BOARD OF REGENTS
EASTERN MICHIGAN UNIVERSITY
RECOMMENDATION

NEW ACADEMIC PROGRAMS

ACTION REQUESTED

It is recommended that the Board of Regents approve a New Academic Program and Degree Type: *Doctor of Nursing Practice*.

SUMMARY

The Doctor of Nursing Practice (DNP) program prepares advanced practice nurses with the knowledge, skills and attributes necessary for accountable and comprehensive nursing practice. With the increasing scope of clinical scholarship in nursing and the growth of scientific knowledge, doctoral level education is highly recommended for advanced nursing practice in the clinical setting. The DNP curriculum includes content which enables the student to conduct complex diagnostic and treatment modalities, employ sophisticated informatics and decision-making technology, and integrate in-depth knowledge of bio-physical, Psychosocial, behavioral, and organizational sciences. The DNP program will accentuate student development as an expert clinician with an emphasis on leadership and education (at both the organizational and academic level), service and skills that will translate in improved health care.

FISCAL IMPLICATIONS

Program costs will be absorbed with the current Academic Affairs budget.

ADMINISTRATIVE RECOMMENDATION

The proposed Board action has been reviewed and is recommended for Board approval.

University Executive Officer

1/18/17
Date

EASTERN MICHIGAN UNIVERSITY
DIVISION OF ACADEMIC AND STUDENT AFFAIRS
OFFICE OF THE ASSOCIATE VICE-PRESIDENT FOR ACADEMIC PROGRAMMING AND SERVICES
INTER OFFICE MEMORANDUM

TO: Chris Shell, Registrar
Michael Williams, Director, School of Nursing

FROM: Rhonda Longworth, Associate Vice-President for Academic Programming and Services

SUBJECT: **Doctor of Nursing Practice (new graduate program)**

DATE: April 23, 2015

The attached request from the School of Nursing and the College of Health and Human Services for a new graduate program, **Doctor of Nursing Practice**, is approved.

The effective date will be determined following consideration by the Academic Officers Committee, Presidents Council, State Universities of Michigan, the Eastern Michigan University Board of Regents, and the Higher Learning Commission.

If you have any questions, please contact Evan Finley, Course and Program Development (487-8954, efinley2@emich.edu).

Attachment: New Graduate Program Proposal

cc:
Kim Schatzel, Provost and Vice-President of Academic and Student Affairs
Jeffrey D. Kentor, Associate Provost and Vice President of Graduate Studies and Research
Ronald Flowers, Chair, Graduate Council
Murali Nair, Dean, College of Health and Human Services
Susan Booth, Chair, Academic Development Committee, Graduate Council
Sandy Norton, President, Faculty Senate
Julie Knutson, Director, Extended Programs
Ramona Milligan, Coordinator, Registration
Carol Evans, Transfer Equivalency Coordinator, Records & Registration
Ann Richards, Assistant Director, Admissions Processing
Mary Butkovich, Halle Library
Bin Ning, Assistant Vice President and Executive Director, IRIM
Sherry Bumpus, School of Nursing
Angela Lukomski, School of Nursing
Original, Catalog Folder

October 23, 2014

Dear Colleagues:

The faculty and staff of the School of Nursing is pleased to introduce this proposal for the Doctorate of Nursing Practice (DNP) degree at Eastern Michigan University. The DNP is considered the terminal degree for nurses in advanced practice *clinical* roles within our profession. This proposal has been thoughtfully considered, critiqued, revised, and approved by the faculty within the School of Nursing as a post-baccalaureate degree. It is our desire, as a School, to advance clinical practice through the advanced educational preparation of nurses and thereby the health of our communities.

The proposed curriculum plan uses our current graduate courses with only two new courses added at the 500-600 level. All 800 level courses proposed are new courses. The proposed plan of study for this 84 credit DNP program includes the following courses:

Advanced Practice Clinical Core Courses (24 cr):

NURS 500: Advanced Pathophysiology (3 CH)
NURS 502: Advanced Health Assessment (3 CH)
NURS 505: Health Status Trends and Health Care Delivery Systems (3 CH)
NURS 506: Nursing Theory for Practice and Research (3 CH)
NURS 606: Advanced Practice Nursing Role Development (3 CH)
NURS 608: Health Promotion and Disease Prevention (3 CH)
NURS 610: Advanced Pharmacology (3 CH)
NURS 640: Research for Evidence Based Nursing Practice (3 CH)

Clinical Courses: Adult-Gerontology Health Courses (19 cr):

NURS 653/664: Advanced Adult-Gerontology Nursing I (5 credits)
NURS 663/666: Advanced Adult-Gerontology Nursing II (5 credits)
NURS 668/669: Practicum in Advanced Adult-Gerontology (6 credits
NURS 691: Advanced Practice Registered Nurse Capstone (3 CH)
　　**NURS 653, 663, 668 are taken by students pursuing a clinical nurse specialist practice
　　**NURS 664, 666, 669 are taken by students pursuing a nurse practitioner practice

> These courses are the 500 & 600 level courses covered in the MSN Program Revision Proposal. Submitted at this time as well.

DNP Courses (41):

NURS 810: Introduction to Doctoral Studies and Nursing Science (3 CH)
NURS 830: Quality and Safety Across Settings (3 CH)
NURS 851: Advanced Nursing Research 1: Design and Methods (3 CH)
NURS 840: Epidemiology and Health Disparity in Health Systems, for Advanced Nursing Practice (3 CH)
NURS 852: Advanced Nursing Research II: Data Management and Analysis (3 CH)
NURS 891: Doctorate of Nursing Practice Scholarly/Capstone Project I: Proposal Development (3 CH)
NURS 860: Health Policy & Advocacy for Health Care Professionals (3 CH)
NURS 831: Leadership for Advance Practice Nurses (3 CH)
NURS 892: Doctorate of Nursing Practice Scholarly/Capstone Project II: Project Development (2 CH)
NURS 870: Health Care Delivery & Informatics: For Advance Practice Nurses (3 CH)
NURS 811: Nursing Education: Teaching, Learning, Evaluation and the Faculty Role (3CH)
NURS 880: Doctor of Nursing Practice Clinical Practicum (6 CH)
NURS 893: Doctorate of Nursing Practice Scholarly/Capstone Project III: Dissemination (3CH)
NURS 894: Doctorate of Nursing Practice Scholarly/Capstone Project: Continuous Enrollment

Each of these course proposals and attached syllabi have been developed by small groups of nursing faculty, reviewed by the School input committees (both Master's and Doctoral level), critiqued and revised and approved at our April 2014 faculty retreat. Throughout the 2014 Summer semester, the proposal was critiqued by Evan Finley and Chris Shell and revisions were made based on their expert advice. Subsequently, the proposal was reviewed once again by the Master's committee and the entire faculty at the October 3, 2014 faculty meeting. A re-vote for the proposal and each course approval was taken based on these revisions (votes are noted in the attached materials).

While this program is a post-baccalaureate program, applicants with a current MSN degree, after review and analysis of their prior coursework, may be eligible to start courses at the doctoral level (800 level courses) to receive the DNP degree. Additionally, a unique feature of this program, is that students upon completion of all 500 and 600 level courses are eligible to sit for national certification as either a nurse practitioner or clinical nurse specialist and an MSN degree can be conferred at that time as well.

