# Leadership in Learning for the 21st Century: A Quality Improvement Assessment of Structure and Process in Graduate Nursing Education

**Dr. Kathy Reavy**
**Allied Graduate Faculty; Idaho State University**
**Professor Emerita; Boise State University**

**Dr. Karen Neill**
**Professor of Nursing**
**Associate Dean for Academic Affairs and Director of Graduate Studies**

# Introduction and Purpose

The purposes for this presentation are to:

- ❖ shine a reflective spotlight on the structural imbalance of graduate nursing education in the 21st century,
- ❖ evaluate and discuss why we need balance,
- ❖ discuss the relationship of structure and process in graduate nursing education.

# Short History of Doctoral Education

## Doctor of Nursing Practice

**\*\*\*\*\*\*\*\*\***

**DNSc -  Boston University (1975)**

**DSN - U of Alabama (1976)**

**DN - Case Western Reserve + 3 more (1979-2001)**

**DNP - U of Kentucky + all states (2001-current)**
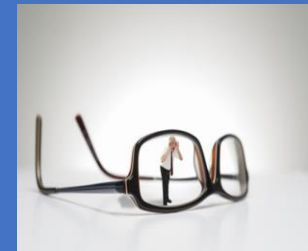
## Doctor of Philosophy

**PhD in Nursing—Yale University (1936)**
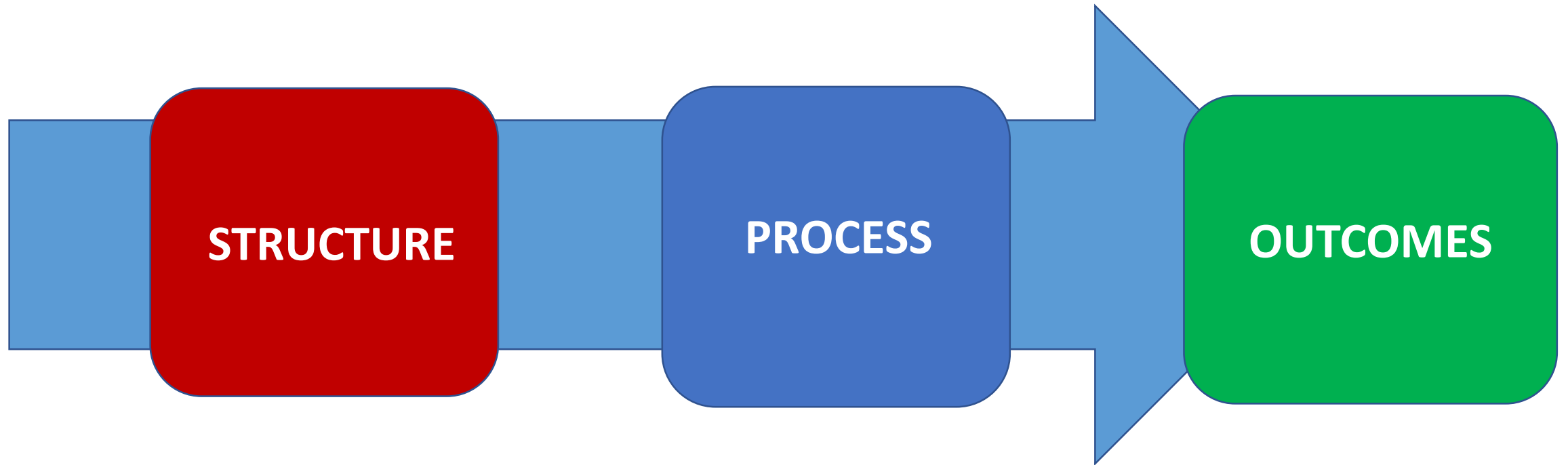
# Where are we today?

**DNP: AACN (2017) expected another double-digit percentage increase in student enrollment (14th year in a row).**

**PhD: AACN (2017) reported decreased enrollment for 3rd straight year.**

# What is the significance of this current trend and why does it matter?

**Conceptual Framework:**
**Adaptation of the Donabedian Model (1966 & 1990)**

STRUCTURE

PROCESS

OUTCOMES

Concepts: *Equity; Efficiency; Effectiveness; Efficacy*

# METHODS

## Sample
- Current web search for one public university from each state
- The identified university must have both a PhD and DNP in nursing

## Limitations
- Schools with multiple specialties that reflected small credit differences were averaged per school or college to reflect just one number for each university degree per state.
- Some web sites were not user-friendly or did not publish pertinent information.

