

Emerging Solutions: Academic-Practice Partnerships, Faculty Workload and Alignment of the DNP Project to Address the Needs of Health Systems

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Learning Outcomes

- Examine methods for identification of patient & system gaps
- Inclusion of system partners in identification of DNP topic areas/interests
- Evaluate the importance of feasibility / timeline identification of project champions to serve as clinical mentors for committee
- Advance the development of identified interest areas of academic-practice system partners as next tier projects

Objectives

- Discuss methods and techniques that faculty may employ in supporting students in their DNP final project while maintaining the primary focus on student learner outcomes
- Describe well-designed, meaningful DNP projects guided by strong academic-practice partnerships through collaboration in order for the healthcare system to benefit
- Analyze issues in nursing and healthcare on multiple levels through the scholarship of practice
- Discuss clinical scholarship as a mechanism to generate evidence on the safety, quality, cost and impact of DNP project outcomes on individuals and organizations
- Identify how DNP-prepared graduates can contribute to their organizations as they work to improve systems of care

AACN DNP Program Directors Meeting (Jan 2019)

- Each table of directors was asked to identify the top 5 areas of greatest opportunity for their respective programs
- These themes emerged – and will be discussed throughout this presentation
 1. Workload Distribution
 2. DNP Project Oversight/Expectations
 3. DNP Project Storage/Reporting
 4. Student Oversight/Online Programs
 5. Recruitment of Faculty and Graduate Students
 6. Clinical Placement
 7. DNP Committee Make-up
 8. New DNP Faculty Development
- Workload distribution was #1 - but we need to discuss the many factors that go into the DNP project before we can get a handle on how to begin to look at workload allocations.....

Examples of Recent Literature

- Scholars are disseminating on various strategies to enhance curriculum and support faculty
 - Variations in project structures / Maintaining standards & rigor of DNP education
 - New White Paper on the Doctor of Nursing Practice: Current Issues and Clarifying Recommendations
Journal of Professional Nursing (J PROF NURS), Sep/Oct2015; 31(5): 378-378.
 - An academic-practice partnership to advance DNP education and practice.
Howard, PB & Williams, TE. J of Prof Nurs, 2017 33(2), 86-94.
 - An academic-practice partnership model to grow and sustain advanced practice nursing.
Williams, TE; Howard, PE. J Nurs Adm. 2017 Dec;47(12):629-635.
 - Optimizing impact through the Tiered Doctor of Nursing Practice Project Model
Melander, S; Howard, PB; Williams, TE; Tharp-Barrie, K; El-Mallakh, P; MacCallum, T; J Am Assoc Nurse Pract. 2019 Aug 22.
 - Advancing the Rigor of DNP Projects for Practice Excellence.
Root, L; Nuñez, DE.; Velasquez, D; Malloch, K; Porter-O'Grady, T; Nurse Leader (NURSE LEADER), Aug2018; 16(4): 261-265.
 - Doctor of Nursing Practice Program Capacity Building and Scalability: Improving the Capstone Experience.
Miley, H; Reinsch, C; Journal of Doctoral Nursing Practice 2016; 9(1): 69-72.
 - What Is It All About? Examining the Sustainability of the DNP Project.
Ketrone, CJ.; Journal of Doctoral Nursing Practice 2019; 12(1): 93-95.
 - Reports of three organizations' members about doctor of nursing practice project experiences and outcomes.
Minnick, AF; Kleinpell, R; Allison, TL; Nurs Outlook. 2019 Nov-Dec; 67(6):671-679
 - An examination of the rigor and value of final scholarly projects completed by DNP nursing students.
Roush, K; Tesoro, M; J Prof Nurs. 2018 Nov-Dec;34(6):437-443.
 - Using a logic model framework to standardize quality and rigor in the DNP project.
Sun, GH; Cherry, B; Nurse Educ. 2019 Jul/Aug;44(4):183-186
 - The DNP project: Quandaries for nursing scholars.
Dols, JD; Hernandez, C; Miles, H; Nurs Outlook. 2017 Jan/Feb;65(1):84-93.
 - Use of the Iowa Model of Research in Practice as a Curriculum Framework for Doctor of Nursing Practice Project Completion.
Lloyd, ST; D'Errico, E; Bristol, ST; Nurs Educ Perspect. 2016 Jan/Feb;37(1):51-53.
 - Academic and Institutional Review Board Collaboration to Ensure Ethical Conduct of Doctor of Nursing Practice Projects.
 - Foote, JM; Conley, V; Williams, JK; McCarthy, AM; Countryman, M; J Nurs Educ. 2015 Jul;54(7):372-377.

Examples of Recent Literature - continued

- Scholars are disseminating on various strategies to enhance curriculum and support faculty
 - Courses targeted at project development-(ex: Nur 909)
 - Accelerating improvement of a doctor of nursing practice project proposal course using quality improvement methods.
Durham, ML; Yingling, C; Hershberger, PE; J Nurs Educ. 2019 May 1;58(5):306-311.
 - A course-based approach to the Doctor of Nursing Practice Project: Supporting Student Growth from Concept to Completion.
Fitzgerald, C; Purath, J; Van Son, C; Duvall, D; Eddy L. Nurse Educ. 2017 Sep/Oct;42(5):259-262.
 - Faculty / advising support and development
 - Doctor of Nursing Practice Project Advisement: A Roadmap for Faculty and Student Success.
Milner, K; Zonsius, M; Alexander, C; Zellefrow, C; Journal of Nursing Education (J NURS EDUC), Dec2019; 58(12): 728-732.
 - Facilitating faculty knowledge of DNP quality improvement projects: Key elements to promote strong practice partnerships.
Durham ML, Cotler K, Corbridge SJ; J Am Assoc Nurse Pract. 2019 Nov;31(11):665-674.
 - Alignment of projects with clinical settings
 - Building an Academic-Practice Partnership to Support Doctor of Nursing Practice Projects.
Spoelstra SL, Kaiser J, Vanderkooi M.; J Nurs Educ. 2019 Sep 1;58(9):530-533.
 - An Enhanced Actualized DNP Model to Improve DNP Project Placements, Rigor, and Completion.
VancerKooi, ME; Conrad, DM; Spoelstra, SL; Nurs Educ Perspect. 2018 Sep/Oct;39(5):299-301.
 - PhD and DNP collaborative work
 - Mentoring students engaging in scholarly projects and dissertations in doctoral nursing programs
Anderson, KM, McLaughlin, MK, Crowell, NA, Fall-Dickson, JM, White, KA, Heitzler, ET, Kesten, KS, Yearwood, EL; Nurs Outlook. 2019 Nov-Dec, 67(6):776-788.
 - Research translation and the evolving PhD and DNP practice roles: A collaborative call for nurse practitioners.
Falkenberg-Olson, AC; J Am Assoc Nurse Pract. 2019 Aug;31(8):447-453.
 - A model of successful DNP and PhD collaboration
Cowan, L; Hartjes, T; Munro, S; J Am Assoc Nurse Pract. 2019 Feb;31(2):116-123.
 - Promoting DNP-PhD collaboration in doctoral education: Forming a DNP project team.
Carlson, EA; Staffileno, BA; Murphy, MP; J Prof Nurs. 2018 Nov-Dec;34(6):433-436
 - Advancing Scholarship through Translational Research: The Role of PhD and DNP Prepared Nurses
Trautman, D; Idzik, S; Hammersia, M; Rosseter, R. Online Journal of Issues in Nursing. 10913734, 2018 May; 23(2)