Lastly, simultaneous to this DNP proposal, the School of Nursing faculty took the opportunity to review and revise our current MSN courses and degree offerings. Based on advice from Chris Shell and Evan Finley, we are proposing the discontinuation of our current MSN program to be replaced by 3 MSN degree programs. These changes are consistent with the changes occurring in our discipline, but also increase our flexibility in program revisions in the future.

I, along with my faculty, are available for any questions about this proposal. We are excited at this opportunity and look forward to your review.

Sincerely,

Michael L. Williams, PhD, RN, CCRN, CNE
Director & Associate Professor
734-487-2070
michael.williams@emich.edu

Form	Course #	Title	Program			Course						
			Revision	Phase Out	New	Course #	Title	Credit Hours	Description	Prerequisites	Restrictions	Syllabus Inc.
New Program		Doctorate of Nursing Practice / NUR/DNP-HH			X							
New Course	NURS 810	Introduction to Doctoral Studies and Nursing Science				X	X	X	X	X	X	X
New Course	NURS 811	Nursing Education: Teaching, Learning, Evaluation and the Faculty Role				X	X	X	X	X	X	X
New Course	NURS 830	Quality & Safety Across Settings				X	X	X	X	X	X	X
New Course	NURS 831	Leadership for Advanced Practice Nurses				X	X	X	X	X	X	X
New Course	NURS 840	Epidemiology and Health Disparity in Health Systems for Advanced Nursing Practice				X	X	X	X	X	X	X
New Course	NURS 851	Advanced Nursing Research 1: Design and Methods				X	X	X	X	X	X	X
New Course	NURS 852	Advanced Nursing Research 2: Data Management and Analysis				X	X	X	X	X	X	X
New Course	NURS 860	Health Policy & Advocacy for Health Care Professionals				X	X	X	X	X	X	X
New Course	NURS 870	Health Care Delivery & Informatics: For Advanced Practice Nurses				X	X	X	X	X	X	X
New Course	NURS 880	Doctor of Nursing Practice Clinical Practicum				X	X	X	X	X	X	X
New Course	NURS 891	Doctorate of Nursing Practice Scholarly/Capstone Project I: Proposal Development				X	X	X	X	X	X	X
New Course	NURS 892	Doctorate of Nursing Practice Scholarly/Capstone Project II: Project Development				X	X	X	X	X	X	X
New Course	NURS 893	Doctorate of Nursing Practice Scholarly/Capstone Project III: Completion/Dissemination				X	X	X	X	X	X	X
New Course	NURS 894	Doctorate of Nursing Practice Scholarly/Capstone Project II: Continuous Enrollment				X	X	X	X	X	X	X

1

PROPOSAL FOR NEW DEGREE PROGRAMS

Use this outline to prepare proposals for new programs, including undergraduate majors and minors and graduate majors. Proposals should be submitted in narrative form, organized according to the following outline. Guidelines for submitting such proposals are on the following pages.

PROPOSED PROGRAM NAME:___DOCTOR OF NURSING PRACTICE_____

DEGREE:__DOCTOR OF NURSING PRACTICE____REQUESTED START DATE_____FALL 2016_____

DEPARTMENT(S)/SCHOOL(S):____NURSING_____COLLEGE(S):COLLEGE OF HEALTH & HUMAN SERVICES

CONTACT PERSON: SHERRY BUMPUS/ANGELA LUKOMSKI__CONTACT PHONE: 487-2779/487-0045

CONTACT EMAIL:_____SBUMPUS2@EMICH.EDU/ALUKOMSK@EMICH.EDU__

Purpose: The purpose of this new program proposal is to seek approval to develop and offer a new doctoral degree in nursing. This program will provide the necessary content, skills, and clinical experience for Advanced Practice Registered Nurses to earn their Doctor of Nursing Practice (DNP) credential.

Description:

The Doctor of Nursing Practice (DNP) program prepares advanced practice nurses with the knowledge, skills and attributes necessary for accountable and comprehensive nursing practice. With the increasing scope of clinical scholarship in nursing and the growth of scientific knowledge, doctoral level education is highly recommended for advanced nursing practice in the clinical setting. The DNP curriculum includes content which enables the student to conduct complex diagnostic and treatment modalities, employ sophisticated informatics and decision-making technology, and integrate in-depth knowledge of bio-physical, psychosocial, behavioral, and organizational sciences. The DNP program will accentuate student development as an expert clinician with an emphasis on leadership and education (at both the organizational and academic level), service and skills that will translate into improved health care.

The American Association of Colleges of Nursing (AACN) is the national organization for graduate nursing education programs. AACN works to establish quality standards, by which programs are evaluated and initial accreditation or re-accreditation is granted based on the quality in which the standards are met. These standards are meant to guide and improve nursing education, evaluate the effectiveness of the program, improve health care, and promote support of graduate education, research, and nursing practice. AACN is the accreditation organization for over 500 schools of nursing including Eastern Michigan University.

In 2003, an AACN organized task force of professional nursing organizations and other healthcare disciplines drafted and approved the initial DNP position statement. Broadly, this task force defined the need and roles for two distinct doctoral degrees within nursing: 1). The traditional research focused Ph.D. and 2). The clinically focused DNP. In 2004, AACN endorsed the development of the practice doctorate, Doctor of

Nursing Practice (DNP), as the terminal degree for nurses in advanced clinical practice roles. These roles include; clinical nurse specialist (CNS), nurse practitioners (NP), certified nurse anesthetists (CRNA), certified nurse midwives (CNM).

DNP applicants will be able to enter the program either post-baccalaureate or post-master level. Students entering post-baccalaureate will be more recent graduates who wish to complete both their advanced practice training and earn their DNP at EMU. Post-Master's applicants may qualify to have Terms 1-6 waived if they already have a masters degree in Nursing as advance practice CNSs, NPs, CRNAs, and CNMs. Individualized plans of study will be developed after a "Gap Analysis" for any applicants in between. Both options are in high demand as the result of the AACN mandate requiring a DNP as the entry level for advanced nursing practice by 2015. EMU School of Nursing currently offers a masters degree with options to prepare students as either clinical nurse specialists or nurse practitioners (beginning fall 2014). This DNP program was designed in concert with our revised master's degree program and will provide the additional doctoral content in research, nursing theory, leadership, informatics, health systems management, health policy, and education necessary for achieving practice doctorate essentials and competencies.

Goals, Objectives, Student Learning Outcomes:

State the general philosophy and intent of the proposed program

The goal of the DNP program is to prepare nurses for advanced practice roles as clinical scholars, and educators. These expert clinicians will be prepared to translate research into evidence-based practice, assess and manage patient outcomes, and transform health care systems to ensure patient safety. DNP graduates will be leaders in healthcare policy and advocacy, and will be setting national guidelines for standards of practice, research, and education toward improve health outcomes.

List the goals, objectives, and student learning outcomes as specifically as possible. These should be stated in such a way as to facilitate assessment of whether or not they are being met.

DNP Program Objectives

1. Integrate theory and knowledge from the nursing sciences and bio-physical, psychosocial, behavioral, and organizational sciences as a foundation for the highest level of advanced nursing practice.
2. Integrate teaching methodologies, curriculum design and development, and program evaluation into educational services at the organizational (healthcare and/or academic) level.

3. Develop standards of advanced practice nursing to deliver culturally competent care for individuals, populations and systems.

4. Develop and advocate for health care policy addressing issues of social justice and equity.

5. Support leadership, critical thinking and effective therapeutic communication skills to design, evaluate, and improve the implementation of quality advanced practice nursing services.