# Demographics:

- 50 schools or colleges of nursing
- Range of full time student enrollment in the university for years 2016-17 or 2017-18.  Range was from 2,823 to 52, 367.  Lower enrollment numbers reflect a health sciences or medical university (Arkansas; Mississippi, OHSU)
- 4 states have <u>no</u> active PhD in nursing at this time:  New Hampshire, Vermont, Maine, Montana
- Alaska has no PhD in nursing but shares a PhD in Clinical Community Psychology
- Wyoming has no PhD in nursing but shares an interdisciplinary PhD in Biomedical Sciences

- 6 state nursing schools with an inactive PhD in nursing offer only a p-BSN to DNP
- 5 state nursing schools with an active PhD offer NP content in a masters degree and a p-MSN to DNP
- All other nursing schools offer a p-BSN to DNP, p-MSN to DNP, MSN, p-BSN to PhD, and p-MSN to PhD.
- This is a total of 5 doors to enter a graduate nursing program. One school advertised a second degree student BSN to DNP.
- Many nursing schools offer p-graduate specialties that are accredited by CCNE. CCNE offers certifications for the p-graduate NP specialties. NLN offers certification for the nurse educator. Accreditation is possible because courses are part of NP or nursing education tracks.

Mean number of Total Credits
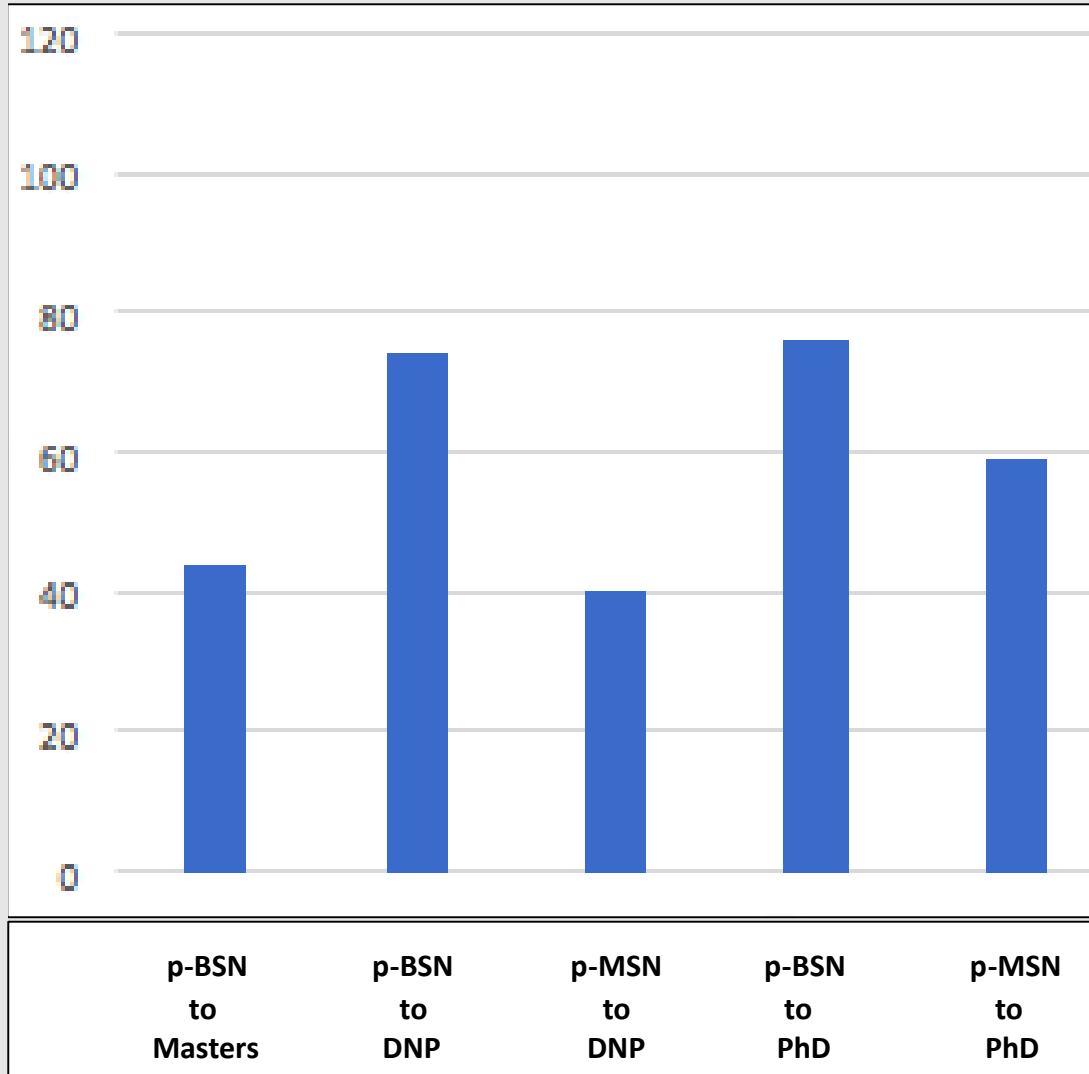
**P-BSN to MSN**
Count: 46
Mean: 43.54
SD: 8.65
Range: 30-67

