Fact Sheet: 
The Doctor of Nursing Practice (DNP)

On October 25, 2004, the member schools affiliated with the American Association of Colleges of Nursing (AACN) voted to endorse the *Position Statement on the Practice Doctorate in Nursing*. This decision called for moving the current level of preparation necessary for advanced nursing practice from the master’s degree to the doctorate-level by the year 2015. This endorsement was preceded by almost four years of research and consensus-building by an AACN task force charged with examining the need for the practice doctorate with a variety of stakeholder groups.

Introducing the Doctor of Nursing Practice

- In many institutions, advanced practice registered nurses (APRNs), including Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse-Midwives, and Certified Registered Nurse Anesthetists, are prepared in master’s-degree programs that often carry a credit load equivalent to doctoral degrees in the other health professions. AACN's position statement calls for educating APRNs and other nurses seeking top leadership/organizational roles in DNP programs.

- DNP curricula build on traditional master’s programs by providing content in evidence-based practice, quality improvement, and systems leadership, among other key areas.

- 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 are well-equipped to fully implement the science developed by nurse researchers prepared in PhD, DNS, and other research-focused nursing doctorates.

Why Move to the DNP?

- The changing demands of this nation's complex healthcare environment require the highest level of scientific knowledge and practice expertise to assure quality patient outcomes. The Institute of Medicine, Joint Commission, Robert Wood Johnson Foundation, and other authorities have called for reconceptualizing educational programs that prepare today's health professionals.

- Some of the many factors building 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 members of the healthcare team.

- 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 require or offer practice doctorates.

**Sustaining Momentum for the DNP**

- After a two-year consensus-building process, AACN member institutions voted to endorse the *Essentials of Doctoral Education for Advanced Nursing Practice* on October 30, 2006. Schools developing a DNP are encouraged to use this document, which defines the curricular elements and competencies that must be present in a practice doctorate in nursing.

- In July 2006, the AACN Board of Directors endorsed the final report of the *Task Force on the Roadmap to the DNP*, which was developed to assist schools navigating the DNP program approval process. This report includes recommendations for securing institutional approval to transition an MSN into a DNP program; preparing faculty to teach in DNP programs; addressing regulatory, licensure, accreditation, and certification issues; and collecting evaluation data. A *DNP Tool Kit* was developed using information and resources contained in the Roadmap report.

- In 2014, the AACN Board of Directors commissioned the RAND Corporation to conduct a national study to examine the progress made by nursing schools in transitioning to the practice doctorate. The report, titled *The DNP by 2015: A Study of the Institutional, Political, and Professional Issues that Facilitate or Impede Establishing a Post-Baccalaureate Doctor of Nursing Practice Program*, found near universal agreement among nurse educators about the value of the DNP in preparing individuals for advanced nursing practice.

- Schools nationwide that have initiated the DNP are reporting sizable and competitive student enrollment. Employers are quickly recognizing the unique contribution these expert nurses are making in the practice arena, and the demand for DNP-prepared nurses continues to grow.
• The Commission on Collegiate Nursing Education (CCNE), the leading accrediting agency for baccalaureate- and graduate-degree nursing programs in the U.S., began accrediting DNP programs in Fall 2008. To date, 286 DNP programs have been accredited by CCNE.

**Current DNP Program Statistics**

• 348 DNP programs are currently enrolling students at schools of nursing nationwide, and an additional 98 new DNP programs are in the planning stages (50 post-baccalaureate and 48 post-master’s programs).

• DNP programs are now available in all 50 states plus the District of Columbia. States with the most programs (10 or more programs) include California, Florida, Illinois, Massachusetts, Minnesota, New York, Ohio, Pennsylvania, and Texas.

• From 2017 to 2018, the number of students enrolled in DNP programs increased from 29,093 to 32,678. During that same period, the number of DNP graduates increased from 6,090 to 7,039.

**Growth in Practice- and Research-Focused Doctoral Programs: 2006-2018**

![Growth in Doctoral Nursing Programs: 2006-2018](image)

*Last Update: March 2019*