6. Lead and support inter-professional development/collaboration to facilitate and improve desired health outcomes for individuals, populations, and systems.

7. Integrate health care informatics and an evidenced base practice approach in clinical scholarship to critically evaluate, design, and implement health care services for individuals, systems, and populations.

8. Investigate the epidemiological, financial, social, and political influences in health care that impacts the advanced practice nurse role and health care outcomes.

DNP Learning Outcomes

1. Demonstrate safe and high quality patient care in a defined area of advanced nursing practice.

2. Integrate nursing theory and science with the bio-physical, psychosocial, behavioral, and organizational sciences as the foundation for innovations in advanced nursing practice.

3. Use analytical methods to critically evaluate research and scientific literature in order to translate evidence into standards of care.

4. Implement standards of care and develop effective strategies to ensure safety and quality health care for individuals, families and populations.

5. Design, direct, and evaluate quality improvement methodologies to promote safe, effective, and equitable patient centered care.

6. Evaluate information systems and patient care technology, considering related ethical, regulatory and legal issues, to improve patient care and healthcare systems.

7. Demonstrate collaborative and leadership skills on intra-professional and inter-professional teams to improve effective communication, enhance patient outcomes, and create a positive change in complex health care delivery systems.

8. Design, implement, and evaluate teaching methodologies at the healthcare organization and academic levels.

More specifically, DNP program/curricula are designed so that all students attain DNP competencies that define advanced clinical nursing practice. These include:

Scientific Foundation Competencies

1. Critically analyzes data and evidence for improving advanced nursing practice.

2. Integrates knowledge from the humanities and sciences within the context of nursing science.

3. Translates research and other forms of knowledge to improve practice processes and outcomes.

4. Develops new practice approaches based on the integration of research, theory, and practice knowledge

Leadership Competencies

1. Assumes complex and advanced leadership roles to initiate and guide change.

2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policymakers) to improve health care..

3. Demonstrates leadership that uses critical and reflective thinking.

4. Advocates for improved access, quality and cost effective health care.

5. Advances practice through the development and implementation of innovations incorporating principles of change.

6. Communicates practice knowledge effectively both orally and in writing.

7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus.

Quality Competencies

1. Uses best available evidence to continuously improve quality of clinical practice.

2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care.

3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.

4. Applies skills in peer review to promote a culture of excellence.

5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality.

Practice Inquiry Competencies

1. Provides leadership in the translation of new knowledge into practice.

2. Generates knowledge from clinical practice to improve practice and patient outcomes.

3. Applies clinical investigative skills to improve health outcomes.

4. Leads practice inquiry, individually or in partnership with others.

5. Disseminates evidence from inquiry to diverse audiences using multiple modalities.

6. Analyzes clinical guidelines for individualized application into practice.

Technology and Information Literacy Competencies

1. Integrates appropriate technologies for knowledge management to improve health care.

2. Translates technical and scientific health information appropriate for various users' needs.

2a). Assesses the patient's and caregiver's educational needs to provide effective, personalized health care.

2b). Coaches the patient and caregiver for positive behavioral change.

3. Demonstrates information literacy skills in complex decision making.

4. Contributes to the design of clinical information systems that promote safe, quality and cost effective care.

5. Uses technology systems that capture data on variables for the evaluation of nursing care.

Policy Competencies

1. Demonstrates an understanding of the interdependence of policy and practice.

2. Advocates for ethical policies that promote access, equity, quality, and cost.

3. Analyzes ethical, legal, and social factors influencing policy development.

4. Contributes in the development of health policy.

5. Analyzes the implications of health policy across disciplines.

6. Evaluates the impact of globalization on health care policy development.

Health Delivery System Competencies

1. Applies knowledge of organizational practices and complex systems to improve health care delivery.

2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering.

3. Minimizes risk to patients and providers at the individual and systems level.

4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.

5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.

6. Analyzes organizational structure, functions and resources to improve the delivery of care.

7. Collaborates in planning for transitions across the continuum of care.

Ethics Competencies

1. Integrates ethical principles in decision-making.

2. Evaluates the ethical consequences of decisions.

3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.

Independent Practice Competencies

1. Functions as a licensed independent practitioner.

2. Demonstrates the highest level of accountability for professional practice.

3. Practices independently managing previously diagnosed and undiagnosed patients.

3a). Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end of life care.

3b). Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.

3c). Employs screening and diagnostic strategies in the development of diagnoses.

3d). Prescribes medications within scope of practice.

3c). Manages the health/illness status of patients and families over time.

4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.

4a). Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.

4b). Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.

4c). Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care.

4d). Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care.

How do stated goals, objectives, and student learning outcomes reflect current departmental/school, college and divisional goals and university strategic planning directions?

How do stated goals and objectives compare with those of the professional community in the area of study proposed?

Currently, health care reform focuses largely on cost containment, access to quality healthcare and prevention. In the U.S. there are presently more than 6,000 designated Health Care Professional Shortage Areas (HCPSA) and this number is expected to rise (U.S. DHHS, 2014). Over the next 10 years demand for primary care services is expected to continue to outpace supply and the aging baby boomer population will account for approximately 81% of this change (U.S. DHHS, 2013). In fact, by the year 2020, it is projected that facilities caring for the elder population alone will need approximately 25,000 nurses with advanced

preparation to care for the Adult/Gerontological population. Nursing's blend of inter-disciplinary healthcare that uses a primary care preventative approach will offer a solution that is consistent with the the Affordable Healthcare Act (2010). Advanced Practice Registered Nurses (APRNs) have long been successful in providing cost-effective, quality care, and have documented increased patient satisfaction levels with improved health outcomes.

As the School of Nursing moves forward to train the next generation of health care providers, we (EMU SON) acknowledge the recommendation coming forth that will require APRNs to have a doctoral degree in order to practice in their respective roles. "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" (AACN: Fact Sheet, 2013). Furthermore, the DNP program includes coursework that prepares the graduate with additional preparation in the science of pedagogy to augment their ability to transmit the science and profession of nursing in academia. This addresses the need for more doctorally prepared nursing faculty as the profession is currently faced with a shortage. According to the AACN, "faculty shortages at nursing schools across the country are limiting student capacity at a time when the need for nurses continues to grow. Budget constraints, an aging faculty, and increasing job competition from clinical sites have contributed to this emerging crisis" (AACN: website, 2013).

How do stated goals and objectives reflect current departmental, college, and divisional goals, the outcome of the department's most recent program review, and university strategic planning?

The Doctorate of Nursing Practice program at EMU is in alignment with the University's mission and values of innovation and supports the current strategic plan for the College of Health and Human Services (CHHS). The DNP program is an example of an innovative program that meets the market demands of our surrounding community and is demonstrated by the careful design that addresses the current needs of society. The DNP program is preparing nurses to improve access to quality care, increase the number of primary health care providers, and increase access to quality healthcare which is the main objective in the Affordable Health Care Act (2010). More specifically, the DNP program will prepare nurses to assume clinical and leadership roles in both academia (addressing the nursing faculty shortage) and a variety of clinical settings. The program objectives and student learning outcomes in the DNP program promote inter-professional collaboration and research which is consistent with the strategic plan within CHHS. Our

students will be working in healthcare systems as part of collaborative teams as well as working with other students within CHHS.