**p-BSN to DNP**
Count : 38
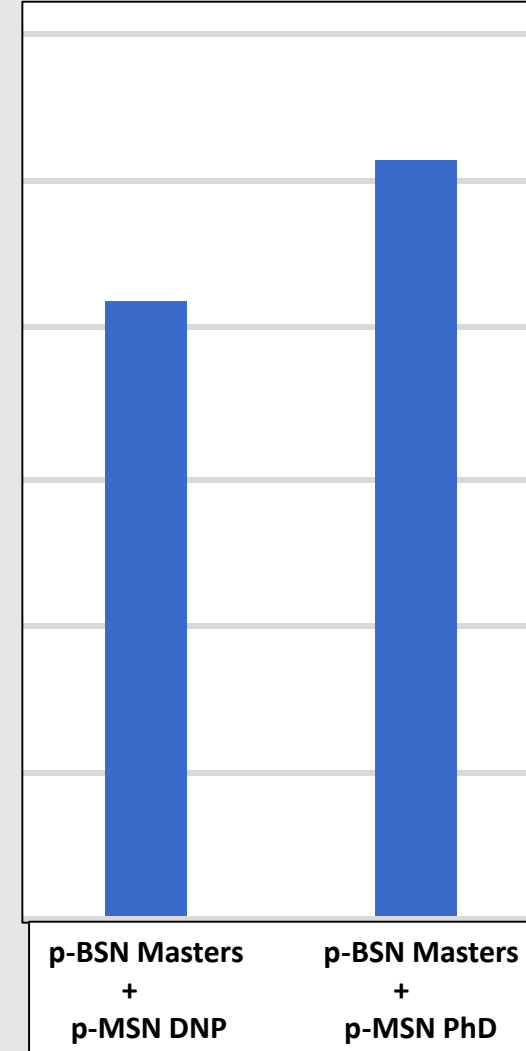Mean: 74.15
SD: 11.25
Range: 43-95

**p-MSN to DNP**
Count: 44
Mean: 40.15
SD: 9.97
Range: 26-77

**p-BSN to PhD**
Count: 31
Mean: 76.12
SD: 11.50
Range: 52-92

**p-MSN to PhD**
Count: 40