DNP Final Project: Current Approaches & Issues

- The framework for the DNP final project is based on the AACN's Essentials for Doctoral Education for Advanced Nursing Practice embedded in the curriculum of DNP programs.
- The final project is intended to provide the student with the opportunity to synthesize curricular content and demonstrate knowledge and competency in applying DNP Essentials in the process of addressing a gap in the provision or quality of healthcare.
- A DNP final project establishes the foundation for further scholarship efforts to assess patient and/or system outcomes and the impact on patient outcomes and the healthcare organization.

American Association of Colleges of Nursing (2006). The essentials of doctoral education for advanced nursing practice. Retrieved from <https://www.aacnursing.org/Portals/42/DNP/DNPEssentials.pdf?ver=2017-07-28-124712-853>

DNP Final Project: Current Approaches & Issues (cont.)

- Students come into the program with a preconceived idea/thought of a patient or system issue to address.
- Student collaborates with a healthcare system and their faculty when designing and implementing a project that addresses the need for practice improvement.
- Rigorous clinical scholarship in the form of outcome studies is crucial to generate evidence on the safety, quality, cost, access and overall impact of DNP practice for individuals and organizations.
- Rigorous outcome studies can illustrate the return on investment that DNP-prepared APNs contribute to their organizations as they work to improve systems of care.

Magyary, D., Whitney, J. D., & Brown, M. A. (2006). Advancing practice inquiry: Research foundations of the practice doctorate in nursing. *Nursing Outlook*, 54, 139-151.
Sebastian, J. G., Trautman, D. E., & Cary, A., H. (2018). Moving ahead with the transition to the doctor of nursing practice. *Nursing Outlook*, 66, 105-107.

DNP Project Variability in Expectations

Discussed in the DNP Program Director Meeting January 2019

- Variability consists in how the DNP committee is established
- Variability exists around appropriate differentiation of BSN-DNP; MSN-DNP and Post-MSN-DNP level projects
- Discussions around DNP group projects and group advising
- Possible streamlining of IRB processes for DNP projects that are QI
- Some schools have rubrics for the DNP project; the DNP presentation/defense
- Curriculum variability with DNP project (incorporating pieces in specific courses such as IRB process; Proposal Development Course added to prepare students for IRB submission / timely graduation)
- Some schools require no DNP project

Variability in Expectations (cont.)

- Variability in expectations is reflected in potential products
 - Evidence-based quality improvement projects
 - Translation of evidence into practice, program evaluation
 - Generation of new evidence and protocol/policy/guideline development, feasibility studies, policy analysis, case studies, integrative literature reviews, business plans and “big data project(s)”



Burson, R. (2014). Scholarship in practice. In K. Moran, R. Burson, & D. Conrad (Eds.), *The doctor of nursing practice scholarly project: A framework for success* (pp. 57–84). Burlington, MA: Jones and Bartlett.

Dols, J. D., Hernandez, C., & Miles, H. (2017). The DNP project: Quandaries for nursing scholars. *Nursing Outlook*, 65, 84–93.

Melnik, B. M. (2017). The clinical scholar role in doctoral advanced practice nursing: Reflective response 1. In H. M. Dreher & M. E. S. Glasgow (Eds.), *DNP role development for doctoral advanced practice nursing* (2nd ed., pp. 217–231). New York, NY: Springer.

Variability in Expectations (cont.)

- The need for students to work individually on projects for the purpose of accountability and adherence to academic expectations for scholarly work, whereas Brennan (2016) describes completion of final projects by groups of students.
- The format of the DNP final project varies. Formats may include:
 - Written Report
 - Presentation
 - Executive Summary to a practice site and/or peer-reviewed journal submission



Brennan, M. M. (2016). Leadership and executive practice partnerships: Group advising and separate papers. Podium session presented at the 2016 DNP Faculty Conference: moving nursing practice forward. Lexington, KY.

Dols, J. D., Hernandez, C., & Miles, H. (2017). The DNP project: Quandaries for nursing scholars. *Nursing Outlook*, 65, 84–93.

Impact of DNP Final Projects

- DNP projects chosen in conjunction with gap identification of a patient or system issue, enhance system and impact patient outcomes
- Engaging students with the DNP Essentials from the beginning of their curriculum help students identify and recognize potential areas for healthcare and patient gaps
- Engaging students with the clinical partners to begin discussions around potential gaps to establish connections
- Begins the scholarship trajectory of the student which can be continued throughout their career.

