Doctor of Nursing Practice (DNP) Talking Points

In October 2004, the members of the American Association of Colleges of Nursing (AACN) endorsed the Position Statement on the Practice Doctorate in Nursing which called for moving the level of preparation necessary for advanced nursing practice roles from the master's degree to the doctorate level by the year 2015. The AACN position statement calls for educating advanced practice registered nurses (APRNs) and other nurses seeking top clinical positions in Doctor of Nursing Practice (DNP) programs. The following talking points were developed to help explain this evolutionary step forward for nursing education.

Re-envisioning Graduate Nursing Education

- The changing demands of the nation's complex healthcare environment require that nurses serving in specialty positions have the highest level of scientific knowledge and practice expertise possible. Research from Drs. Linda Aiken, Mary Blegen, Carole Estabrooks, Christopher Friese, and others have established a clear link between higher levels of nursing education and better patient outcomes.
- Some of the many factors which are accelerating momentum for change in nursing education at the graduate level include: the rapid expansion of knowledge underlying practice; increased complexity of patient care; national concerns about the quality of care and patient safety; shortages of nursing personnel which demands a higher level of preparation for leaders who can design and assess care; shortages of doctorally prepared nursing faculty, and increasing educational expectations for the preparation of other health professionals.
- The Institute of Medicine, Joint Commission, and other authorities have called for reconceptualizing health professions education to meet the needs of the healthcare delivery system. Nursing is answering that call by moving to prepare APRNs for evolving practice.
- In a 2005 report titled Advancing the Nation's Health Needs: NIH Research Training Programs, the National Academy of Sciences called for nursing to develop a non-research clinical doctorate to prepare expert practitioners who can also serve as clinical faculty. AACN's work to advance the DNP is consistent with this call to action.
- Nursing is moving in the direction of other health professions in the transition to the DNP. Medicine (MD), Dentistry (DDS), Pharmacy (PharmD), Psychology (PsyD), Physical Therapy (DPT) and Audiology (AudD) all offer practice doctorates.

Impact on Nursing Education and Practice

- Historically advanced practice nurses, including Nurse Practitioners, Clinical Nurse Specialists, Nurse-Midwives, and Nurse Anesthetists, were prepared in master's degree programs, some of which carry a credit load equivalent to doctoral degrees in the other health professions.
- DNP curricula build on current master's programs by providing education in evidence-based practice, quality improvement, leadership, policy advocacy, informatics, and systems thinking among other key areas.
Transitioning to the DNP will not alter the current scope of practice for APRNs. State Nurse Practice Acts describe the scope of practice allowed, and these differ from state to state. The transition to the DNP will better prepare APRNs for their current roles given the calls for new models of care delivery and the growing complexity of health care.

The DNP is designed for nurses seeking a terminal degree in nursing practice and offers an alternative to research-focused doctoral programs. DNP-prepared nurses will be well-equipped to fully implement the science developed by nurse researchers prepared in PhD, DNS and other research-focused nursing doctorates.

The title of Doctor is common to many disciplines and is not the domain of any one health profession. Many APRNs currently hold doctoral degrees and are addressed as doctors, which is similar to how clinical psychologists, dentists, podiatrists, and other experts are addressed. Like other providers, DNPs would be expected to display their credentials to insure that patients understand their preparation as a nursing provider.

Nursing and medicine are distinct health disciplines that prepare clinicians to assume different roles and meet different practice expectations. DNP programs will prepare nurses for the highest level of nursing practice.

DNP Transition in Progress

- With 243 DNP programs now enrolling students nationwide, more than 70 additional practice doctorates are also under development at U.S. nursing schools.
- The movement to the DNP has raised many questions about the future of nursing education, certification, regulation and practice. AACN created two task forces, the DNP Essentials and the DNP Roadmap task forces, which defined the essential curricular elements of nursing practice doctorates and to addressed key operational and transition concerns. The results of these two task forces are posted on the Web at publications/position/DNPEssentials.pdf and dnp/roadmapreport.pdf.
- AACN also created the Implementation of the DNP Task Force in July 2013 to provide greater clarity regarding the DNP scholarly project and the clinical practice hours requirement outlined in the DNP Essentials. A white paper from this task force will be released in July 2015.
- The Commission on Collegiate Nursing Education (CCNE), the leading accrediting agency for baccalaureate and higher degree nursing programs in the U.S., has initiated a process for accrediting DNP programs. Currently, 158 DNP programs are CCNE accredited, and an additional 33 programs are seeking CCNE accreditation.
- In October 2013, the AACN Board of Directors commissioned the RAND Corporation to conduct a national study to assess the facilitators and barriers for schools transitioning their master’s level APRN programs to the DNP. The final report is due in July 2014.

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