AACN GEARS UP FOR 50TH ANNIVERSARY CELEBRATION

The countdown continues to October 19, when AACN’s 50th Anniversary Gala will be held in conjunction with the 2019 Academic Nursing Leadership Conference (ANLC) in Washington, DC. This promises to be a magnificent evening, as we celebrate five decades of the invaluable contributions made by our members to nursing education. The setting for this historic event is the beautiful Great Hall in the Thomas Jefferson Building at the Library of Congress.

The Gala will be just one of many highlights of the ANLC, which will be held at the JW Marriott Washington, October 19-22. Members will not want to miss the presentation from the conference’s featured speaker—Pulitzer Prize-winning author Doris Kearns Goodwin, an expert in the doctrine of leadership. Ms. Goodwin will present lessons from the past to shed light on cultural, economic, and political transformations that define today’s turbulent landscape.

In addition, the ANLC will see the presentation of the John P. McGovern Lectureship Award to Dr. Malcolm Cox, former Chief Academic Affiliations Officer at the Department of Veterans Affairs, and a leader in academic medicine.

Another conference highlight will be a 50th Anniversary Celebration panel, with panelists delivering reflections on AACN’s impact on academic nursing. Participating will be three persons who have played integral roles in shaping AACN: Dr. Jean Bartels (Vice President for Academic Affairs and Provost Emerita, Professor of Nursing Emerita, Georgia Southern University, and former AACN Board President), Dr. Kathleen Long (Professor and Dean Emerita, University of Florida, and former AACN Board President), and Dr. Geraldine “Polly” Bednash (Chief Executive Officer, GDB & Associates, and former Chief Executive Officer, AACN).

Please join us in recognizing the contributions all of AACN’s members have made to advance excellence in academic nursing over the last 50 years. Find more details on AACN’s 50th anniversary on our website.
AACN APPLAUDS RECENT ACTIONS ON CAPITOL HILL

AACN commends lawmakers on Capitol Hill for two recent legislative actions.

On July 11, the House Energy and Commerce Subcommittee on Health advanced the Title VIII Nursing Workforce Reauthorization Act of 2019 (H.R. 728) by a unanimous voice vote to the full committee for further consideration. The Subcommittee also adopted an amendment to H.R. 728, which was offered by nursing champion, Representative Doris Matsui (D-CA). This amendment would raise the total authorization amount by $10 million to reflect the House-passed Fiscal Year (FY) 2020 appropriations funding levels and expand choice for nurses in the NURSE Corps Loan Repayment Program.

On July 17, the House Energy and Commerce Committee continued consideration of H.R. 728 and reported Title VIII Reauthorization out of committee and to the House Floor.

With 121 cosponsors to date, Title VIII Reauthorization enjoys strong bipartisan support. AACN appreciates the tremendous work of H.R. 728’s sponsor, Representative David Joyce (R-OH), along with the original cosponsors, Representatives Tulsi Gabbard (D-HI), Doris Matsui (D-CA), Rodney Davis (R-IL), Suzanne Bonamici (D-OR), Kathy Castor (D-FL), David McKinley (R-WV), and Lauren Underwood (D-IL), for their dedication to the nursing profession and efforts to champion this legislation in the House. AACN also expresses deep appreciation for the House Nursing Caucus, including Co-Chairs, Representatives David Joyce (R-OH) and Tulsi Gabbard (D-HI), as well as, the Vice Co-Chairs, Representatives Rodney Davis (R-IL) and Suzanne Bonamici (D-OR). AACN also thanks the House Energy and Commerce Committee and Subcommittee on Health for their leadership and advancement of this vital legislation.

On July 12, the House of Representatives passed the National Defense Authorization Act (NDAA), which includes the U.S. Cadet Nurse Corps Service Recognition Act (H.R. 2056). By including and passing this provision, the House recognizes the contributions of nurses who served as members of the U.S. Cadet Nurse Corps during World War II and provides them with honorable discharges, medal privileges, and veteran burial benefits at cemeteries administered by the U.S. Department of Veterans’ Affairs.

“We are grateful to the House of Representatives for passing this legislation that AACN has been extremely proud to support,” said Dr. Ann Cary, AACN Board Chair. “It is long overdue that we acknowledge these brave nurses who embody the ‘greatest generation’.”

AACN appreciates the strong support from Representative Cheri Bustos (D-IL), who sponsored the original bill (H.R. 2056) and offered it as an amendment to the NDAA during consideration, and also recognizes the bipartisan group of more than 40 Representatives who cosponsored the bill and more than two dozen Representatives who supported this amendment throughout the process.