American Association of Colleges of Nursing (2006). The essentials of doctoral education for advanced nursing practice. Retrieved from <https://www.aacnursing.org/Portals/42/DNP/DNPEssentials.pdf?ver=2017-07-28-124712-853>

Data-Driven Needs Assessment for DNP Projects

- Teaching students to identify patterns of data serve as “practice-focused triggers” for DNP projects that reduce gaps in practice, such as 1) low rates of adherence to a particular evidence-based practice; 2) variations in healthcare delivery processes to specific populations of patients; or 3) high rates of adverse events that jeopardize patient safety.
- From a practical perspective, stakeholder engagement to obtain support for a DNP project at a clinical site is maximized if administrators and practitioners recognize the value of the project to the organization. Clinical staff at healthcare organizations view DNP projects favorably if the projects have the potential to make a “significant difference” for the site/system and the patients.

Dols, J. D., Hernandez, C., & Miles, H. (2017). The DNP project: Quandaries for nursing scholars. *Nursing Outlook*, 65, 84–93.

Magyary, D., Whitney, J. D., & Brown, M. A. (2006). Advancing practice inquiry: Research foundations of the practice doctorate in nursing. *Nursing Outlook*, 54, 139–151.

Schreiner, B. & Bemker, M. (2016). Planning and conducting the DNP project: A toolkit for success. In M. Bemker & B. Schreiner (Eds.), *The DNP degree & capstone project: A practical guide* (pp. 27–68). Lancaster, PA: DEStech Publications.

Impact of DNP Final Projects

- Little is known about the long-term impact of DNP final projects on healthcare systems, including quality of care outcomes, service delivery or cost.
- Several factors may influence or limit impact:
 - Nurse educators and students expressed concern about the challenges faced in achieving sustainable practice change in the context of time constraints.
 - It is suggested that students’ concerns related to time may limit thorough implementation and evaluation of practice change and sustainability efforts

Dols, J. D., Hernandez, C., & Miles, H. (2017). The DNP project: Quandaries for nursing scholars. *Nursing Outlook*, 65, 84–93.

Kirkpatrick, J. M., & Weaver, T. (2013). The doctor of nursing practice capstone project: Consensus or confusion? *Journal of Nursing Education*, 52, 435–441.

Sebastian, J. G., Trautman, D. E., & Cary, A., H. (2018). Moving ahead with the transition to the doctor of nursing practice. *Nursing Outlook*, 66, 105–107.

Impact of DNP Final Projects

- Several strategies have been proposed to address these limitations.
 - Advantages of students focusing on one or two phases of change for a large clinical problem rather than a small project narrow in scope.
 - Discussions with practice partners for projects that build upon work that has already been slated to occur within a healthcare system (APRN Council/Early mobility in ICU)
 - Building a DNP project on the work of a previous DNP student findings to continue to narrow the patient/system gap in a specific area (ex: Palliative Care Teams)
 - Incorporating experts in the practice partnership to engage them in activities such as DNP committee members and/or Clinical mentors

Kirkpatrick, J. M., & Weaver, T. (2013). The doctor of nursing practice capstone project: Consensus or confusion? *Journal of Nursing Education*, 52, 435–441

Multi-Site and Multi-Student Participation

- Multi-site and multi-student participation can enhance the quality of the project. (ex: PhD/DNP Project with LVAD)
- Advantages include:
 - Effective use of faculty time
 - Possibility for increased sample sizes of the final projects
 - Possibility for increased generalizability
 - Collaborative team efforts in carrying out the project, which could increase participation in the study
 - Protocol development and testing opportunities



Broome, M. E., Riner, M. E., & Allam, E. S. (2013). Scholarly publication practices of Doctor of Nursing Practice prepared nurses. *Journal of Nursing Education*, 52, 429–434.

Multi-Student Participation (cont.)

- Faculty and student responses to group work with multiple students on a project in DNP programs are mixed.
 - It is important that students value the realistic approach to group projects and the opportunity to learn the process of working in groups, which is an essential to functioning collaboratively on interprofessional teams as they advance in their careers.
 - Other nurse educators have observed that group work, particularly in online programs, has been viewed somewhat unfavorably by faculty and students due to problems with accountability for work among all group members.
- An approach shared was that each student individually writes an IRB application for the study in which they were a member. Ensures students familiarity with the process.
- Faculty must be aware when overarching IRB's are in play so that curriculum processes are attainable for all students.

Brennan, M. M. (2016). Leadership and executive practice partnerships: Group advising and separate papers. Podium session presented at the 2016 DNP Faculty Conference: moving nursing practice forward. Lexington, KY.
Kirkpatrick, J. M., & Weaver, T. (2013). The doctor of nursing practice capstone project: Consensus or confusion? *Journal of Nursing Education*, 52, 435-441.

Academic-Practice Partnerships

Provide opportunities for creative collaboration

- Connection to curriculum
- Voluntary faculty and clinical experts / partners
- Invested in the outcome of the projects and student success
- Innovative new models and structures
 - Tiered DNP Project Model
 - Workforce planning
 - Evolving systems of care
- Faculty opportunities to participate in APRN-related hospital committee to expand clinical opportunities



Howard, P. B. & Williams, T. E. (2017). An academic-practice partnership to advance DNP education and practice. *Journal of Professional Nursing*, 33(2), 86-94. Retrieved from <https://doi.org/10.1016/j.profnurs.2016.08.010>

Melander, S., Howard, P. B., Williams, T. E., Tharp-Barrie, K., El-Mallakh, P., & MacCallum, T. (2019, in press). Optimizing impact through the tiered DNP project model. *Journal of the American Association of Nurse Practitioners*. Retrieved from <https://doi.org/10.1097/JXX.0000000000000283>

Williams, T. E. & Howard, P. B. (2017). An academic-practice partnership model to grow and sustain advanced practice nursing. *Journal of Nursing Administration*, 47(12), 629-635. Retrieved from <https://doi.org/10.1097/NNA.0000000000000558>

The Tiered DNP Project Model

- The Tiered DNP Project Model is an innovation designed to maximize both student outcomes and the impact on a HCO's identified practice and system needs.
- By close collaboration through academic and practice settings and matching targeted projects with DNP student interests, it is possible to address complex health care issues through successive DNP projects over time.
- Building on previous projects by successive cohorts of students maximizes long-term impact on a health care system.
- In the Tiered DNP Project Model, individual students are accountable to demonstrate competency, learning outcomes and DNP program completion requirements.

