their area of interest, students will consider faculty expertise/interests, available clinical populations, and their own skills and clinical interests. By the completion of the course, students will have developed a well-articulated problem statement that will form the basis for project development and implementation. Students are also encouraged to begin considering potential individuals who can serve as the DNP Project Faculty Mentor and Team members.

**NURS884 Evidence-based Practice II- Translation:** Students will analyze frameworks for translation of evidence related to their practice question to guide the change process in the practice setting. Special attention will be given to legal/ethical issues related to human subjects/health outcomes research. Students will learn the process of performing a needs assessment and assessing organizational resources and will begin to define the scope of the project, using a translation model.

NURS874 DNP Project II- Planning and Development: Under the guidance of course faculty, students will engage in project planning for evaluation of both the process and outcomes of the project implementation. Emphasis will be placed on development of measureable goals/outcome metrics for the project, refinement of the project scope, and establishment of a work plan with time frames. Students will identify key stakeholders in the agency targeted for project implementation, including a potential external DNP Project Team member. Students will develop a project budget as well as a sustainability plan, if applicable. Students will complete human subjects training at this time as required by University of Delaware's Institutional Review Board (IRB). During the course (although it can occur earlier), the DNP Project Team is formed (See 2: DNP Project Team). At the end of the course, the DNP Project Proposal is presented in class, with the DNP Project Team in attendance (See 3: DNP Project Proposal Process). After the DNP Project Proposal is approved by the DNP Project Team, responsibility for the DNP Project shifts from course faculty to the DNP Project Faculty Mentor. Also, after approval, the student must submit the proposal to the UD IRB for review. Depending on the practice site for the project, IRB approval may be required by the facility involved. The student and Faculty Mentor will establish a meeting schedule and time frames that adhere to the DNP Program's course progression/plan of study.

**NURS900 DNP Project III- Implementation:** This course will include faculty-led class seminars used for ongoing feedback from student colleagues and the course instructor. However, direct oversight of the student is now assumed by the DNP Project Faculty Mentor. At this point, the student leads implementation of the DNP project in the practice setting under the guidance of the assigned DNP Project Faculty Team (see 4: Implementation of the DNP Project). Some of the students will conduct studies that are considered human subjects research. Those students will need to complete CITI training in human subjects research and submit a protocol for their research for approval by the IRB. It will not be necessary for all DNP projects. Implementation cannot begin until the student has received IRB approval. Student efforts focus on monitoring the process of the implementation, making adjustments in the process to ensure success, and collecting data related to both process and health outcomes. The student will address threats to success of the project and adjust the process as necessary. Plans for either project closure or project sustainability will be refined by the student with assistance from the Project Team.

**NURS818 Writing for Dissemination:** This course is taken prior to DNP Project IV: Evaluation and Dissemination. Course faculty will prepare students to successfully disseminate their projects in the form of published articles in peer-reviewed practice or scientific journals. The student will identify the most appropriate target readership and journal for a manuscript based on the research question of interest and purpose of dissemination. The student will explore the steps and procedures involved in the journal submission, review, and resubmission process. By the conclusion of the course, the student will have developed the first draft of an evidence-based manuscript following the guidelines from an appropriate selected journal. The manuscript draft serves as the foundation for one of the final DNP Products, the DNP Project Manuscript (see 5: Final DNP Project Products).

**NURS910 DNP Project IV- Evaluation and Dissemination**: This course focuses on analysis of outcomes data for the practice change improvement and dissemination of results to the professional community and practice setting. The student continues to work closely with their DNP Project Faculty Mentor and Team members. Course seminars provide opportunities for peer review and feedback during the evaluation and dissemination phase of the DNP project. The student is responsible for successful completion of the DNP Project as well as successful completion of the final DNP Project products which include:

- DNP Project Brief
- Final DNP Project Presentation
- DNP Project Poster
- DNP Project Manuscript

Details are provided in 4: Final DNP Project Products.

#### 2. DNP Project Team

The DNP Project Team is assembled during NURS874 DNP Project II: Planning and Development. The roles and expectations of the various DNP Project Team members are described below. The process for creation, modification, and approval of the DNP Project Team is included.