“AACN is pleased to see that women who served in the U.S. Cadet Nurse Corps from 1943 to 1948 are one step closer to finally receiving the recognition they so rightfully deserve,” added Dr. Cary.

CALL FOR ABSTRACTS FOR AACN CONFERENCES

AACN invites deans, directors, chairs, faculty, and academic administrators to submit an abstract for the following conferences:

Faculty Development Conference
November 20-21, 2019
Buena Vista Palace, Orlando, FL

Baccalaureate Education Conference
November 21-23, 2019
Buena Vista Palace, Orlando, FL

The deadline to submit for both conferences has been extended to August 16.

Faculty Practice Pre-Conference
January 29, 2020
Naples Grande Beach Resort, Naples, FL

Doctoral Education Conference
January 30-February 1, 2020
Naples Grande Beach Resort, Naples, FL

The Call for Abstracts for both conferences will open July 29 and close August 26.

AACN requests submissions showcasing programs, courses, initiatives and/or evaluation strategies that characterize the conference theme and address the many changes and challenges faced in undergraduate and graduate nursing education.

For more information, visit AACN’s website.
At the March 2019 Deans Annual Meeting, the AACN membership revised the Bylaws and voted to expand the Board of Directors and Nominating Committee. Beginning in March 2020, the AACN Board of Directors will expand to 13 members, including 2 practice representatives. In addition, the Nominating Committee will expand to 5 members beginning March 2021.

For the current Call for Nominations, the Nominating Committee is seeking nominations for the following positions on the Board of Directors and Nominating Committee.

- Board Chair-Elect
- Secretary
- Board Member-at-Large (3 vacancies)
- Nominating Committee (2 vacancies)

In addition, the committee is seeking nominations for two practice representatives who will join the AACN Board of Directors starting March 2020.

- Practice Board Member-at-Large – Two-year term (1 vacancy)
- Practice Board Member-at-Large – One-year term (1 vacancy)

NOTE: Practice members will have staggered terms. The stagger will be established by limiting one of the initial nurse practice member positions to a one-year term. Practice members are not eligible to serve as Officers. Practice members are eligible to serve two terms.

The following criteria will be used when making selections for the slate for academic positions:

- Need for representation of institutional types/sizes and geographical regions
- Need for representation of membership diversity
- Special consideration will be given to candidates with previous Board service, national recognition, distinguished awards, research/scholarship, and/or thought leadership
- Conflict of interest
- Need for two candidates for each position vacancy

The criteria used for Practice Board Members-at-Large will include:

- Nomination must be submitted by an AACN member dean/director
- Practice representative must be a CNO or hold a similar executive level nursing practice position
- Practice representatives follow the same guidelines as academic members – see Consent to Serve Statement
- Practice representatives must be individuals who have earned national distinction for their leadership, innovation, advocacy, and/or service
- Practice representatives must share a commitment to advancing the goals and priorities of AACN and academic nursing
- Practice representatives cannot be directly affiliated with the academic institution of currently serving AACN Board members (e.g. The CNO of ABC Hospital cannot serve on the AACN Board along with the nursing dean from ABC University)

AACN believes that the engagement of leaders from nursing practice on the Board of Directors will help to expand the diversity of voices in the board room, inform AACN’s mission and work with the perspectives from the practice community, and help to further strengthen the relationship between academic nursing and practice.

The nomination packet due date is October 11, 2019.
Q&A with David Campbell

DAVID CAMPBELL-O’DELL, DNP, APRN, FNP-BC, FAANP

David Campbell-O’Dell, DNP, APRN, FNP-BC, FAANP, is one of the founders and current President of Doctors of Nursing Practice. His DNP degree was earned through the University of Tennessee Health Science Center in Memphis when there were only 7 DNP programs in the country. His career has taken him from acute care clinical and administrative positions, to community-based service organizations, to working with the insurance industry, to later evolving into higher leadership and clinical roles. He works as a Family Nurse Practitioner with an interest in neurology and neurocognitive disorders and family/community dynamics. As an educator he has helped to develop graduate nursing programs including nurse practitioner, nurse administrator, and nurse educator. He has been a part of developing numerous DNP programs and has either taught or has contributed as an invited guest lecturer in programs around the country.

As president of Doctors of Nursing Practice, Dr. Campbell-O’Dell works with students, graduates, faculty, and key stakeholders in academia, practice, policy development, and finance. This unique position has afforded the development of a point of view reflecting where the DNP has been and where it is going. He maintains a clinical practice in Key West, Florida.