Melander, S., Howard, P. B., Williams, T. E., Tharp-Barrie, K., El-Mallakh, P., & MacCallum, T. (2019, in press). Optimizing impact through the tiered DNP project model. *Journal of the American Association of Nurse Practitioners*. Retrieved from <https://doi.org/10.1097/JXX.0000000000000283>

The Tiered DNP Project Model

- We refer to our innovative approach as “tiered”- the process by which students in later cohorts build on and expand select DNP projects implemented initially by students in an earlier cohort.
- The tiered approach to DNP projects is facilitated by an advising model that occurs in the context of mutually agreed-upon strategic goals for our academic-practice partnership



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The Tiered DNP Project Model

- The process begins once the student is admitted to the UKCON DNP program and assigned to an advisor.
- The advisor meets with the student to discuss program courses and ideas about DNP project interests.
- Through advisor and advisee meetings, discussions continue throughout the first year of their program.
- During discussion of DNP projects, areas of interest and potential sites for the study are explored. Many students have an area that they are passionate about but do not initially understand if there is a system issue or gap in patient outcomes.
- The advisor and student refine ideas, identify theoretical frameworks, discuss **feasibility** and **time table** with practice leaders regarding patient populations to develop the project idea further. Once the project idea is confirmed, DNP committee membership is finalized.

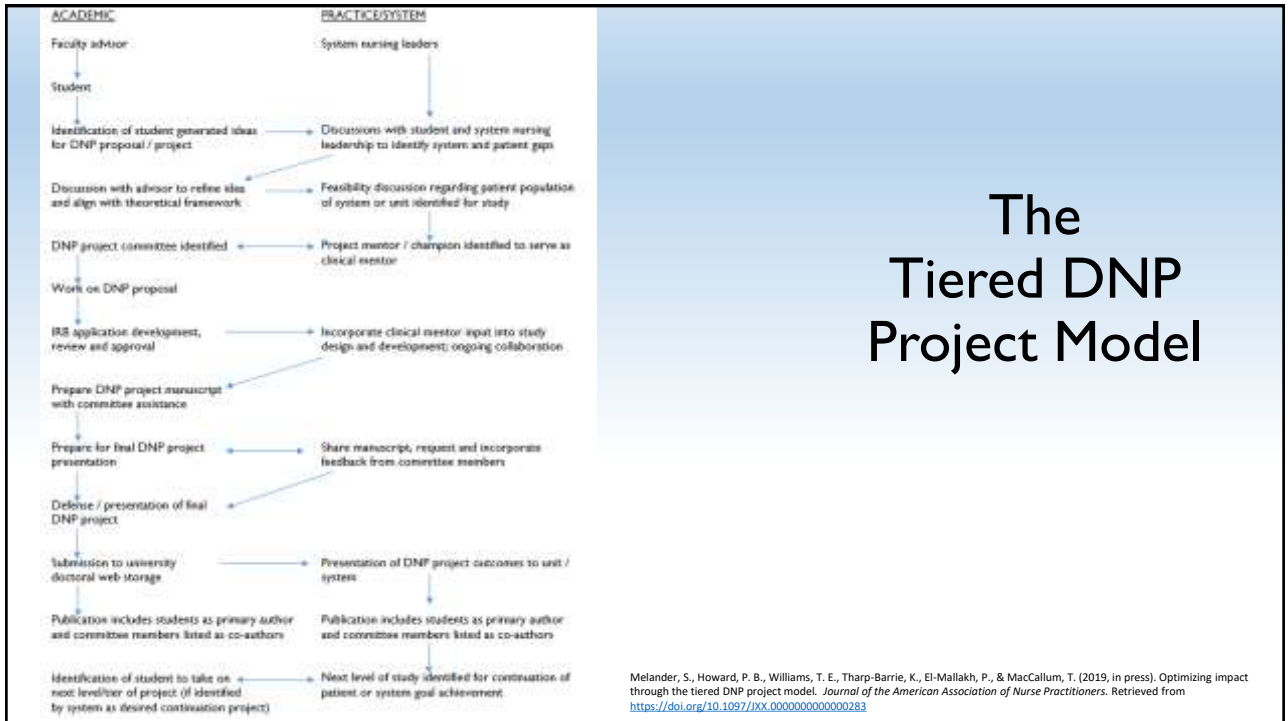
Melander, S., Howard, P. B., Williams, T. E., Tharp-Barrie, K., El-Mallakh, P., & MacCallum, T. (2019, in press). Optimizing impact through the tiered DNP project model. *Journal of the American Association of Nurse Practitioners*. Retrieved from <https://doi.org/10.1097/JXX.0000000000000283>

The Tiered DNP Project Model

- The committee includes the faculty advisor, a second faculty committee member and a clinical mentor.
- The advisor and student work together to identify a clinical mentor from within the health care system who will champion the project, both during the development and implementation stages.
- Prior to the proposal development course, which students take at midpoint of the 3-year full time program, the idea for the project becomes more concrete.
- By the time the students enroll in the proposal development course, they are ready to list the working title of the DNP project and identify where the project will be conducted and a proposed committee membership.

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The Tiered DNP Project Model



Tiered DNP Project Examples

Palliative Care-3 DNP Students Tiered

- Implementation of a Screening Tool Protocol to Identify Patients with Unmet Palliative Care Needs and Improve Access to Palliative Care in the ICU
- Evaluation of Education Implementation in the Adult Palliative Care Population
- Needs Assessment for the introduction of Inpatient Palliative Care Specialists in a Suburban Hospital

Mobility in Mechanically Ventilated Patients-3 DNP Students Tiered

- Review of Current Mobility Practice in Non-Surgical Mechanically Ventilated Intensive Care Unit Patients
- Post Implementation Evaluation of MOVE Early Mobility Screening Protocol in Non-Surgical Mechanically Ventilated Patients in the Intensive Care Unit

Tiered DNP Project Examples

Obstructive Sleep Apnea-3 DNP Students Tiered

- Implementation of the STOP BANG Screening Instrument for Obstructive Sleep Apnea within the Intensive Care Unit and 5 East Cardiac Unit
- The Effect of Obstructive Sleep Apnea Screen on Outcomes of Adult Surgical Patients in a Suburban Hospital