DNP Student Leader: The student's role is to lead the DNP Project Team. The DNP student is expected to effectively develop, implement, evaluate, and disseminate the DNP Project under the supervision of their Faculty Mentor and team. It is expected that the student will use advanced critical thinking and judgment to determine the need for additional guidance and will seek mentoring from DNP Project team members or other experts as appropriate. It is expected that the student will seek feedback, readily accept critique of any aspect of the project's development, implementation, evaluation, or dissemination, and promptly incorporate feedback as provided. With the guidance from the DNP Project Faculty Mentor, the student will demonstrate the ability to effectively navigate a range of recommendations from DNP Project team members or clinical stakeholders. It is expected that the student will use expert leadership skills in developing partnerships with community members, clinical agency personnel, and stakeholders, follow all agency policies/guidelines, and adhere to the highest level of ethical behavior and professional standards. The student is expected to maintain consistent

and effective communication with course faculty and the DNP Project Faculty Mentor and Team members. The student will be knowledgeable of and follow all policies and guidelines related to the DNP Project and its final products. It is expected that the student will demonstrate a high level of scholarship and will complete the project and submit all assignments in a timely manner.

DNP Project Faculty Mentor: The student should first select a DNP Project Faculty Mentor. Student identification and selection of the Faculty Mentor is conducted in conjunction with course faculty teaching DNP Project I: Problem Identification and NURS874 Project II: Planning and Development. Selection is dependent upon mutual agreement of the student and the faculty member who is asked to serve as the Faculty Mentor and is subject to approval by the DNP Program Coordinator. The student and Faculty Mentor will work together, often intensively, over an extended period of time, so careful selection is essential. The Faculty Mentor must be a doctorally-prepared faculty member in the SON. The choice of the Faculty Mentor should be made based on the student's proposed area of clinical inquiry and the faculty member's clinical and scholarly expertise. A recommended approach for students to use in identifying a Faculty Mentor is to become informed about faculty members' clinical and scholarly interests and areas of expertise. The Faculty Mentor may or may not have served as the student's academic advisor. He/she must be the team member most competent to supervise the project as a whole, but is not the only resource person for all aspects of the project.

The Faculty Mentor assumes primary responsibility for oversight of the DNP Project during the NURS900 DNP Project III and NURS910 DNP Project IV courses. If identified early, the Faculty Mentor may choose to begin working with the student during the DNP Project I and/or II courses in collaboration with the course faculty, if the course faculty approves. The Faculty Mentor monitors the student's progress and guides the student to completion of the DNP Project and the required final DNP Project products. The following outlines the role of the Faculty Mentor:

- Assure IRB compliance and serve as faculty of record on IRB submission (when applicable).
- Mentor the student throughout the preparation of the DNP Project proposal: the project development, implementation, evaluation process, and the (final DNP Project products).
- Collaborate with student to schedule DNP Project Team meetings for proposal presentation and final DNP Project presentation.
- Lead DNP Project Team review and approval of the DNP Project Proposal and the final DNP Project products (DNP Portfolio, DNP Project brief, final DNP Project presentation, and DNP Project manuscript).
- Communicate effectively with DNP student and team members.
- Provide feedback to student on written drafts in a timely manner.
- Document student progress toward completion of DNP Project requirements.
- Mentor School of Nursing faculty with interest in participating in DNP Projects.

**DNP Project Team Members:** With the help of the DNP Project Faculty Mentor, the student selects members of her/his DNP Team. In addition to the Faculty Mentor, the team must consist of a minimum of two members, at least one of whom must be doctorally-prepared faculty of the UD SON. A Professor Emeritus may serve on a DNP Team and count as a SON member. The third member may be a SON faculty member or someone from outside the SON who is an expert in the student's clinical area. In addition to the Faculty Mentor, one other team member must be doctorally-prepared. Additional team members must be at least master's-prepared. Note that only doctorally prepared faculty will approve the final project.

It is not necessary for the student to consult team members equally about each aspect of the clinical problem and approach. Members should be consulted primarily on those aspects directly related to their specific areas of expertise. Additional faculty or clinical resource persons may be consulted as needed. It is the joint responsibility of the student and Faculty Mentor to make the final decisions on problem and method, even if decisions are made that one or more team members believe to be less than optimal. The team's responsibility is to act in an advisory capacity rather than as directors of the project. The following outlines the role of DNP Team Member:

- Critique drafts of the developing DNP Project proposal.
- Participate in team review and approval of the DNP Project Proposal and the final DNP Project

products (DNP Project Brief, final DNP Project Presentation, and DNP Project Manuscript).