The School of Nursing (SON) is growing. One of our largest growth areas is our RN to BSN program which is adding new sites each year. While many of these BSN completion students are furthering their education to maintain employment, more are completing their baccalaureate degree as a requirement toward advanced practice. These graduates are seeking out schools with DNP programs to fufill their desire in becoming an APRN. Our current undergraduate programs will therefore provide a pool of students to the post-BSN to DNP program. Further, our MSN program has recently been revised to add a Primary Care Adult-Gerontology Nurse Practitioner program in addition to our Adult-Gerontology Clinical Nurse Specialist program. Students completing these programs will be eligible to fill seats in our post-Masters DNP program. Students at both of these levels have been asking, and in some circumstances waiting, for EMU's DNP program. We are fortunate that the School of Nursing has a strong alumni base who have verbalized that they prefer to complete their doctoral education at EMU.

Program:

The EMU DNP will be a four-year post-BSN program. The curriculum includes foundational course work that culminates into a clinical practicum (DNP Practicum) and dissertation equivalent doctoral project. Students must have a Bachelor of Science in Nursing from an accredited school of nursing (or complete Bridge requirements if RN with other baccalaureate degree) and be eligible for a Michigan Nursing License. The post-BSN track is designed for both full-time and part-time study. Full-time study consists of 6-9 credit hour semesters and part-time study consists of 3-4 credit semesters. However, students completing the full post-BSN curriuculum will be encouraged to attend full time through their 600 level course work. Separating the foundational 3 P courses (Advanced Health Assessment, Advanced Pathophysiology and Advanced Pharmacology) and associated clinical content is inadvisable for successful board certification. We however recognize, that some students may have reason to reduce a semester load on occaision and this will be determined on a case-by-case basis. Full-time or part time study for is available for applicants who already have a Master of Science in Nursing from an accredited school of nursing and are eligible for certification as a CNS, NP, CRNA, or CNM, and are also eligible for a Michigan Nursing Specialty License. For these individuals Terms 1-6 will be waived (as "competency met") and applicants may choose either full or part-time study. Applicants who fall in between post-BSN and post-MSN requirements will require a "Gap Analysis" to be conducted by the program coordinator/or the Associate Director of Graduate Programs prior to enrollment. The minimum number of credits required to complete this program is 41 credit hours. This

DNP program will be offered as a hybrid model where classes will be available both online and in seats and through alternative designs (such as: one week immersion or extended weekend programing). Students will matriculate into the appropriate course sequence for full or part time enrollment. These courses include:

DNP PROGRAM

Advanced Practice Clinical Core Courses (24 cr):
NURS 500:   Advanced Pathophysiology (3 CH)
NURS 502:   Advanced Health Assessment (3 CH; 20 hours of precepted clinical practice)
[1]NURS 505:   Health Status Trends and Health Care (3 CH)
NURS 506:   Nursing Theory for Practice and Research (3 CH Delivery Systems (3 CH)
NURS 606:   Advanced Practice Nursing Role Development (3 CH)
[2]NURS 608:   Health Promotion and Disease Prevention (3 CH)
[3]NURS 611:   Advanced Pharmacology (3 CH)
NURS 640:   Research for Evidence Based Nursing Practice (3 CH)

Clinical Courses: Adult-Gerontology Health Clinical Nurse Specialist (19 cr):
NURS 653:   Advanced Adult-Gerontology Nursing I - CNS (5 credits; includes 120 hours of precepted clinical practice)
NURS 663:   Advanced Adult-Gerontology Nursing II - CNS (5 credits; includes 120 hours of precepted clinical practice)

NURS 668:   Practicum in Advanced Adult-Gerontology for CNS Track (6 credits; includes 240 hours of precepted clinical practice)
[4]NURS 691:   Advanced Practice Registered Nurse Capstone (3 CH)

OR

Clinical Courses: Adult-Gerontology Health Primary Care Nurse Practitioner (19 cr):
NURS 664:   Advanced Adult-Gerontology Health Nursing I - NP (5 credits; includes 120 hours of precepted clinical practice)
NURS 666:   Advanced Adult-Gerontology Health Nursing II - NP (5 credits; includes 120 hours of precepted clinical practice)
NURS 669:   Practicum in Advanced Adult-Gerontology Health Nursing III – NP (6 credits; includes 240 hours of precepted clinical practice and capstone project)
[5]NURS 691:   Advanced Practice Registered Nurse Capstone (3 CH)

---

[1] NURS 505 is currently NURS 605 in the catalog. This course number change is being submitted along with a program revision for the Nursing MSN program.
[2] NURS 608   Health Promotion and Disease Prevention Capstone is being submitted as a new course along with a program revision for the Nursing MSN program and is not currently in the catalog.
[3] NURS 611 is currently NURS 510 in the catalog. This course number change is being submitted along with a program revision for the Nursing MSN program.
[4] NURS 691 Advanced Practice Registered Nurse Capstone is being submitted as a new course along with a program revision for the Nursing MSN program and is not currently in the catalog.
[5] NURS 691 Advanced Practice Registered Nurse Capstone is being submitted as a new course along with a program revision for the Nursing MSN program and is not currently in the catalog.

Students who complete the 43 credit hours and 500 clinical practicum hours in good graduate standing for either the CNS or the NP program will apply to graduate from the MSN program at the end of Term 5 (or equivalent part time) and graduate with a MSN in the end of Term 6 (or part time equivalent). Transcripts will reflect the conferral of an MSN degree at this point. Students will continue to complete the remainder of their doctoral work within the DNP program Terms 7-12 and will be required to supply evidence of sitting for their certification exam by the end of Term 9 (or part-time equivalent).

Further, the above 43 credits in Advanced Practice Clinical Core and Practicum courses (500-600 level) will be waived (as "competency met) for students who have a Master of Science in Nursing from an accredited school of nursing and are eligible for certification as a CNS, NP, CRNA, or CNM and eligible for a Michigan Nursing Specialty License. These students wil be required to supply evidence of sitting for their certification exam by the end of Term 9 (or part-time equivalent). Students may also claim up to 500 practicum hours from their MSN program toward the 1000 practicum hours necessary to be awarded a DNP.

DNP Courses (41):
NURS 810: Introduction to Doctoral Studies and Nursing Science (3 CH)
NURS 830: Quality and Safety Across Settings (3 CH)
NURS 851: Advanced Nursing Research 1: Design and Methods (3 CH)
NURS 840: Epidemiology and Health Disparity in Health Systems, for Advanced Nursing Practice (3 CH)
NURS 852: Advanced Nursing Research II: Data Management and Analysis (3 CH)
NURS 891: Doctorate of Nursing Practice Scholarly/Capstone Project I: Proposal   Development (3 CH)
NURS 860: Health Policy & Advocacy for Health Care Professionals (3 CH)
NURS 831: Leadership for Advance Practice Nurses (3 CH)
NURS 892: Doctorate of Nursing Practice Scholarly/Capstone Project II: Project Development (2 CH)
NURS 870: Health Care Delivery & Informatics: For Advance Practice Nurses (3 CH)
[6]NURS 811: Nursing Education: Teaching, Learning, Evaluation and the Faculty Role (3CH)
[7]NURS 880: Doctor of Nursing Practice Clinical Practicum (6 CH)
NURS 893: Doctorate of Nursing Practice Scholarly/Capstone Project III: Completion/Dissemination (3CH)
[8]NURS 894: Doctorate of Nursing Practice Scholarly/Capstone Project: Continuous Enrollment

---

[6] NURS 811 can be waived fro students who satisfactorily completed **both** NURS620 and NURS622

[7] NURS 880 is a clinical practicum. Students are required to complete 6 credit hours of NURS 880 and a total of 500 practicum hours within these credits. NURS 880 sections 001, 002, 003, 004 will correspond to 1, 2, 3, or 4 credit hours. Students will elect to register for the number of credits each term that is appropriate for where they are at in developing their Scholarly/Capstone project and will be determined in conjunction with their faculty advisor.

