Appendix G: Proforma-Dedicated Education Unit (DEU)

Example based on the proposed partnership between Renown Health and Orvis School of Nursing, University of Nevada, Reno, to illustrate financial structure and assumptions.

Assumptions

- DEU is a 23-hour short stay, 35-bed unit
- Projected at 80% of bed capacity
- Nurse to Patient Ratio= 1:4
- 40hrs/week, 45 weeks/year

Expenses

Category	Description	Annual Cost (\$)
Clinical Nurse Educators (4)	Median salary \$90,000°; jointly funded (SSU 24 hrs, Hospital 16 hrs). Includes fringe (31.6%), 10% teaching differential, tuition support for MSN/DNP.	284,256
Clinical Coordinator (SSU)	Median salary \$120,000 ^b ; fully funded by SSU. Included in faculty role (teaching load).	SSU absorbs cost
Dr. F (SSU Faculty)	Median salary \$135,000°; service allocation (40% FTE). Supported by AGACNP billing revenue.	SSU absorbs cost
Prelicensure Students	8 students/shift; no direct cost.	0
AGACNP Students	Billable services; revenue flows back to SSU.	Net neutral
Total Direct Expense		284,256

^avariable based on experience, geographic location; ^bvariable based on experience, geographic location; ^cmedian salary selected to reflect various levels of NP experience and time of service at university.

Notes

- University & hospital jointly fund Clinical Instructors via a professional services agreement (e.g., protected documentation time, teaching differential, graduate tuition incentives)
- Joint-appointment highlights shared institutional commitment.
- DEU integrates AGACNP students, medical residents, respiratory therapists, prelicensure nursing students in interprofessional rounds.
- Billing revenue from advanced practice services sustains faculty buyouts and strengthens financial viability.
- Core SSU faculty roles (Clinical Coordinator, Dr. F) are absorbed into the academic budget and not direct DEU operating costs.
- Braided funding streams could lessen reliance on institutional funding support (e.g., grants, billable NP student services, philanthropy).