Why did you think it was important to get your DNP degree when you did?

Pursuing the DNP degree in 2005 was a venture encouraged by respected faculty at the University of North Florida in Jacksonville (my alma mater). The DNP degree was brand new and the expectations of the degree were shared by the professor that instinctively recognized that my inclinations were directed more toward practice than research. I had applied to four PhD programs and was in the interview process when the pieces fell into place for me to attend the University of Tennessee Health Science Center in Memphis. At that time there were seven DNP programs in the country, and we could all see that the path toward success was not clear, but the ambition to address improved healthcare outcomes was clear even then. The faculty at the University of Tennessee Health Science Center were instrumental in the development of the DNP degree as collaborators with the leadership of other university and the American Association of Colleges of Nursing. So, the stars aligned and my steps into the world of the DNP became a reality.

How did the Doctors of Nursing Practice organization come into existence?

One of the first courses at the University of Tennessee Health Science Center’s DNP program was a Philosophy of Science course. DNP and PhD students studied side-by-side. In one of the discussions, the conversation evolved into speculations of the needs and interests of other DNP students in other programs. Imaginations ignited and ideas were zooming as thoughts were shared among colleagues to help build a structure to support all DNPs in all colleges. The instructor at the time was very encouraging but had to pull us back into the discussion at hand. Nevertheless, the spark had ignited an idea. About a year later in an Advance Leadership Course, two group assignments were available. Either apply for a grant and apply funding to a known entity to improve its operation, or generate a business plan. Many of those that engaged in the discussion in the Philosophy of Science course pulled together to build this plan. That was the fall of 2006. The first iteration of a website addressing the goals and mission of what was DNP LLC rolled out in February 2007. The inaugural DNP National Conference took place in October 2008 in Memphis. Since then the leadership of what is now DNP Inc. has changed yet the support for the success of the organization lives on. The 12th National Doctors of Nursing Practice conference is slated to take place in August 2019 in Washington, DC.

What is the mission of DNP, Inc.?

The mission of Doctors of Nursing Practice, Inc. is to improve healthcare outcomes by promoting and enhancing the doctorally prepared nursing professional. The organization is dedicated to:

- Providing accurate and timely information
- Supporting, developing, and disseminating professional practice innovation
- Collaborating in a professional manner that demonstrates universal respect for others, honesty, and integrity in communications
- Responding with open discussions and dialogues that promote the evolution of advance nursing practice and the growth of the DNP degree.

Continued on page 5
Q&A with David Campbell

Q&A continued from page 4

What are the benefits of joining the DNP, Inc. online community?

The DNP Inc. online community and services offered by DNP Inc. through its website support the goals of enhancing and encouraging the growth of those interested in the DNP degree. The groups that access and interact in the DNP online community reflect roughly three groups: DNP students, graduates, and faculty. A smaller group of participants includes those that are not nurses such as policy makers, other disciplines, and leaders in the healthcare industry that strive to be informed of the evolution of the DNP degree in the nursing profession. Benefits include a sense of community to address concerns of practice, professional development, innovation of skills, and expertise as a result of the content and processes of the DNP degree. Conversations have covered a wide range of topics to include forums, blogs, a listing of events to support the growth and development of advance nursing practice, groups reflecting specific functions and pride in schools and geographic regions. The DNP online community is a vehicle to share, expand options for communication, and exchange ideas quickly across the country and around the world. We now have members in the DNP online community from eight countries outside of the United States.

Why is advanced education important for nurses?

Asking why advanced education is important for nurses is similar to asking the value of education for any discipline. Could we imagine any professional working at the top of their skill set without advanced education? There was a time when a physician could obtain all of the education needed in a 6-month program. Today the complexities of health care and the multi-faceted opportunities afforded by a multi-dimensional society mandates a skill set beyond basic education for any discipline that contributes to the health of its citizens. The reach and footprint of nursing is wide and systematic. Advanced education including the earning of a terminal degree in practice (and/or research, and/or education) is essential to not only growing the profession but also to addressing the rapidly evolving and intricate healthcare needs of society.

What advice do you have for DNP students in choosing a final project?

The first words of advice to DNP students as they consider a final project is to embrace the passion of the project. If there is no passion, it is an exercise or just another course project that will not leave a lasting impression or provide a foundation for future change. Introspection and a self-analysis of the individual’s place in the scheme of a system and society is essential to starting this process. Over the years many DNP projects have reflected a passion that cannot be denied and changes have taken place as a result of individual drive and ambition to make a difference. A final project reflects the work of a student, but is by no means the final effort of the DNP prepared professional nurse. The final project in an academic environment launches the student to bigger and more complex processes to affect healthcare outcomes and influence significant and sustainable change.