[8] NURS 894 is not a separate course, nor is it a program requirement. It is for 1 credit continuous enrollment. Any student who does not complete NURS 893 in the semester enrolled will be required to register for NURS 894. This may be repeated a maximum of 3 consecutive semesters after which students will be required to repeat NURS 893 provided that they are within the time restriction required by Graduate policy.

DNP Full-time Program Plan

Term 1	Term 2	Term 3
NURS 500 Advanced Pathophysiology (3) NURS 506 Nursing Theory (3)	NURS 502 Advanced Health Assessment (3) NURS 606 Advanced Practice Role Development (3)	NURS 611 Pharmacology for Advance Practice Nurses (3) NURS 505 Health Status and Trends (3)

Term 4	Term 5 *(Apply for MSN graduation)*	Term 6 *(MSN Graduation and degree conferral)*
NURS 640 Evidence Based Practice (3) NURS 653/664 Advanced Clinical Course I CNS or NP (5) [1]	NURS 608 Health Promotion and Disease Prevention (3) NURS 663/666 Advanced Clinical Course II CNS or NP (5) [1]	NURS 691 Advanced Practice Registered Nurse Capstone CNS and NP (3) NURS 668/669 Advanced Clinical Course III CNS or NP (6) [1]

Term 7 *(Start of DNP for students entering with a MSN, Dept. permission required for all others).*	Term 8	Term 9
NURS 810 Intro to Doctoral Studies (3) NURS 830 Quality & Safety (3)	NURS 851 Adv Nurs Research (3) NURS 840 Epidemiology/Health Disparity in the U.S and Global (3)	NURS 852 Adv Nurs Research (3) NURS 891 Capstone Project I: Proposal Development (3)

Term 10	Term 11	Term 12
NURS 860 Health Policy & Advocacy (3) NURS 831 Leadership (3) NURS 892 Capstone Project II: Project Development (2)	NURS 870 Health Systems Theory, Informatics, Policy & Practice (3) NURS 880 DNP Practicum (1-6) [2,3]	NURS 811 Nursing Education: The Faculty Role (3) NURS 893 Capstone project III: Dissemination (3)

[1]MSN candidates must have a minimum of 500 clinical hours to apply for national certification exams.
[2]DNP candidates must have 1000 practicum hours for graduation (500 may be applied from their MSN program).
[3]DNP Practicum hours may be taken in any term for a total of 6 CH completed by end of program.

Outline of Typical Program

The DNP program plan is outlined above in table form. Further, a detailed timeline is included in Appendix A that describes term-by-term, coursework and program expectations for clarity. This timeline will be provided upfront as part of the student handbook. As students begin work on their DNP project this reference will ideally facilitate time management in order to foster success in the program and help the student complete coursework and their final DNP project in a timely manner. Program level student learning outcomes for Terms 7-12 (as listed above in Section A) are aligned with the AACN DNP Essentials. Similarly, learning outcomes for Terms 1-6 satisfy role related competencies for NP or CNS Advanced Nursing Practice. Detailed mapping of both accreditation essentials and role competencies across the full program are available upon request.

Location of Program

The DNP program will be in the School of Nursing (SON) and the College of Health and Human Services. The School of Nursing currently hosts it programs (BSN; traditional, RN to BSN and Second Degree and MSN program) in a variety of on campus and off campus/satellite sites to meet the needs of our students. The PhD program is on campus. The DNP program may be offered both on EMU's main campus as well as at our satellite Livonia or Brighton sites. These sites will be determined on a course-by-course basis. Courses that have a seminar format may be considered for all day or weekend alternate delivery at one of our satellite sites where students will have access to surrounding resources (i.e. hotels and restaurants) for longer daytime coursework and parking will not be an issue. This type of flexibility will be essential to accommodate the demographic demands of our students.

Undergraduate Programs Only

Not applicable

Graduate Programs Only

All courses for the DNP program will be 500 - 800 level courses. Advanced Practice role course work will be a combination of 500 and 600 level courses (Terms 1-6 or part time equivalent) and post-APRN courses will be at the 800 level (Terms 7-12 or part time equivalent). Courses will be a mix of lecture, hybrid, seminar, clinical and community application. Further, DNP students will be required to complete a capstone clinical practicum (DNP Residency) and dissertation equivalent doctoral project (capstone) appropriate for the degree and demonstrating translational research at the patient, organizational, community, and/or policy level.

Adequate Research

Scholarship and research are the hallmarks of doctoral education. Although basic research has been viewed as the first and most essential form of scholarly activity, the DNP program will have a strong emphasis on applied research. This application involves the translation of research into practice and the dissemination and integration of new knowledge into clinical practice (core competency of the DNP graduate and DNP student learning outcome). The DNP curriculum incorporates a two semester Evidence-Based and Translational Research experience that parallels the Scholarly/Capstone work for proposal development, implementation, evaluation and dissemination. Students will be able to take an advanced quantitative methods or qualitative methods courses as electives beyond the required course of study if they choose. The

Introduction to Doctoral Studies course encompasses nursing theory, philosophy and theory development. This course will provide essential background for students to apply a theoretical foundation for research programs. The last two semesters will require a formal research project appropriate for each students identified focus area that will culminate in an oral defense and written document. For example, some projects involving political advocacy or program development may lend themselves to nontraditional research programs at the discretion of the committee. Refer to Appendix C for the "DNP Scholarly/Capstone Project and Practicum Definitions."

Admission:

Criteria for Applicants

Earned BSN from an accredited School of Nursing (Applicants holding an R.N. license with a bachelor's in another discipline may apply for a conditional admission).
GPA 3.0 or above on a 4.0 scale
Resume or Curriculum Vitae
Current licensure as a registered nurse in the state in which practice will occur (Applicants who are eligible for a license may apply for a conditional admission)
Transcripts from all post-secondary institutions
Three letters of reference pertaining to academic ability, professional competency and personal character.
Personal statement
Writing sample
Telephone or in-person interview may be a part of the admission process

Additional Criteria for Terms 1-6 Waiver

- Earned master's in nursing in an advanced nursing practice specialty from a nationally accredited CCNE or NLNAC program or master's degree from a regionally accredited institution in a health related profession (Nurse Practitioner (NP), Clinical Nurse Specialist (CNS), Certified Registered Nurse Anesthetist (CRNA), Certified Nurse Midwife (CNM).
- License and Certification as an advanced practice nurse in the state in which practice will occur (Applicants who are eligible for license and Certification may apply for a conditional admission).
- Partial Waiver may be granted for students in between (i.e. a transfer student from an outside institution midway through their MSN or DNP program) based on a "Gap Analysis."

Projections

Proposed timeline for implementation
Winter 2015 and Fall 2016

Enrollment
Initial enrollment: 20 (10 new MSN-prepared students into Term 7 *plus* 5-10 currently enrolled MSN students to transfer into DNP program)

Average number of students within 3 years: 15 – 20 students

Average number of graduates per year: 15-20 students

Anticipated Directions

As described above, we anticipate that within 3-5 years of implementation we may expand the role to include clinical nurse leaders and would require new role competency courses and clinical practicums.