- Provide feedback to the student on written drafts in a timely manner.
- Communicate concerns to student and Faculty Mentor in a timely manner.

**DNP Project Team Membership – Appointments and Changes**: To formalize the DNP Project Team, the student obtains signatures from all team members on the *DNP Project Team Appointment or Change Request Form* (Form 1, below). The form is submitted to the DNP Program Coordinator for approval. If approved, the DNP Program Coordinator will forward to the Graduate Program Administrative Assistant to place in the student's file. If not approved, the DNP Program Coordinator will communicate rationale and recommendations to the student and DNP Project Faculty Mentor and the student will be expected to revise the proposal.

Changes in Faculty Mentor must be discussed with and approved by the DNP Program Coordinator. Changes in DNP Project Team membership must be approved by the Faculty Mentor. Change requests are to be made on the *DNP Project Team Appointment or Change Request Form* (Form 1 below). If approved, the DNP Program Coordinator will forward to the Graduate Program Administrative Assistant to place in the student's file. If not approved, the DNP Program Coordinator will communicate rationale and recommendations to the student and the Faculty Mentor.

#### 3. DNP Project Proposal Process

#### **Developing the DNP Project Proposal**

During NURS874 DNP Project II: Planning and Development, the student will develop and present the DNP Project Proposal. Students will receive guidance from course faculty with regard to the development of the proposal, including both the written project brief and the oral presentation. Students are encouraged to align their proposal with the Standards for Quality Improvement Reporting Excellence (SQUIRE) Guidelines (see <a href="http://squire-statement.org/">http://squire-statement.org/</a>). Students should also reference the DNP Project final evaluation guideline to be used by the DNP Project Team during the proposal and final presentation sessions. These are the DNP Project Proposal Evaluation Framework and the DNP Project Final Evaluation Framework (Forms 2 and 4).

A suggested organization of the DNP Project proposal is provided below. Students should consult with DNP Project II course faculty for possible variations to this format which may be appropriate to their project. All pages should be numbered consecutively with Arabic numbers in the upper right corner beginning with the Title Page. The most recent edition of the APA Style Manual should be consulted for greater specificity. The sequence of content is:

## PROPOSAL: (30 page limit, double spaced)

- Title Page with copyright (p. 1)
- Abstract (p. 2) (Maximum of 350 words)
- Table of Contents (p. 3)

#### Section I Introduction (5-10 pages)

- Introduce the Problem
- Develop the Background
- Present the Theoretical Framework
- State the Purpose and Rationale
- State the practice question addressed by the project

## Section II Review of the Literature (10-12 pages)

- Provide a systematic EBP literature review
- Summarize the findings

- Implications for Nursing
- Implications for present project and/or research
- State the rationale for the project question based on the literature review

### Section III Method (5-8 pages)

- Describe the Setting
- Describe the Participants and Sampling where relevant
- Describe Procedures, as appropriate Management of ethical implications, Data Collection, Apparatus/Materials, Statistical Analyses, Outcomes to be Measured, Data Analysis or Evaluation Strategies
- Describe the Planned Intervention

#### REFERENCES

**APPENDICES**: Measures, Human Subjects forms if required, Tables, Figures

#### **DNP Project Proposal Presentation**

Students will present their DNP Project Proposals during DNP Project II: Planning and Development course. The proposal will be presented after the DNP Project Team is assembled. It is expected that all DNP Project Team members will be in attendance (live or virtual). The student is responsible for distributing an electronic copy of the written DNP Project proposal to course faculty and to the DNP Project team members at least two weeks in advance of the scheduled presentation.

Typically, the student begins the session presentation with a 15-minute presentation of the proposed DNP Project. In the ensuing discussion, team members may question the student about any aspect of the project as well as relevant clinical and methodological considerations. The proposal presentation should be viewed as a working session in which differences of opinion can be resolved. Team members' suggestions serve to insure the project's feasibility, clinical relevance, and quality.

## **DNP Project Proposal Approval Process**

It is the student's responsibility to bring the *DNP Project Proposal Evaluation Framework* (Form 2, below) and the *DNP Project Proposal Approval Form* (Form 3, below) to the proposal presentation. The student gives these documents to the DNP Project Faculty Mentor at the beginning of the session.