Advanced Practice Providers & Delivery of Care-3 DNP Students Tiered

- The Evaluation of Advanced Practice Providers Practice Patterns and Delivery of Care Models in the Specialty Practice Environment
- Evaluation of APRN Transition to Practice Program



Tiered DNP Project Examples

Nursing Workforce Development

- The Evaluation of a Multi-Hospital System Nurse Residency Program on New Graduate Nurse Retention and Engagement
- The Effect of Implementation of Nurse Manager Orientation Program on Nurse Manager Competency and Empowerment
- An Evaluation of the Effect of Simulation Training in Safety Strategies on New Nurses

Nursing Workforce Resilience

- The Effect of a Mentor Program on Burnout, Resilience, Work Engagement, and Turnover Intentions of New Nurse Managers
- The Effect of an Emotional Intelligence Training Program on Resilience and Use of a Transformational Leadership Style Among Nurse Managers

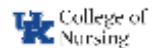
Tiered DNP Project Examples

Nurse Manager System Collaborative Council

- The Effects of a Nurse Manager System Collaborative Council on Job Satisfaction, Intent to Leave and Resilience
- Evaluation of the Effectiveness of a System Based Nurse Manager Collaborative Council (NMSCC) on Engagement, Psychological Empowerment and Value of Participation

Medication Education and Elderly Patients

- Beers Medication: Empowering the Elderly Through Education
- An Assessment of Potentially Inappropriate Medications Among the Elderly and the Effect of an Educational Intervention on Provider Knowledge of These Medications



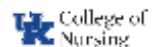
Tiered DNP Project Examples

Diabetic Retinopathy Screening

- A Process Improvement Project to Increase Diabetic Retinopathy Screening Rates as Evidenced by Formal Documentation
- A Process Improvement Project to Increase Referral and Documentation Rates for Diabetic Retinopathy Screening

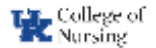
Alcohol Use Screening

- Screening for Alcohol use/abuse in the Primary Care Setting using the AUDIT-C and SBIRT (Screening, Brief Intervention, Referral to Treat)
- The effect of educating MAs and providers about implementing the AUDIT-C tool on alcohol screening rates in primary care



Quality Assurance and Standardization

- Develop, approve and implement rubrics
- Mapping and tracking rubrics for various aspects of DNP program completion
 - DNP portfolio rubric
 - DNP project rubric
 - DNP presentation rubric
- Make the rubrics meaningful - living, dynamic documents
- Thread the DNP Essentials throughout



DNP Essentials

AACN

The Essentials of Doctoral Education for Advanced Nursing Practice

- 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. Clinical Prevention and Population Health for Improving the Nation's Health
- VIII. Advanced Nursing Practice

DNP Rubrics

- Consistency and accountability
 - Across the curriculum
 - Implications for identifying potential curricular issues
 - % developing, proficiency of the essentials
 - Across the tracks or specialty options
 - achieve consistent valid reliable outcomes
- Mapping and tracking various rubrics
 - DNP portfolio rubric
 - DNP project rubric
 - DNP presentation rubric
- Making the DNP portfolio and project a **living, breathing** demonstration of the student's work



Essential Component	Exceptional	Proficient	Developing
1. Critically analyze health policy proposals, health policies, and related issues from the perspective of consumers, nursing, other health professionals, and other stakeholders in policy and public forums.	<p>With breadth or depth, critically analyzed health policy proposals, health policies, and related issues ...</p> <p>* Critically analyzed health policy proposals, health policies, and related issues; and</p> <p>* Includes perspectives of consumers, nurses, other health professionals, and other stakeholders in policy and public forums; and</p> <p>* Critical analysis exceptionally focused or innovative</p>	<p>Critically analyzed health policy proposals, health policies, and related issues ...</p> <p>* Critically analyzed health policy proposals, health policies, and related issues; and</p> <p>* Includes perspectives of consumers, nurses, other health professionals, and other stakeholders in policy and public forums</p>	<p>Identified needs regarding health policy proposals, health policies, and other related issues ...</p> <p>* No critical analysis or health policy proposals, health policies, or related issues included; or</p> <p>* Missing perspective of consumers, nurses, other health professionals, or other stakeholders in policy and public forums</p>
2. Demonstrate leadership in the development and implementation of individual, local, state, federal, and/or international health policies.	<p>Initiated leadership and managed the development and implementation of ...</p> <p>* Student demonstrated leadership in & -Challenging/facilitating a policy discussion, presenting to policy audiences; and</p> <p>* Policy developed and implemented; and</p> <p>* Scope of policy is at a broader level, e.g. local, state, etc.</p>	<p>Demonstrated leadership in the development and implementation of ...</p> <p>* Student demonstrated leadership in & -Challenging/facilitating a policy discussion, presenting to policy audiences; and</p> <p>* Policy developed and implemented; and</p> <p>* Scope of policy is institutional</p>	<p>Participated in leadership of the development and implementation of ...</p> <p>* Leadership not demonstrated; or</p> <p>* Policy developed or implemented but not both; or</p> <p>* Policy level unclear/inappropriate</p>
3. Influence policy makers through active participation on committees, boards, or task forces at the individual, local, state, regional, national, and/or international levels to improve health care delivery and outcomes.	<p>Influenced policy makers through leading committees, boards, or task forces ...</p> <p>* Influenced policy makers through active participation on committees, boards, or task forces; and</p> <p>* Scope of policy is at a broader level, e.g. local, state, etc.; or</p> <p>* Influenced policy makers through leadership of committees, boards, or task forces</p>	<p>Influenced policy makers through active participation on committees, boards, or task forces ...</p> <p>* Influenced policy makers through active participation on committees, boards, or task forces; and</p> <p>* Scope of policy is institutional</p>	<p>Attended meetings of committees, boards, or task forces ...</p> <p>* Attended meetings of committees, boards, or task forces, but was not active; or</p> <p>* Policy level unclear/inappropriate</p>
4. Educate others, including policy makers at all levels, regarding nursing, health policy, and patient care outcomes.	<p>Influenced others through education, including policy makers at all levels ...</p> <p>* Educated policy makers and stakeholders; and</p>	<p>Educated others, including policy makers at all levels ...</p> <p>* Educated policy makers and possibly other stakeholders; and</p>	<p>Interacted with others, including policy makers at all levels ...</p> <p>* Policy makers not educated; or</p>