Scheduling Needs

The current MSN program is housed off campus in Livonia and the PhD program is offered on campus. The School of Nursing (SON) has been active in implementing online technology for graduate education. It is anticipated that this will continue and the DNP program will be a combination of hybrid courses with in seat courses primarily on main campus with the option to move off campus per students needs.

Justification/Rationale
Why Move to the DNP?

The changing demands of the United States' healthcare environment require the highest level of scientific knowledge and clinical expertise to assure quality patient outcomes. The Institute of Medicine, Joint Commission, Robert Wood Johnson Foundation, and other authorities have called for the "re-conceptualizing" of educational programs to better prepare today's healthcare professionals. Many factors currently building momentum for change in nursing education 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, shortages of doctorate-prepared nursing faculty, and increasing educational expectations for the preparation of other members of the healthcare team (AACN, 2013).

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 also serve as clinical nursing 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 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 program are encouraged to use this document, which defines the curricular

elements and competencies that must be present in a practice doctorate in nursing. Note: the DNP Proposal put forth by the School of Nursing (SON) is based on this document.

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 a MSN into a DNP program, preparing faculty to teach in DNP programs, addressing regulatory, licensure, accreditation, and certification issues, and collecting evaluation data. Schools nationwide that have implemented a DNP program are reporting sizable and competitive student enrollment (AACN, 2013). 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. According to the AACN position statement, APRNs will need to have a practice doctorate for national certification. According to the American Association of Colleges of Nursing (AACN: Fact Sheet, 2013) some of the rationales for this movement are:

In many institutions, advanced practice registered nurses in master's-degree programs already carry a credit load equivalent to doctoral degrees in the other health professions.

DNP curricula build on traditional master's programs by providing education 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.

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.

Some of the many factors building momentum for change in nursing education at the graduate level include: rapid expansion of knowledge underlying practice; increased complexity of patient care; national concerns about the quality of care and patient safety; shortage of nursing personnel which demands a higher level of preparation for leaders who can design and assess care; shortage of doctorally-prepared nursing faculty; and increasing educational expectations for the preparation of other members of the healthcare team.

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.

According to the 2011 salary survey conducted by *ADVANCE for Nurse Practitioners* magazine, DNP-prepared NPs earned $8,576 more than master's-prepared NPs. 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, 116 DNP programs have been accredited by CCNE.

Current DNP Statistics

According to the AACN (2013),

217 DNP programs are currently enrolling students at schools of nursing nationwide, and an additional 97 DNP programs are in the planning stages.

DNP programs are now available in 40 states plus the District of Columbia. States with the most programs (more than 5) include Florida, Illinois, Massachusetts, Minnesota, New York, Ohio, Pennsylvania, and Texas.

From 2011 to 2012, the number of students enrolled in DNP programs increased from 9,094 to 11,575. During that same period, the number of DNP graduates increased from 1,595 to 1,858.
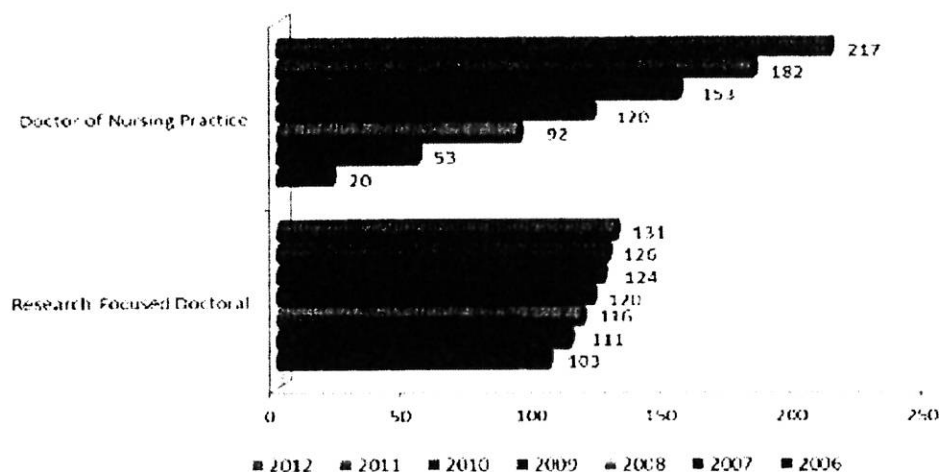
(AACN: Fact Sheet, 2013)

Doctoral of Nursing Practice Program in Michigan

Presently there are 9 DNP programs in Michigan (http://www.aacn.nche.edu/dnp/program-schools#MI):

Grand Valley State University

Madonna University

Michigan State University

Oakland University

Saginaw Valley State University

University of Detroit Mercy

University of Michigan

University of Michigan-Flint

Wayne State University

The EMU program will be different in a number of ways. First, our DNP program will be offered in a variety of traditional and non-traditional methods including hybrid and potentially extended weekend offerings. Second, our program is the only program explicitly developed to ensure timely progression through the Doctoral Scholarly Project with a 3-part series of courses aimed at providing continuous support for students to complete the process in a timely manner. Lastly, and consistent with the EMU mission, this program is the only program that incorporates a course in teaching methods and pedagogy. While DNPs are clinical leaders, many will hold faculty roles. In fact, the " American Association of Colleges of Nursing (AACN) is confident that a DNP faculty member will compete favorably with other practice doctorates in tenure and promotion decisions, as is the case in law, education, audiology, physical therapy, pharmacy, public policy, and administration, public health, and other disciplines. AACN data from 2011 show that doctoral students who also teach are just as likely to have a DNP as a PhD. This indicates that graduates of both types of doctoral programs are finding teaching positions" (http://www.aacn.nche.edu/dnp/faqs). Further, we believe that our program meets the needs of our current students who have indicated a strong desire to return to EMU for this degree.

Preparedness
Faculty Qualifications

Schools offering DNP programs should have faculty who are actively engaged in practice as an integral part of their faculty role (DNP Essentials). Active practice programs provide the same type of applied learning environments for DNP students as active research programs provide for PhD students. The School of Nursing faculty will focus on developing and providing avenues of research that represent knowledge development from original research as well as the application of research in practice. Faculty will individually and collaboratively engage in a learning environment that exemplifies rapid translation of new knowledge into practice and evolution of practice-based initiatives. At present we have 24 faculty with 17 faculty with doctoral degrees. More specifically we have 7 DNP prepared faculty. We were approved for 4 new tenure lines this year and will be seeking candidates who can teach in, build and sustain this program. Faculty curriculum vitae can be found in Appendix D. In addition, each student will be assigned a faculty advisor at the beginning of the program. Faculty will meet with the student and complete a plan of study and advise the student accordingly throughout the program. The faculty advisor will not necessarily be the student's chair or clinical mentor for the DNP project and practicum. Qualifications for teaching in the DNP

program will include faculty that are doctorally prepared, demonstrate expertise in advanced clinical practice, have an active research agenda, and expertise in the course(s) taught.

Library Resources

Presently with the addition of the MSN NP program, and the joint COE-Nursing doctoral program, along with resources associated with the Physician's Assistant Program we do not anticipate exorbitant library needs. Instead, we will likely need and seek materials that support not only the DNP program but other programs on campus and more specifically within CHHS. The School of Nursing has consulted with Elizabeth Bucciarelli to identify which resources/material would support student success in the DNP program. In additional to professional journals, electronic resources, and reference textbooks, the School of Nursing believes that the following three resources are imperative for our students and will prove useful in coursework and scholarly work.