After the presentation session, the student and the audience are asked to leave the room while the team critiques the presentation. The proposal defense will be evaluated by DNP Project Team members according to *DNP Project Proposal Evaluation Framework* (Form 4, below). The team identifies any changes or additional work to be done, and determines the outcome of the proposal presentation. The student is then invited back into the room and is informed of the result.

If no revisions or additions are needed, team members will sign the DNP Project Proposal Approval form. The Faculty Mentor then submits the DNP Project Proposal Approval form to the SON DNP Coordinator who signs and routes the form for appropriate signatures.

If the revisions or additions are minor, team members will sign the DNP Project Proposal Approval form. The Faculty Mentor, however, will not sign, date, or submit the form until the student satisfactorily completes and submits all revisions. The team discusses with the student any changes or additional work to be done and establishes a deadline by which such changes or additions are to be submitted. Once revisions are completed, the Faculty Mentor submits the DNP Project Proposal Approval form to the SON DNP Coordinator who signs and routes the form for appropriate signatures.

If major revisions or additions to the project proposal are required, dates will be established for submission of a

revised proposal and for the presentation. Neither the Faculty Mentor nor the members will sign and date the DNP Project Proposal Approval form unless and until these major changes or additions have been presented and the entire DNP Project Proposal is found satisfactory.

It is important to note that whenever revisions are recommended and depending on the degree of revision, it may be necessary for the student to take an incomplete in DNP Project II.

In the event that 1) the team judges the DNP Project to be so unsatisfactory in execution that making it acceptable would virtually require starting over, or 2) the student does not submit and defend the required revisions or additions by the agreed-upon date, or 3) the team judges the submitted revisions or additions to be unsatisfactory, the team may report that the student has not passed the DNP Project written and oral presentation and may recommend dismissal from the program, or fail DNP II with an option to retake it. In such a situation, the team should submit a written report detailing the rationale for the recommendation to the DNP Program Coordinator.

#### 4. Implementation of the DNP Project

#### **Conducting the DNP Project**

After the project proposal has been approved by the DNP Project Team, the process of implementing the project may begin in the next course, DNP Project III: Implementation. In many cases the project involves the use of primary or secondary data about human subjects, therefore both administrative approval and Institutional Review Board (IRB) approval must be obtained before data collection begins. Procedures and time delay in obtaining administrative and research review clearance vary with the type of project.

**Administrative Approval:** The student must secure a letter from the appropriate official in the clinical agency, which states that the project described may be conducted there. Students should determine if the clinical agency requires human subjects review, if applicable.

Institutional Review Board Approval: Before beginning data collection (or analysis of pre-existing data), the student must assure the protection of human rights by having the proposal reviewed and approved by the UD IRB. The DNP Project Faculty Mentor is jointly responsible with the student for the accuracy of the information provided to the UD IRB and must co-sign the IRB forms with the student. The UD IRB meeting schedule is posted on the UD Research web site. Students are required to close all studies with the IRB prior to graduation.

#### **DNP Project as Part of Funded Grants**

DNP students who elect to develop a project with principal investigators who have funded grants must secure permission for copyrighting of their final project, if necessary, from their DNP Project Faculty Mentor and/or the principal investigator with whom they are conducting the project. It is advisable to reach an understanding at the outset about authorship and credit for any publications that may result from the project. Manuscripts submitted that represent student-led projects should have the student listed as first author.

#### 5. Final DNP Products

Completion of the DNP Project is accompanied by several final products that are required for DNP Project IV: Evaluation and Dissemination. The final products related to the project required of all DNP students include the DNP Project Brief or Poster, the Final DNP Project Presentation, and the DNP Project Manuscript. In addition, the DNP Project Portfolio will be required to showcase achievement of all program outcomes and competencies. The DNP degree is awarded after successful completion of all final products.

#### **DNP Project Brief or Poster**

The purpose of the DNP Project Brief or Poster is to provide the project clinical agency with a synopsis of the project in order to encourage sustainability. Students will determine which format is most appropriate for the specific agency. The project brief is a densely written (5 page limit) scholarly description of the overview of the evidence supporting the project implementation, as well as the DNP project scope, methods, results, and

implications. Alternatively, students may develop a poster for presentation to the agency stakeholders. The poster provides the same information as the project brief. The purpose of the project brief or poster is to provide a concise report that will be made available to stakeholders at the agency in which the project was implemented.