DNP Portfolio Rubric



Rubric Excerpt // DNP Essential 5

Melander, S., Hampton, D., Hardin-Pierce, M., & Ossege, J. (2018). Development of a rubric for evaluation of the DNP portfolio. *Nursing Education Perspectives* 39, (5) (Sep): 312-314. <http://ezproxy.uky.edu/login?url=https://search.proquest-com.ezproxy.uky.edu/docview/2093213622?accountid=11836>

Criteria	Excellent	Above Average	Average	Below Average	Unsatisfactory
1. Introduction: Problem statement with needs justification	5	4	3	2	1
2. Objectives/specific aims	5	4	3	2	1
3. Literature review	5	4	3	2	1
a. Summary of literature search including search strategies, keywords, inclusion and exclusion criteria					
b. Supports the problem statement and identifies gaps in knowledge					
4. Theoretical/conceptual framework or process model	5	4	3	2	1
a. Identifies the theoretical underpinnings of the project to support change and provide a framework for the project					
b. Provides a model that correlates the project with the theoretical framework					
5. Methods:	5	4	3	2	1
a. Needs and feasibility assessment					
b. Project design					
c. Setting					
d. Population/sample					
e. Tools and/or instruments					
f. Project plan including timeline					
g. Institutional Review Board approval					
6. Evaluation	5	4	3	2	1
a. Data analysis					
b. Key findings					
7. Discussion	5	4	3	2	1
a. Summary of major findings and outcomes (refer back to the smart objectives)					
b. Limitations (i.e. sample size, design, data collection)					
c. Implications for the organization including sustainability					
d. Implications for practice, education, health policy change, and future research					
8. Conclusion: Value to health care and practice	5	4	3	2	1
9. References	5	4	3	2	1

DNP Presentation Rubric



Determinants of DNP Project Oral Presentation Ratings

- 5 = Excellent: Student's presentation and responses to questions are very comprehensive of all components identified in the criteria. Elaborates about components with illustrations and examples. Demonstrates depth of knowledge through answers to questions and interprets the findings within the scope of existing evidence. Requires no faculty prompting during presentation. Readily cites references, theory, process model/theoretical/conceptual model and project outcomes as appropriate and provides additional clarifying information. Clearly describes impact of project, plans for future work and next steps as an outcome of the project.
- 4 = Above Average: Student's presentation and responses to questions are comprehensive and student addressed all components identified in the criteria. Demonstrates depth of knowledge through answers to questions. Requires no faculty prompting about presentation content and very minimal prompting when answering questions. Readily cites references, theory, process model/theoretical/conceptual model and project outcomes as appropriate. Describes impact of project, plans for future work and next steps as an outcome of the project.
- 3 = Average: Student's presentation and responses to questions are comprehensive, but include minimal elaboration. Addresses all required components identified in the criteria, but could provide more detail for one or two criteria. Answers questions thoroughly; with minimal prompting student elaborates in more detail. Knowledge of topic and focus is apparent, but includes limited analysis and synthesis. With minimal prompting is able to cite references, theory, process model/theoretical/conceptual model and project outcomes as appropriate. An overall average rating will be considered passing.
- 2 = Below Average: Student's presentation and responses to questions includes the majority of the components of the criteria, but elaboration is minimal. With faculty prompting, the student is able to answer questions. Knowledge of topic is present but not well integrated. Limited citing of references, theory, process model/theoretical/conceptual model, or project outcomes as appropriate. Is not able to clearly articulate impact of project and future steps to build on project work. An average of below average rating results in failure to pass the presentation.
- 1 = Unsatisfactory: Student's presentation did not address the some components of the criteria or were inaccurate. Has difficulty answering questions and answers do not demonstrate that the student has the knowledge one would expect after having completed the DNP project. The student has difficulty articulating and relating presentation to appropriate references, theory, process model/theoretical/conceptual model and project outcomes as appropriate. Is not able to articulate the impact of the project and future steps to build on project work. An unsatisfactory rating in any category, for the majority of committee members, results in failure to pass the presentation.

DNP Presentation Rubric



AACN DNP Program Directors Meeting (Jan 2019)

Feedback: Areas identified for opportunities in growth and development

1. Workload Distribution
2. DNP Project Oversight/Expectations
3. DNP Project Storage/Reporting
4. Student Oversight/Online Programs
5. Recruitment of Faculty and Graduate Students
6. Clinical Placement
7. DNP Committee Make-up
8. New DNP Faculty Development

“With the growth in numbers of DNP students and limited faculty who can chair a project, we are considering revising faculty workload as it pertains to chairing DNP projects. How is your university recognizing the work that faculty put into each DNP project? Are faculty given workload credit for each student or for multiple students? If so, how is this being done?”



Workload Distribution: Let's talk about it

“I would like to see this topic brought up again. We currently teach the project through 4 courses that total 6 hours (1, 2, 1.5, 1.5). Each faculty member has a maximum of 8 students per project course and the current model has the faculty member following the group from start to finish. If the course maintains enrollment of at least 6 students, it is considered a full course and the faculty member gets the full workload credit above.”



I. Workload Distribution

Workload Distribution was the #1 issue from group

- Struggles of fair allocation of time for advising and allocation for the DNP project chair
- Was a high level of need to reward those doing a good job in this area by the group.
- Workload time for projects needs to be recognized and increased most often
- Discussed reconfiguring classes to provide increased faculty time to work with students
- Schools are seeking a variety of solutions

AACN DNP
Program Directors
Meeting (Jan 2019)

I. Workload Distribution

Workload Distribution – a variety of solutions

- One school paid each DNP advisor \$1000.00 per successful DNP student's timely completion and defense
- Differentiation around time allocation for work with the DNP project. Some give course credit for a course devoted to the DNP project.
- Some allocate advising time which includes the DNP project
- Some have specific courses where the student completes the work
 - One school gives 5% for each student for 2 of the 3 DNP project courses in their curriculum (ex. 5 students = 25% faculty time)
 - Another school assigns 5% per student and 5% for the second member up to two committees; No work load if student is not doing project work or if on LOA
 - One school gives 10% per advisee
 - An additional school gives 1% per advisee during their project work.
- Others believe the project is part of the overall advising responsibilities
- Group advising and/or working with multiple students has been adopted by some faculty to address workload and time issues.