Mean: 58.6
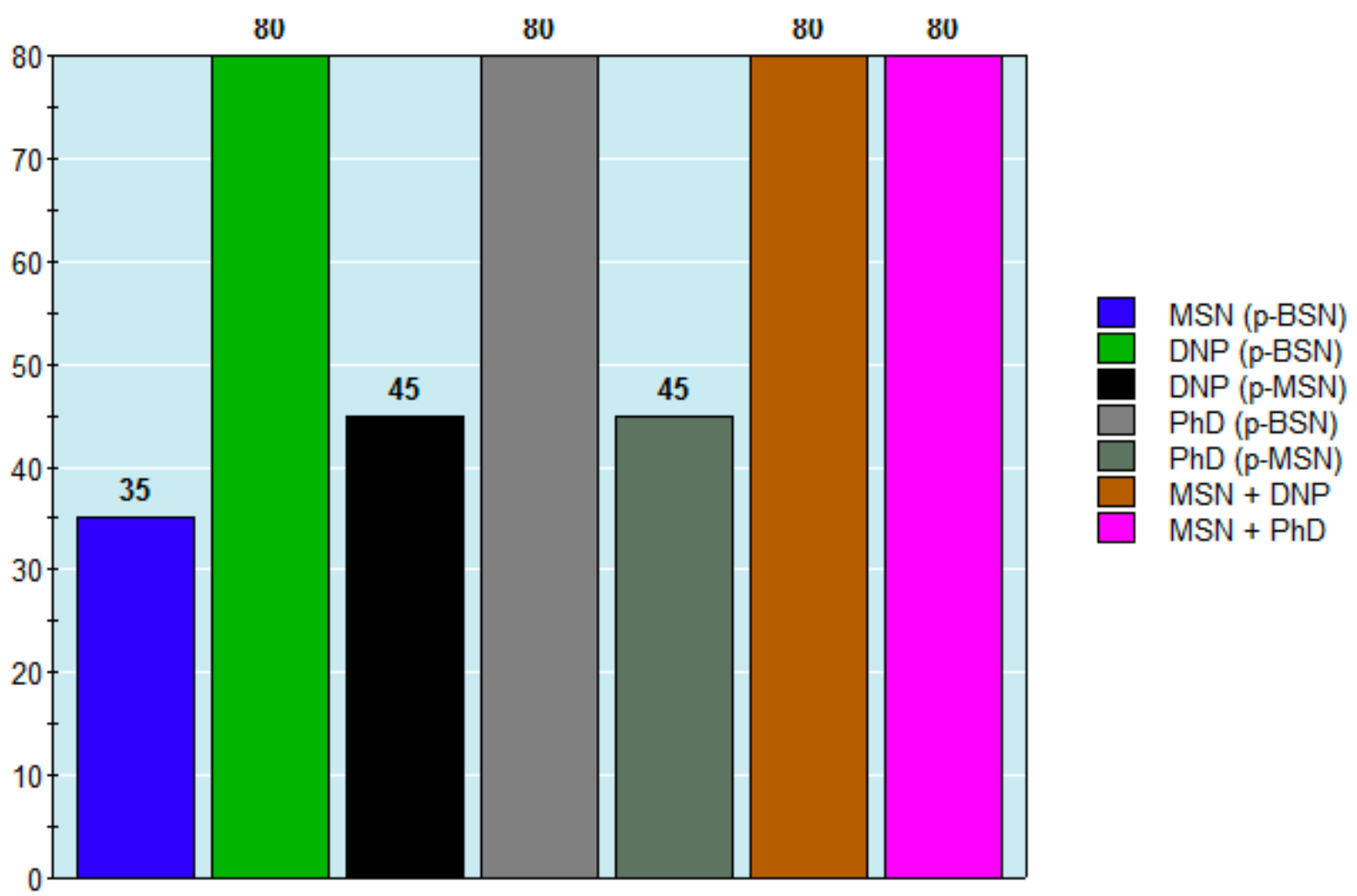SD: 1.61
Range: 35-79

Is our
graduate nursing
structure sliding
D
O
W
N
a hill?

# Balanced Credit Load



Legend:
- MSN (p-BSN)
- DNP (p-BSN)
- DNP (p-MSN)
- PhD (p-BSN)
- PhD (p-MSN)
- MSN + DNP
- MSN + PhD