When the DNP Project Faculty Mentor decides that the final draft project brief/poster is ready for distribution to the team, the student has the responsibility to distribute an electronic and/or hard copy to the DNP Project team members based on their preferences. Team members will have three weeks from the distribution date to thoroughly critique the project brief/poster and provide to both the student and the DNP Project Faculty Mentor, written feedback either electronically or written hard copy. If written hard copy feedback is provided, the team member is responsible for ensuring its legibility and for arranging delivery and/or pick up. Team members have the responsibility to read the project brief/poster in the allotted time.

A suggested organization of the project brief/poster is provided below. Students should consult with their team for possible variations to this format that may be appropriate to their project. The most recent edition of the APA Style Manual should be consulted for greater specificity. The sequence of content is:

**DNP Project Brief/Poster** 

Title Page (for brief)
Executive Summary/Abstract
Practice Question
Significance of the Problem
Summary of the Evidence
Project Implementation Strate

Project Implementation Strategies (with analysis of the process)

**Barriers Encountered and Solutions** 

Findings with Analysis

**Implications** 

Appendix for Budget Justification (no more than one page; if doing a poster, this is submitted separately) References (not part of the five page limit)

After successful completion of all DNP requirements, the student will submit a final copy of the project brief or poster to the SON for permanent inclusion into the electronic SON DNP Project Repository.

#### **DNP Project Final Presentation**

**Scheduling the DNP Project Presentation**: Students will prepare a PowerPoint for presentation to course faculty and members of the DNP team. The project presentations sessions with be open to all SON students and faculty, as well as the UD community-at-large. After incorporating revisions offered by Team members into the project brief or poster, the Project Faculty Mentor determines that it is ready for presentation. Presentations will take place on scheduled days at the end of the semester, arranged by the DNP Project IV course faculty. Students have the responsibility to inform project team members of the date of the presentation and to distribute an electronic copy of the revised project brief/poster to the DNP Project team members at least two weeks in advance of the scheduled presentation.

Students may present their project to the clinical agency after successfully completing the formal, on-campus DNP Project presentation. The decision to do so should be made in conjunction with the DNP Project Faculty Mentor and authorized clinical agency personnel.

**Format and Procedures for the DNP Project Presentation**: It is the student's responsibility to bring the DNP Project Final Evaluation Framework (Form 4, below) and DNP Project Final Approval form (Form 5) to the presentation. The student gives these documents to the Project Faculty Mentor at the beginning of the session.

The Project Faculty Mentor introduces the Team members, the doctoral student, and his/her proposal title. The student begins the session with a 20-minute presentation of the DNP Project. The following is a suggested organization of the presentation:

Practice Question

Significance of the Problem
Summary of the Evidence
Project Implementation Strategies (with analysis of the process)
Barriers Encountered and Solutions
Findings with Analysis
Implications

Team members will question the student about any aspect of the project itself and the relevant clinical and methodological considerations in a 10-minute session following the formal presentation. The team Faculty Mentor may invite members of the audience to ask questions or make comments, but is not required to do so.

After this public session, the student and the audience are asked to leave the room while the team critiques prepares a critique. The DNP Project Team members complete the DNP Project Final Evaluation Framework. The team identifies any revisions or additional work to be done, and determines the outcome of the entire DNP Project. The student is then invited back into the room and is informed of the result.

If no revisions are needed, team members will sign the DNP Project Final Approval form. The Faculty Mentor then submits the DNP Project Final Approval form to the SON DNP Coordinator who signs and routes the form for appropriate signatures.

If the revisions are minor, team members will discuss with the student any changes or additional work to be done and establish a deadline by which such revisions are to be submitted. Team members will sign the DNP Project Final Approval form. The Faculty Mentor, however, will not sign, date, or submit the form until the student satisfactorily completes and submits all revisions. Once revisions are completed, the Faculty Mentor submits the DNP Project Final Approval form to the SON DNP Coordinator who signs and routes the form for appropriate signatures.

It is important to note that whenever revisions are recommended and, depending on the degree of revision, it may be necessary for the student to take an incomplete in DNP Project IV.