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Program Directors
Meeting (Jan 2019)

Audience Response

Workload Distribution

- Go to [menti.com](https://www.menti.com) on your phone / tablet
- Enter the code **871500**



2. DNP Project Oversight & Expectations

DNP Project Oversight/Expectations

- Wide range of variability
- Some voiced questions around components and scope
- Discussed appropriate differentiation at times of BSN-DNP, MSN-DNP and Post MSN-DNP level projects
- Discussed possible streamlining of the IRB processes for DNP Projects that are QI projects
- Some schools have project rubrics that have been very helpful
- Discussed DNP group projects and group advising – positive benefits
- Focused on institutional needs for projects combined with developing individualized plans/steps for success for advisee's DNP projects

AACN DNP
Program Directors
Meeting (Jan 2019)

Audience Response

DNP Rubric Utilization



- Go to [menti.com](https://www.menti.com) on your phone / tablet
- Enter the code **826819**

3. DNP Project Storage

DNP Project Storage/Reporting

Schools are using various repositories

Examples include:

- Taskstream (Watermark)
- Tevera
- Online portfolios
- Medatrx
- Typhon
- Sigma Theta Tau International (STTI)
- Individual university repositories

AACN DNP
Program Directors
Meeting (Jan 2019)

Audience Response

DNP Project Storage



- Go to [menti.com](https://www.menti.com) on your phone / tablet
- Enter the code **867683**

University of Kentucky Repository: UKnowledge

In the past 90 days, DNP Projects in UKnowledge had **7096 downloads** from **118 countries**



4. Student Oversight & Online Programs

Student Oversight & Online Programs

- Need clear expectations of participation
- Time management expectations
- Online does not equal less work, in fact, can be more difficult at times
- Do we need to reward those doing well with these areas, and if so how?

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Program Directors
Meeting (Jan 2019)

5. Clinical Placement

Clinical Placement

- How to compensate or recognize our preceptors without paying them is a continuous issue
- Fostering efficiency & building relationships – ideally clinical placements facilitate
 - possible project oversight
 - possible clinical mentors
 - can build possible employment sites for graduates
- How to keep our graduates involved so that they can help with educating the next generation—develop ways to engage our graduates

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Program Directors
Meeting (Jan 2019)

Audience Response

Student Clinical Site Visits



- Go to [menti.com](https://www.menti.com) on your phone / tablet
- Enter the code **682518**

6. Recruitment of Faculty & Graduate Students

Recruitment of Faculty & Graduate Students

- Faculty and students constantly struggle to compete with practicing doctoral-prepared APRN's
 - Salaries are not comparable
 - Need ways to provide flexible schedules that can include practice for faculty
- Geographical constraints are real
 - Difficult to recruit away from central areas
 - Need creative solutions to help those schools compete
 - Can we partner with others-reality is every school can't support resourcing needs for all tracks/programs
- Tough faculty recruiting all around - Everyone seems to need PMH and AGACNP currently

AACN DNP
Program Directors
Meeting (Jan 2019)

Audience Response

Faculty Practice

- Go to [menti.com](https://www.menti.com) on your phone / tablet
- Enter the code **604817**



7. DNP Committee Make-up

DNP Committee Make-up

- Diverse composition is ideal –Feedback from group was that this is inconsistent at times within institutions
- Possible options include faculty; advisor; first reader of the DNP Project; center for writing assistance to help with quality of DNP project outcomes

AACN DNP
Program Directors
Meeting (Jan 2019)

8. New DNP Faculty Development

New DNP Faculty Development

- Sharing avenues to prepare new faculty to oversee DNP projects & student committee work
 - Strategy of senior faculty co-advising with new faculty was a commonly used process.
 - Those of you who have developed other strategies, please share these at the end with all of us.

AACN DNP
Program Directors
Meeting (Jan 2019)

Growing Pains / Stay the Course

Getting to the next level with the DNP

- Sharing successes in filling gaps in patient and system outcomes
- Still growing in this process which was started in the early 2000s
- Encourage sharing outcomes and impacts seen in DNP programs and DNP projects
- Disseminate findings so that we can build and grow
- Stay the course with establishing resources/tools and program standards to help us reach the next level regarding outcomes and impact for our programs so that findings can be felt in the community at large

Sustaining Impact

Feedback: Top impact points of increasing DNP prepared advanced practice nurses in health system as a result of an academic-practice partnership

- “The complement of additional APRNs fostered improved access in primary care and specialty areas – such as spine neuro surgery and endocrine.
- The leadership track improved succession planning opportunities and increased our pool for selection into strategic leadership roles.
- Overall, the 8 Essentials aligned nicely with our health system’s 2020 strategic plan so that as the DNPs grew their skill sets, this enabled us to better meet the goals through the work of their DNP projects and peripheral work.
- Finally, as a nursing team we grew in confidence and found our voice to promote change, implement change through our Adapt, Adopt or Abandon model—all fostered by our partnership model.”

*Kim Tharp-Barrie, DNP, RN, SANE, FNAP, System Vice President,
Norton Healthcare Institute for Nursing and Workforce Outreach*

Sustaining Impact

Feedback: Top impact points of increasing DNP prepared advanced practice nurses in health system as a result of an academic-practice partnership

- “The increase in APRNs to the medical group allowed us to meet access needs and programmatic development.
 - Examples include Primary Care/Immediate Care Centers/Cardiology/Surgical Specialties (Bariatric, CT Surgery, and Vascular Surgery)
- At the clinic level, we have enhanced evaluation of data, implementation of NP-led projects in the clinic setting - such as COPD management, readmission task force, etc.
- Patient care management changes led by DNPs utilizing evidence based research.
- We have developed a DNP council that reviews nursing practice in the hospital setting, driving evidence based practice.
- We have developed Advanced Practice Provider leadership councils that drive clinical practice, professional development, policy changes, and top of license practice for the medical group.
- We are developing a transition to practice for new hires, utilizing DNP graduates to help develop this program.
- We have developed mentorship and preceptorship program for advanced practice.
 - The leadership focused DNPs lead these efforts partnering with the clinical practice DNPs to implement initiatives.
- Training in the 8 Essentials allows for accountability of the DNP graduates.”

