**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 non- native 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~~ summer 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/Individual Across the Lifespan Nurse Practitioner, 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/Individual Across the Lifespan Nurse Practitioner ~~78~~ 81credit hours and 1120 clinical hours (direct care: 784 /indirect: 336)

### Adult-Gerontology Nurse Practitioner (AGNP): ~~78~~ 81credit hours and 1120 clinical hours (direct care: 784 /indirect: 336)

### Psychiatric-Mental Health Nurse Practitioner (PMHNP): ~~78~~ 84 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****OLD** | **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\*\*\* ORNURS921 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** |

\* Post-master’s students are required to take only DNP Core Courses

\*\*1+2 indicates 1 credit of didactic hours and 2 credits of clinical hours

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

Family/Individual Across the Lifespan Nurse Practitioner, Adult Gerontology and Psychiatric Mental Health **Core Courses**

|  |  |  |  |
| --- | --- | --- | --- |
| **Courses** | **Credits****OLD** | **Credits****NEW** | **Clinical Hours** |
| STAT 608 or equivalent | 0 | 3 |  |
| 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** | 16 |  |

\*Family/Individual Across the Lifespan Nurse Practitioner Core Courses are taken by students in all concentrations.

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

**Population-Focus:** Family/Individual Across the Lifespan 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 |  |  |
| NURS696 Primary Care NP Practicum III | 3 |  | 168 |
| Family/Individual Across the Lifespan Nurse Practitioner **Total** | **24** |  | **616** |
| **NP Core Courses Total** | **13** | **16** |  |
| **DNP Core Courses Total** | **41** |  | **504** |
| **TOTAL** | **78** | **81** | **1120** |

\*Post-baccalaureate students also take DNP Core Courses

\*\*NURS921 is substituted for NURS920

**Population-Focus: Adult- Gerontology Nurse Practitioner\***

|  |  |  |  |
| --- | --- | --- | --- |
| **Courses** | **Credits****OLD** | **Credits****NEW** | **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** | **16** |  |
| **DNP Core Courses Total** | **41** |  | **504** |
| **GRAND TOTAL** | **78** | **81** | **1120** |

\*Post-baccalaureate students also take DNP Core Courses

\*\*NURS921 is substituted for NURS920

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

| **Courses** | **Credits****OLD** | **Credits** **NEW** | **Clinical Hours** |
| --- | --- | --- | --- |
| NURS668 Advanced Clinical Neuroscience | 3 |  |  |
| NURS669 Advanced Psychopharmacology | 3 |  |  |
| NURS671 Psychiatric/Mental Health NP I | 3 |  |  |
| NURS672 Psychiatric/Mental Health NP Practicum I | 3 |  | 168 |
| NURS673 Psychiatric/Mental Health NP II | 3 |  |  |
| NURS674 Psychiatric/Mental Health NP Practicum II | 3 |  | 168 |
| NURS675 Psychiatric/Mental Health NP III | 3 |  |  |
| NURS676 Psychiatric/Mental Health NP Practicum III | 3 |  | 168 |
| **Psych NP Total** | **24** |  | **504** |
| **NP Core Courses Total** | **13** | **16** |  |
| **DNP Core Courses Total** | **41** |  | **504** |
| **GRAND TOTAL** | **78** | **81** | **1008** |

\*Post-baccalaureate students also take DNP Core Courses\*

\*\*NURS921 is substituted for NURS920

**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:

### 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** |

\*1+2 indicates 1 credit of didactic hours and 2 credits of clinical hours

\*\*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.

### 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

### 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 co-requisites 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.

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### *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 inAppendix 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 <http://www.udel.edu/stuguide/15-16/grievance.html>) 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 ([www.udel.edu/udsis](http://www.udel.edu/udsis)). 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)](http://www.udel.edu/gradoffice/forms/profdevaward.pdf%29) 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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