If major revisions to the DNP Project are required, dates will be established for submission of a revise project brief and for a new presentation. Neither the Faculty Mentor nor the team members will sign and date the DNP Project Final Approval form unless, and until, these major revisions or additions have been presented and the entire DNP Project is found satisfactory.

In the event that 1) the team judges the DNP Project to be so unsatisfactory in execution that making it acceptable would virtually require starting over, or 2) the student does not submit and defend the required changes or additions by the agreed-upon date, or 3) the team judges the submitted changes or additions to be unsatisfactory, the team may report that the student has not passed the DNP Project and oral defense and may recommend, on a Report of Final Examination, that the degree not be awarded. In such a situation, the team should submit a written report detailing the rationale for the recommendation to the DNP Program Coordinator. The student may be given an incomplete at the discretion of the course instructor.

## **DNP Project Manuscript**

A manuscript of publishable quality is an expected final product of the DNP Project and is required of all students in DNP Project IV: Evaluation and Dissemination. While students may be not be required to submit the manuscript, (this is at the discretion of the faculty member teaching the course), they may choose to do so after consulting with their DNP Project Faculty Mentor. Students are required to identify and provide the name of a suitable journal (based on journal scope and readership) and to provide a copy of the author guidelines. Student will follow the author guidelines set forth by that journal. Detailed guidelines for manuscript development will be provided in Writing for Dissemination and DNP Project IV. Depending on the type and scope of the project, and the journal chosen, students are encouraged to align their manuscript with the Standards for Quality Improvement Reporting Excellence (SQUIRE) Guidelines (see <a href="http://squire-statement.org/">http://squire-statement.org/</a>). Members of the Project team may be co-authors of the manuscript, however, this arrangement is determined at the discretion of the student. Students should be listed as first author.

#### **DNP Portfolio**

Another final product of the program is the Portfolio which is also required for DNP Project IV. Students are required to maintain a DNP Portfolio for the duration of the program. The Portfolio will showcase the student's work and will demonstrate achievement of all program outcomes and competencies, including work related to individual courses, as well as project-related work. Instructions for developing and maintaining the portfolio will be provided at the beginning of the program.

## Form 1

## **DNP Project Team Appointment or Change**

Check one:	
DNP Project Team Appointment	
DNP Project Team Change (Please s	pecify changes and rationale:
	<del></del>
Student's Name	
Student's Signature	
Date Submitted	
	be appointed to my DNP Project Team DNP Project Team:
Name of Faculty Mentor (required)	Signature, Faculty Mentor
Faculty Team Member (required)	Signature, Faculty Team Member
Agency Team Member (required)	Signature, Agency Team Member
DNP Program Coordinator	Signature, DNP Program Coordinator
SON Graduate Program Director	Signature, SON Graduate Program Director

## Form 2

Student's Name\_

## **DNP Project Proposal Evaluation Framework**

Title of DNP Project:			
,			<del></del>
	Satisfactory	Satisfactory with Following Recommendations	Unsatisfactory
	Proble	em	•
Background information/literature supports problem			
Problem/change clearly identified			
Scope of project realistic and appropriate			
Other:			
	Analyses/Fra	amework	
Need, feasibility and significance are clearly presented			
Literature, benchmarks and supporting data provided and appropriate			
Framework (theoretical/conceptual/practice) is evident and appropriate			
Other:			1
	Project Obj	jectives	
Objectives stated in feasible and measurable terms			
Evaluation measures linked to objectives			
Other:	1		
	Action Plan	/Method	
Appropriate for objectives			
Clear rationale for actions/method			
Setting and group clearly described			
Tools/measures described			
Resources/supports and risks/threats and benefits noted			
Analysis/Evaluation plan delineated			
Timeframe is feasible			

**Approvals** 

Date: \_\_\_\_\_

Informed Consent, if necessary, meets human subject requirements							
All approvals are in place, including: (List approvals)							
Wr	iting and Organization						
APA format followed appropriately; clear writing							
Proposal submitted to Turn-It-In; originality report attached							
Overall evaluation (circle one):							
1. Accept the proposal.	signatures on the DNP Project Proposal Approval oject Team.						
Form, but not file until revisions are controlled project proposal to DNP Project Faculty	signatures on the DNP Project Proposal Approval ompleted. The student will submit a final/revised Mentor within one month of the proposal defense review the new proposal and all prior steps will be						
<ol> <li>Require major revisions and re-review.         The student must develop a significantly revised proposal. The DNP Project Faculty Mentor will work with the student on the revision. The DNP Project Team will review the new proposal and all prior steps will be repeated.     </li> <li>Reject the proposal.         The student must develop a significantly revised or new proposal. The DNP Project Faculty Mentor will work with the candidate on the revision. The DNP Project Team will review the     </li> </ol>							
new proposal and all prior steps will be re							
DNP Project Faculty Mentor Signature:							
DNP Project Team Member's Signature (Facu	ulty):						
DNP Project Team Member's Signature (Age	ncy):						
DNP Student's Signature:							