*Katie Rogers, Director of Advanced Practice, Norton Healthcare
DNP graduate, Spring 2018; AG-ACNP post-masters certificate, Spring 2015*

Audience Response

Come to the Microphone

Please share your solutions for these key areas:

1. Workload Distribution
2. DNP Project Oversight/Expectations
3. DNP Project Storage/Reporting
4. Student Oversight/Online Programs
5. Recruitment of Faculty and Graduate Students
6. Clinical Placement
7. DNP Committee Make-up
8. New DNP Faculty Development
9. Other successful strategies that have impacted your DNP program, clinical partners or students



References

- American Association of Colleges of Nursing (2004). AACN position statement on the practice doctorate in nursing. Retrieved from <https://www.aacnnursing.org/Portals/42/DNP/DNPpositionstatement.pdf?ver=2017-08-01-095733-307>
- American Association of Colleges of Nursing (2006). The essentials of doctoral education for advanced nursing practice. Retrieved from <https://www.aacnnursing.org/Portals/42/DNP/DNPEssentials.pdf?ver=2017-07-28-124712-853>
- American Association of Colleges of Nursing (2015). The Doctor of Nursing Practice: Current issues and clarifying recommendations. Report from the task force on the implementation of the DNP. Retrieved from https://www.pncb.org/sites/default/files/2017-02/AACN_DNP_Recommendations.pdf
- American Association of Colleges of Nursing (2018). Defining scholarship for academic nursing: Task force consensus position statement. Retrieved from <https://www.aacnnursing.org/Portals/42/News/Position-Statements/Defining-Scholarship.pdf>
- American Association of Colleges of Nursing (2019a). Fact sheet: The Doctor of Nursing Practice (DNP). Retrieved from <https://www.aacnnursing.org/Portals/42/News/Factsheets/DNP-Factsheet.pdf>
- American Association of Colleges of Nursing (2019b). Fact sheet: Nursing faculty shortage. Retrieved from <https://www.aacnnursing.org/Portals/42/News/Factsheets/Faculty-Shortage-Factsheet.pdf>
- American Association of Colleges of Nursing (2019c). AACN's Vision for Academic Nursing. *Journal of Professional Nursing*, 35(4), 249-259.
- American Association of Colleges of Nursing & American Organization of Nurse Executives (2012). Guiding principles to academic-practice partnerships. Retrieved from <https://www.aacnnursing.org/Academic-Practice-Partnerships/The-Guiding-Principles>
- Brennan, M. M. (2016, June). Leadership and executive practice partnerships: Group advising and separate papers. Podium session presented at the 2016 DNP Faculty Conference: Moving Nursing Practice Forward. Lexington, KY.
- Broome, M. E., Riner, M. E., & Allam, E. S. (2013). Scholarly publication practices of Doctor of Nursing Practice prepared nurses. *Journal of Nursing Education*, 52, 429-434.
- Burson, R. (2014). Scholarship in practice. In K. Moran, R. Burson, & D. Conrad (Eds.), *The doctor of nursing practice scholarly project: A framework for success* (pp. 57-84). Burlington, MA: Jones and Bartlett.
- Dols, J. D., Hernandez, C., & Miles, H. (2017). The DNP project: Quandaries for nursing scholars. *Nursing Outlook*, 65, 84-93.
- Howard, P. B., & Williams, T. E. (2017). An academic-practice partnership to advance DNP education and practice. *Journal of Professional Nursing*, 33(2), 86-94. Retrieved from <https://doi.org/10.1016/j.profnurs.2016.08.010>
- Kirkpatrick, J. M., & Weaver, T. (2013). The doctor of nursing practice capstone project: Consensus or confusion? *Journal of Nursing Education*, 52, 435-441.

References

- Magary, D., Whitney, J. D., & Brown, M. A. (2006). Advancing practice inquiry: Research foundations of the practice doctorate in nursing. *Nursing Outlook*, 54, 139-151.
- Melander, S., Hampton, D., Hardin-Pierce, M., & Ossege, J. (2018). Development of a rubric for evaluation of the DNP portfolio. *Nursing Education Perspectives* 39, (5) (Sep): 312-314, <http://exproxy.uky.edu/login?url=https://search-proquest-com.exproxy.uky.edu/docview/2093213622?accountid=11836>
- Melander, S., Howard, P. B., Williams, T. E., Tharp-Barrie, K., El-Mallakh, P., & MacCallum, T. (2019, in press). Optimizing impact through the tiered DNP project model. *Journal of the American Association of Nurse Practitioners*. Retrieved from <https://doi.org/10.1097/JXX.0000000000000283>
- Melnyk, B. M. (2017). The clinical scholar role in doctoral advanced practice nursing: Reflective response 1. In H. M. Dreher & M. E. S. Glasgow (Eds.), *DNP role development for doctoral advanced practice nursing* (2nd ed., pp. 217-231). New York, NY: Springer.
- National Organization of Nurse Practitioner Faculties. (2012). Nurse practitioner core competencies. Retrieved from <http://www.nonpf.org/general/custom.asp?page=14>.
- National Organization of Nurse Practitioner Faculties. (2016). *Adult-Gerontology Acute Care and Primary Care NP Competencies*.
- Schreiner, B. & Bemker, M. (2016). Planning and conducting the DNP project: A toolkit for success. In M. Bemker & B. Schreiner (Eds.), *The DNP degree & capstone project: A practical guide* (pp. 27-68). Lancaster, PA: DEStech Publications.
- Sebastian, J. G., Trautman, D. E., & Cary, A., H. (2018). Moving ahead with the transition to the doctor of nursing practice. *Nursing Outlook*, 66, 105-107.
- Williams, T. E. & Howard, P. B. (2017). An academic-practice partnership model to grow and sustain advanced practice nursing. *Journal of Nursing Administration*, 47(12), 629-635. Retrieved from <https://doi.org/10.1097/NNA.0000000000000558>