Joann Briggs Institute and more specifically the *JBI Content Database.*
http://www.ovid.com/webapp/wcs/stores/servlet/content_landing_JBI_13051_-1_13151?cmpid=Home:Aspot1-JBIlanding

Clincal Key which is a point-of-care evidence based practice tool (replacement for *Up-to-Date*). This will prove invaluable for both graduate and doctoral nursing students as well as other practice disciplines across campus. https://www.clinicalkey.com/

Health and Psychosocial Instrumentation (HaPI). This is a resource where students would be able to locate survey tools easily that are consistent with their research interest and question(s)
http://bmdshapi.com/

In speaking with Ms. Bucciarelli, she has been very active in seeking resources for our students that are appropriate and fiscally responsible. See Appendix D for statement and budget (~$10,461.00) from Elizabeth Bucciarelli.

Facility Needs

We anticipate that in addition to classroom space we will require space in the Rackham skills laboratory and in the high fidelity simulation laboratory at St Joseph Mercy Hospital. Collaboration with the Physician Assistant's program is underway with negotiations of how to share space in the Rackham skills lab and the simulation lab for our DNP students (as applicable). Specifically, students completing the Advanced Practice Nursing portion of the curriculum (Terms 1-6) will need access to the simulation lab as part of their

Advanced Health Assessment course and clinical practicum courses that are required in their CNS and NP curricula.

Support Services

We anticipate that one additional Administrative Secretary/Coordinator may be needed to support this program. The additional clerical services will be needed to absorb the paperwork and organizational issues of a new program, the additional students, and managing clinical palcements.

Marketing

The primary source of students (initially) will be graduates from our own MSN program. We anticipate that those students will immediately fill the 10 seats in the first year of the program. In fact, we currently have students "waiting" for this program to be offered. With the new NP track starting and the daily inquiries our department receives about a DNP program, we believe that student recruitment will not be an issue and we can feed this program with our own students initially. The program can easily be advertised through our other programs (faculty advisors, classes, etc). We consistently have students who graduate from our BSN program and immediately apply to advanced practice nursing programs elsewhere. We recognize and arc cognizant to the fact that we want a diverse student body and one that reaches beyond own students and graduates. We will market this program via press releases, radio interviews on WEMU, EMU and CHHS internet home pages, mailings, social media, open houses, and conferences.

Undergraduate programs:

Not Applicable

Graduate Programs Only: Existing Programs

Enrollment in the SON's undergraduate program is expanding. Our traditional undergraduate track currently has 301 students and is steadily admitting 112 students each year (maximum number). Our RN to BSN program is experiencing tremendous growth with new sites being offered and we currently have 348 students in this BSN completion program. For many of these students the impetus for returning to school is to earn their BSN and then continuing on to become an APRN. Our MSN program currently has 48 students. These students have expressed an interest in the DNP program and as stated previously are "waiting for the DNP at EMU". With the Affordable Health Care Act (2010), enrollment in health insurance is growing and

the need for advanced practice nurses and more specifically primary care providers are needed to serve these patients. Our MSN program offers two such APRN tracks. In order to ensure expert clinicians, the recommendation is that APRNs be doctorally prepared to handle the complex needs and demands of healthcare. This DNP program is in alignment with the national trend and is in accordance with these recommendations coming for AACN.

Assessment/Evaluation

The DNP program will be evaluated as part of the EMU's general program evaluations and will follow those guidelines in gathering appropriate data. In addition, student assessment is built into the program. The student progress assessments provide additional measures of program success and are sources of information for program evaluation. The following components of the assessment plan include:

Program of study: All students will be assigned to an advisor who will assist in the development of a plan of study. The plan of study should be completed no later than the first semester of enrollment.

Identification of a research interest upon admission to the program. Students will need to identify a clear idea that they want to pursue and explore through research while in the program that culminates in their DNP project.

Annual review of student performance and participation in the community of scholars. All students will submit an annual review and one page reflection on their progress through the program to be reviewed by their academic advisor and, if necessary, a committee of doctoral faculty in the SON.

The SON's DPC committee is responsible for program evaluation of the DNP program. DPC will work in conjunction with the Associate Director of Graduate Studies and the SON program evaluation committee (PAC) to assess student competency at the end of the program and at specified intervals following graduation. Four surveys related to the program objectives that target DNP students, faculty of DNP graduates, and DNP Alumni, Colleagues and Employers will be used in these evaluations:

1) DNP End of Program Evaluation,

2) DNP Practice Inquiry Scale,

3) DNP Alumni survey, and

4) DNP Colleague Evaluation.

DPC will review data via an annual program report, assessing outcomes of students who complete the program against specific benchmarks, and when indicated, appoint work groups to address areas of desired curricular change.

Program Costs

22

The following budget describes the anticipated costs of the Proposed DNP program over the first five years of operation. Overall cost in the first five years are $360,731.00, $254,107.00, $176,147.00, $126,147.00, and $23,987.00 respectively for a grand total of $951,580.00 including all salaries, start-up costs, and expenses. Only costs related to the start-up and operation of the DNP program are reported. Current operation budgets for existing programs are anticipated to continue with modifications as warranted by enrollment and other factors. The budget describes the one-time costs and recurring costs for the program start-up. Recurring cost estimates (clerical support and faculty salaries) include adjustments for the anticipated cost of living increase and inflation. The budget assumes that the School of Nursing will continue both the Undergraduate at capacity and the Master's programs at current capacity with the opportunity to grow given the new Nurse Practitioner program. The revenue generated by the DNP program will grow considerably and with the high demand for this program, we anticipate that our enrollment will stay constant at 20 students[9] each year thus creating a sustainable program that will demonstrate profit in the first three years. Initial five-year projections demonstrate estimated cumulative revenue of $3,255,480.00 for a **profit of approximately $2,303,900.00** over this five-year period.

---

[9] We anticipate this program to be in high demand and hope to grow beyond our initial projection of 20 students/year.

Proposed <u>Cost</u> Budget for Doctor of Nursing Practice

Listed below is the projected five-year budget cycle for the DNP program. It lists personnel costs both annually and cumulatively (**in bold**) for the program.