## Form 3

## **DNP Project Proposal Approval Form**

## Formal approval is hereby given to this submitted DNP Project proposal:

Student's Name	Student's Signature
<u></u>	_
Date	
Title of DNI	P Project Proposal
Title of Divi	r rioject rioposai
Name of Faculty Mentor (required)	Signature, Faculty Mentor
Faculty Member (required)	Signature, Faculty Member
A second March or (required)	Circotura Assas Marshar
Agency Member (required)	Signature, Agency Member
DNP Program Coordinator	Signature, DNP Program Coordinator
· ·	
SON Graduate Program Director	Signature, SON Graduate Program Director

NOTE: Student is required to bring this sheet to the DNP proposal presentation and give to DNP Project Faculty Mentor at the beginning of the session.

## Form 4

## **DNP Project Final Evaluation Framework**

Student's Name:			
Title of DNP Proje	ct:		

1 = Very poorly; 2 = Poor	rly; 3 =	= Good	l; 4	! = Vei	y Good;	5 = Excellent
I. Components						
The candidate addresses each component:	1 (Fail)	2	3	4	5	Comments
Bac	ckground	and Si	gnifica	nce		
Background information/literature demonstrates the focused need or problem.						
Literature review supports significance / relevance of problem / proposed project / intervention.						
Need, feasibility and significance are clearly presented.						
Proble	em Statem	ent or	Purpo	se		
Problem/ purpose clearly described.						
Scope of project realistic and appropriate.						
	Theoretica	al Fran	nework	(		
Framework (theoretical/conceptual/practice) is described/evident and applicable.						
	Project	Descri	ption		<u> </u>	
Literature, benchmarks and supporting data provided and organized into integrated synthesized summary						
Objectives stated in feasible and measurable terms.						
Congruence of organizations' strategic plan to project is described.						
	Projec	ct Desi	gn			
Appropriate for objectives.						
Clear rationale for actions/method.						
Setting and group clearly described.						
Implementation methods/tools/measures						

clearly described.										
Resources/supports and risks/threats and										
benefits noted.										
Time frame outlined.										
	Evalua	ation P	lan							
Analysis/Evaluation plan coherent / consistent with project plan.										
Evaluation measures linked to objectives.										
Outcomes / evidence-based measures appropriate for objectives.										
Tools / instruments described and linked to measures and objectives.										
Method of analysis clearly described for each measurement.										
	Fir	ndings	•	•	•					
Findings organized in appropriate format.										
Findings linked to problem statement, purpose objectives and evaluation plan.										
Described the extent to which the objectives were achieved.										
Addressed key facilitators and barriers that impacted the project's objectives.										
Described unintended consequences (both positive and negative).										
Recom	mendatio	ns/lm	plication	ons	•					
Recommendations/Implications addressed for problem statement, supporting organization, key stakeholders, other settings, and student.										
Included recommendations related to identified facilitators / barriers and unintended consequences.										
Addressed any ongoing activities or evaluations outside the scope of the DNP Project.										
Writing and Organization										
APA format followed appropriately; writing is scholarly and clear; appropriate for doctoral level education.	-									
II. Project Synthesis										
Extent to which candidate met goals/aims of project. If not, appropriate										