Values: 35, 80, 45, 80, 45, 80, 80

# REMINDER:  Purpose

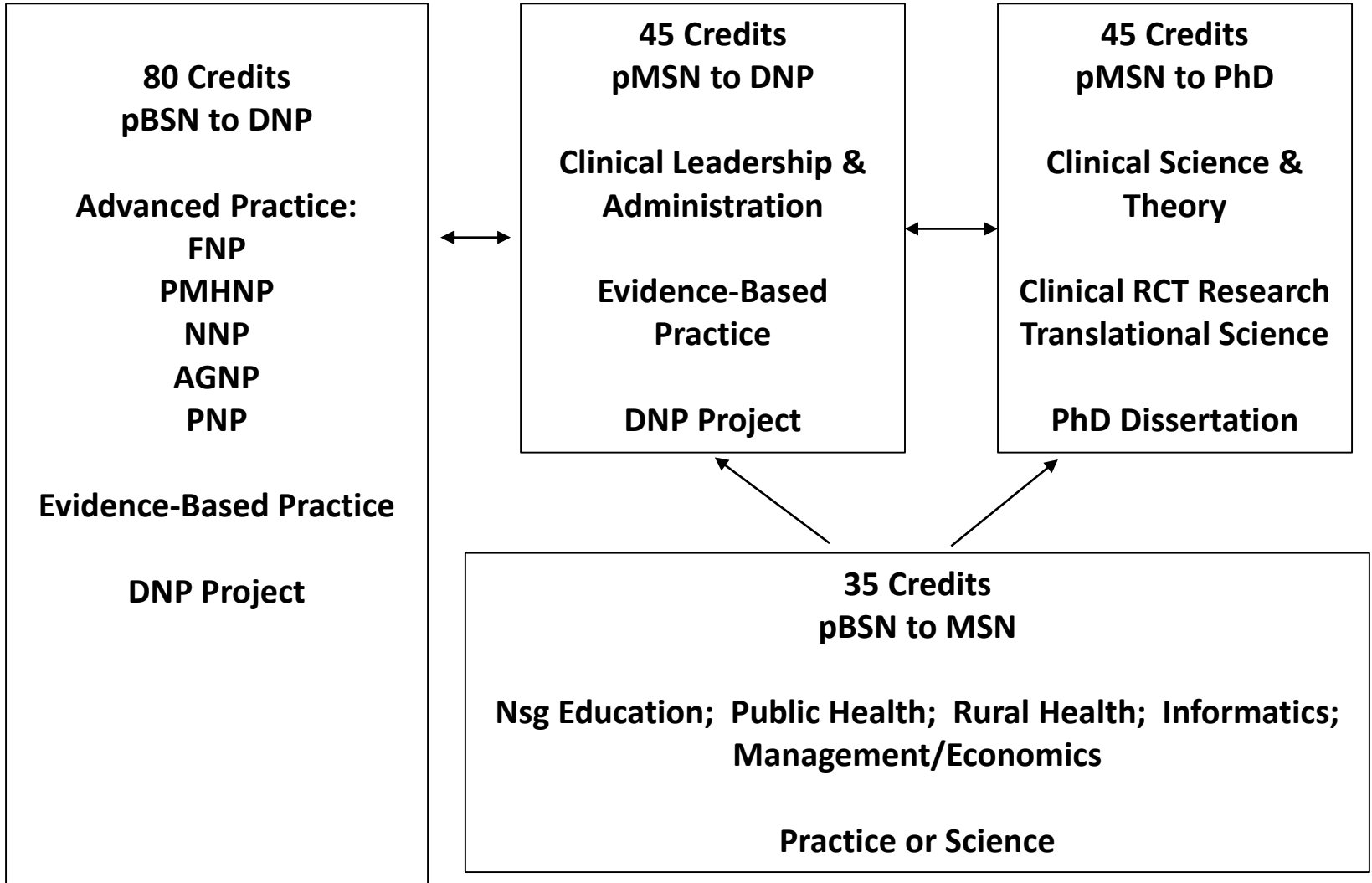| DNP | MASTERS | PhD |
|---|---|---|
| **Purpose:**  Prepare nurse leaders at the highest level of nursing practice to improve patient outcomes and translate research into practice (AACN, 2006). | **Purpose:**  Build on the baccalaureate degree by developing expertise in one area (AACN, 2008). | **Purpose:**  Add to the bod of nursing knowledge by esigning, conducting, directing, and disseminating research in nursing and health (AACN, 2010). |

**Post-Graduate Certifications**

**80 Credits
pBSN to DNP**

**Advanced Practice:
FNP
PMHNP
NNP
AGNP
PNP**

**Evidence-Based Practice**

**DNP Project**

**45 Credits
pMSN to DNP**

**Clinical Leadership &
Administration**

**Evidence-Based
Practice**

**DNP Project**

**45 Credits
pMSN to PhD**

**Clinical Science &
Theory**

**Clinical RCT Research
Translational Science**

**PhD Dissertation**

**35 Credits
pBSN to MSN**

**Nsg Education;  Public Health;  Rural Health;  Informatics;
Management/Economics**

**Practice or Science**

**Outcome Goals**

- **Student satisfaction
  (structure & process)**
- **Credit balance and
  organization (structure)**
- **Rigor and quality
  (process)**
- **Equity of student cost
  and time (structure)**
- **Communication and
  collaboration (process)**
- **Best use of intra- and
  inter-disciplinary
  courses (structure)**
- **Best use of faculty
  expertise (structure and
  process)**

**Efficiency & Effectiveness**

**Questions?**

Thank you!

*References available on request*

**Dr. Kathy Reavy**

reavkath@isu.edu