Is there evidence yet that links DNPs with better outcomes?

Without a doubt there is evidence of the impact of the DNP prepared nursing professional in any number of practice settings. The DNP-prepared nurse is influencing how care is delivered, how practice processes are applied to organizations both small and large including pervasive systems. National healthcare policy and international dynamics of care have been influenced by DNP-prepared colleagues as our nursing discipline presses for change and justice in healthcare services. The literature supports this premise, yet locating strong references addressing the contributions of DNP-prepared colleagues may not be as easy as hoped. Peer-reviewed literature tends to gravitate to research of discovery while IRBs grapple with the nuances of a DNP scholarly project in the context of transferability. The contributions of a DNP-prepared colleague may alter systems, yet it is not published as the changes within the systems is not considered transferable in the context of research. These types of challenges are evolving as we collectively continue our efforts to enhance healthcare outcomes.

How are DNP nurses transforming patient care?

DNP-prepared nursing professionals impact the delivery of care, and the policies that address the way services are devised and administered. Patient care in terms of practice processes are being transformed out of necessity to save money, improve efficiency, and streamline operations. These foundational objectives influence the outcomes of patient care, hopefully by improving these outcomes. There are no national or international mandates on how care is delivered, yet the DNP prepared nurse is in a position to maximize processes, policy, health systems, and advanced nursing practice to impact patient care. This impact can be realized on the micro, meso, and macro levels.

Continued on page 6
Do employers recognize a “DNP difference”?

The difference of service offered by the DNP-prepared nursing colleague is recognized by employers that value efficiency, improvement of processes, and cost savings. More healthcare systems are recognizing the value of the DNP-prepared nurse and are making this degree a criterion for management, administration, and advanced clinical roles. The benefits can be quantified. Still, there are organizations, entities, and other disciplines that may not embrace the value of the DNP-prepared nurse. The value of the contributions made by a DNP-prepared colleague is contingent on the mission of the organization to improve outcomes. The DNP-prepared nurse is in a key position to influence change in order to improve healthcare outcomes.

Though all healthcare disciplines have a similar goal, the educational preparation and actions of the DNP graduate are unique in that they are able to influence operations of practice at any level. Encouraging and supporting these talents will reflect in benefits to the consumer (patient), systems that provide service, and the overall population that is allowed to enjoy these contributions.

What are some of the biggest challenges facing DNPs today?

Some of the biggest challenges the DNP-prepared nursing professionals face today involve an opportunity to contribute. As more and more DNP-prepared colleagues step up to larger and larger challenges, the easier it will be for those that follow. We are on the cusp of growth in practice, academia, research, policy, and informatics waiting on a critical threshold of talent to tip the scales toward a collective benefit. The DNP-prepared colleague is a part of this process. Being allowed to step up and serve on boards of directors, tenured faculty, and policy creators will benefit outcomes however they are measured. This will also help address the challenge of being able to contribute to the fullest level possible. Healthcare systems will improve with the inclusion of DNP-prepared nurses in key administrative and board of director positions. Academic environments will enhance student outcomes by incorporating the talents of the doctorally prepared nurse that has the education and background to enhance nursing practice. We all are pressing for the same goals. Maximizing the skill set of DNP-prepared experts improves the processes and outcomes of all organizations that incorporate this group of nursing professionals.
ABOUT SYLLABUS

Syllabus is published bimonthly by the American Association of Colleges of Nursing (AACN). Address Changes: Send to Syllabus, AACN, 655 K Street, NW, Suite 750, Washington, DC 20001.

Managing Editor: William O’Connor
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AACN HOLDS SECOND DIGITAL INNOVATION BOOTCAMP WITH 35 NURSE FACULTY

On June 24-27 at the Austin Apple campus, AACN and Apple Education hosted its second Digital Innovation Bootcamp: From Concept to Action. Thirty-five faculty members from 21 states and the District of Columbia learned from Apple Development Executives and Apple Distinguished Educators about what leading technologies are available to help transform and enhance learning in the classroom, laboratory, online, and clinical settings. Faculty left the bootcamp invigorated with hands-on experience using new, innovative, and engaging digital content tools, and a personal learning network for peer support. Once faculty have completed their digital innovation project, they are encouraged to showcase their project at an upcoming AACN conference.

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