Date: \_\_\_\_\_

		1	ı	1	ı	Т				
rationale and explanation provided.										
Extent to which candidate integrated										
scientific curiosity and inquiry in project completion.										
completion.										
Extent to which candidate analyzed										
issues and provided critique of										
advanced nursing practice within the										
project.										
Extent to which candidate										
demonstrated practice inquiry skills										
including appraising and translating										
evidence.										
Evidence of candidate's ability to engage in										
collaborative partnership(s) in designing										
and implementing project.										
Ability of candidate to articulate state of										
current knowledge as it relates to advanced										
practice nursing in the health care system.										
Overall evaluation (circle one):										
Overall evaluation (circle one).										
a Annyoya the DND Dyeiget										
<ul> <li>a. Approve the DNP Project         The DNP Project Faculty Mentor will obt     </li> </ul>	tain ciana	turos o	n tha F	NID Dr	oioct E	inal Approval Form and file				
approval of the DNP Project on behalf of					OJECT I	inai Approvai i onn and me				
b. Conditionally approve the DNP Project		-								
DNP Project Faculty Mentor will obtain s					Final	Approval Form, but will not				
grant approval of the DNP Project on be										
student will submit a final revised project										
proposal defense meeting.										
c. Reject the DNP Project										
The student must develop a significantl										
Faculty Mentor will work with the car				. The [	NP Pr	oject Team will				
review the new proposal and all prior steps will be repeated.										
DNP Project Chairperson Signature:										
211 1 10jost ondirpordon dignaturo.										
DNP Project Team Member's Signature:										
Distriction womber a dignature.										
DNP Project Team Member's Signature:										
-,										
DNP student's Signature	DNP student's Signature:									
DNP student's Signature:										

## Form 5

## **DNP Project Final Approval Form**

## Formal approval is hereby given to this completed DNP Project:

Student's Name	Student's Signature
	· ·
Date	
Title of DNF	D. Drojoet
Title of Divi	Froject
N (5 1/ N / / / N	
Name of Faculty Mentor (required)	Signature, Faculty Mentor
Member (required)	Signature, Member
Member (required)	Signature, Member
DNP Program Coordinator	Signature, DNP Program Coordinator
ŭ	3 , 3
SON Graduate Program Director	Signature, SON Graduate Program Director
Member (required)  Member (required)  DNP Program Coordinator  SON Graduate Program Director	Signature, Member  Signature, Member  Signature, DNP Program Coordinator  Signature, SON Graduate Program Director

NOTE: Student is required to bring this sheet to the DNP Project final presentation and give to DNP Project Faculty Mentor at the beginning of the session.

	1. Integrate	2. Apply	3. Analyze	4. Contribute to the	6. Contribute		5.
DNP Program Outcomes	nursing science and practice to plan and develop new practice approaches that lead to improvement of health outcomes for diverse populations.	leadership skills to influence interprofessional teams that foster creative innovation in complex healthcare systems.	available evidence for translation of research into best practices to improve quality of care.	improvement of health care informatics systems to enhance the communication and utilization of health data of individuals and populations.	to health policy change on the local, national and global levels to improve efficiency and effectiveness of an integrated health care model.		Incorporate principles population health into clinical care through communite engagement and public health initiatives.
DNP Essentials	I. Scientific Underpinnings for Practice	II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking	III. Clinical Scholarship and Analytical Methods for Evidence-Based Practice	IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care	V. Health Care Policy for Advocacy in Health Care	VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes	VII. Clinica Prevention and Population Health for Improving the Nation Health
NP Comps	I. Scientific Foundation	II. Leadership III. Quality VII. Health Delivery Systems	IV. Practice Inquiry	V. Technology and Information Literacy	VI. Policy		
Clinical Prevention		Health Systems and Health Policy	Foundations of Population Health Evidence-Based Practice	Foundations of Population Health			Clinical Practice at Population Health
	Nursing Science for the Advanced Practice Role Advanced Clinical Neuroscience Advanced Patho Primary Care I	Leadership and Innovation for Population Health Policy and Finance for Healthcare Delivery Population Health I Population Health II DNP Project courses I-IV	Population Health I EBP I EBP II DNP Project courses I-IV Writing for Dissemination	Population Healthcare Informatics  DNP Project courses I-IV	Policy and Finance for Healthcare Delivery DNP Project courses I-IV	Integrated Healthcare Delivery I Integrated Healthcare Delivery II Nursing Science for Advanced Practice Role DNP Project courses	Population Health I Population Health II

November 1, 2015

Primary Care II:			I-IV	
Primary Care of Women				
Primary Care of Frail/Older Adults				
Primary Care of Children				
Integrated Care				

Summary Crosswalk: DNP Program Outcomes, DNP Essentials, NP Core Competencies, Clinical Prevention and Population Health Curriculum Components