Item	1st Year	2nd Year	3rd Year	4th Year	5th Year
New Tenure Track Faculty: Six new faculty with benefits (38.8%) will need to be hired in the first four years. Base salary (70k)	$194,320.00 **$194,320.00**	$194,320.00 **$388,640.00**	$97,160.00 **$485,800.00**	$97,160.00 **$582,960.00**	$0 **$582,960.00**
Summer1/Summer2 Pay: The Summer salary lines need to be adjusted by the following amounts to incorporate 22% of the AY base salary with benefits for the 4 new faculty	$30,800.00 **$30,800.00**	$30,800.00 **$61,600.00**	$0 **$61,600.00**	$0 **$61,600.00**	$0 **$61,600.00**
Associate Director Release Time: The Associate Director for the DNP program will receive 25% release time to manage the program	$18,987.00 **$18,987.00**	$18,987.00	$18,987.00	$18,987.00	$18,987.00
Replacement: Costs associated with DNP project release for doctoral faculty- a permanent adjustment in the 2 year.	$0 **S0**	$0 **S0**	$50,00.00 **$50,00.00**	$0 **$50,00.00**	$0 **$50,00.00**
Administrative Secretary: with benefits needs to be hired for clerical management of the program.	$66,624.00 **$66,624.00**	$0 **$66,624.00**	$0 **$66,624.00**	$0 **$66,624.00**	$0 **$66,624.00**
SSM: Controllable expenses associated with additional funding in the DNP program.	$10,000.00 **$10,000.00**	$5,000.00 **$15,000.00**	$5,000.00 **$20,000.00**	$5,000.00 **$25,000.00**	$0 **$25,000.00**
Item	1st Year	2nd Year	3rd Year	4th Year	5th Year
Travel: Funding associates with travel & professional development of new doctoral teaching faculty	$10,000.00 **$10,000.00**	$5,000.00 **$15,000.00**	$5,000.00 **$20,000.00**	$5,000.00 **$25,000.00**	$5,000.00 **$25,000.00**
Library Resources	$10,461.00 **$10,461.00**				
Equipment: Costs associated with technology and printing for new personnel and faculty	$30,000.00 **$30,000.00**	$0 **$30,000.00**	$0 **$30,000.00**	$0 **$30,000.00**	$0 **$30,000.00**
Annual Totals	$360,731.00	$254,107.00	$176,147.00	$126,147.00	$23,987.00
Cumulative Totals over 5-years	$371,192.00	$371,192.00	$801,446.00	$927,593.00	$951,580.00

Estimated <u>Revenues</u> for Doctor of Nursing Practice

Item	1st Year	2nd Year	3rd Year	4th Year	5th Year
(5% increase each year)					
Tuition and Fees for 1st Cohort (10 students/18 credits) **Based on full-time study	$109,440.00	$114,840.00	5th Cohort (20 students) $241,200.00	$253,440.00	$266,040.00
Tuition and Fees for 2nd Cohort (20 students/18 credits)		$229,680.00	$241,200.00	6th Cohort $253,440.00	$266,040.00
Tuition and Fees for 3rd Cohort (20 students/18 credits)			$241,200.00	$253,440.00	7th Cohort $266,040.00
Tuition and Fees for 4th Cohort (20 students/18 credits)				$253,440.00	$266,040.00
Annual Totals	$109,440.00	$344,520.00	$723,600.00	$1,013,760.00	$1,064,160.00
Cumulative Totals over 5-years	$109,440.00	$453,960.00	$1,177,560.00	$2,191,320.00	$3,255,480.00

Estimated <u>Profit/Loss</u> for Doctor of Nursing Practice

Item	1st Year	2nd Year	3rd Year	4th Year	5th Year
Cumulative Costs 5-years	$371,192.00	$371,192.00	$801,446.00	$927,593.00	$951,580.00
Cumulative Revenue 5-years	$109,440.00	$453,960.00	$1,177,560.00	$2,191,320.00	$3,255,480.00
Cumulative Profit/Loss 5-years	-($261,752.00)	$82,768.00	$376,114.00	$1,263,727.00	$2,303,900.00

Assumptions/Comments:
Estimated revenue is based on annual cohort of 10 (first year) and 20 each subsequent year paying minimally for 18 credits/year.
Estimated tuition (5% increase) and fee charges:
FY 2015: 608.00/credit hour
FY 2016: 638.00/credit hour
FY 2017: 670.00/credit hour
FY 2018: 704.00/credit hour
FY 2019: 739.00/credit hour
Beginning with the 3rd year of the DNP program, the program will generate a cumulative surplus. This surplus will continue to increase with time and it will offset any additional expenses. The DNP program will create seed money for additional specialty areas due to the continued annual increase of 5% in tuition costs.

References

American Association of Colleges of Nursing (AACN). (2013) *AACN: Fact Sheet, 2013*. Washington, DC: Author.

American Association of Colleges of Nursing (AACN). (2012) *AACN:* Frequently asked questions. Retrieved from http://www.aacn.nche.edu/dnp/faqs

American Association of Colleges of Nursing (AACN) website: http://www.aacn.org/

American Association of Colleges of Nursing. (2006). *The essentials of doctoral education for advanced nursing practice.* Washington, DC: Author.

National Organization of Nurse Practitioner faculties. (2013). *Advanced nursing practice: Curriculum guidelines and program standards for nurse practitioner education.* Washington, DC: Author.

Newhouse, R. P., Stanik-Hutt, J., White, K. M., Johantgen, M., Bass, E. B., Zangaro, G., . . . Weiner, J. P. (2011). Advanced practice nurse outcomes 1990-2008: a systematic review. [Comparative Study]. *Nursing economic$, 29*(5), 230-250- quiz 251.

U.S. Department of Health and Human Service (U.S. DHHS). (2013). Projecting the supply and demand for primary care practitioners through 2020. Retrieved from http://bhpr.hrsa.gov/healthworkforce /supplydemand /usworkforce/primarycare/

U.S. Department of Health and Human Service (U.S. DHHS). (2014). Shortage designation: health professional shortage areas & medically underserved areas/populations. Retrieved from http://www.hrsa.gov/shortage/

Action of the Department/College

1. Department/School (Include the faculty votes signatures from all submitting departments/schools.)

Vote of faculty: For___19___   Against_0_____   Abstentions____0_____
(Enter the number of votes cast in each category.)

I support this proposal. The proposed program can_____cannot_____ be implemented without additional College or University resources.

▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮   10/23/14
Department Head/School Director Signature   Date

2. College/Graduate School (Include signatures from the deans of all submitting colleges.)

A. College.

I support this proposal. The proposed program can___✓___ cannot_____ be implemented within the affected College without additional University resources.

▮▮▮▮▮▮▮▮▮▮▮▮▮▮   11/17/14
College Dean Signature   Date
                    F.A.C: ▮▮▮▮▮▮▮▮   11/a/14

B. Graduate School (new graduate programs ONLY)

_____   _____
Graduate Dean Signature   Date

Approval

▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮   4/23/15
Associate Vice-President for Academic Programming Signature   Date

Appendices

Please see attached Appendices A-D

Appendix A
The DNP Scholarly/Capstone Project Description

Capstone Project

The DNP doctoral/capstone project is the culmination of knowledge gained through DNP coursework and provides an opportunity for the student to demonstrate an analytical approach to clinical practice or organizational policy issue in a format that supports the synthesis, transfer and utilization of knowledge. This project will demonstrate the identification and solution to a practice related issue through applied research. This project is aimed at applying the skills and knowledge acquired in the program to use in the clinical practice arena. The goal of this project is to make a significant contribution in clinical practice, the community or in academia. It is expected that students and faculty will work collaboratively and engage the population in which the capstone project is focused.

Capstone Practicum

Clinical experiences in this practicum are designed to integrate knowledge of nursing theory, evidence based nursing practice, physiologic foundations, ethical and legal principles and health care systems into their advanced clinical practice. In consultation with their DNP faculty mentor, students will select an area of clinical practice and implement advanced clinical decision-making in the provision of culturally sensitive, socially just, patient centered, evidence based care. Case presentations from the student's clinical practicum experience will be used to identify clinical trends, demonstrate expert clinical judgment, and provide individual and population focused interventions. Expertise, knowledge and data gained from this course will be used in the development of the final project proposal. Seminars will focus on guiding the student through all aspects of project design, implementation and evaluation using their clinical experiences.

DNP Doctoral/Capstone Project Requirements

Students are expected to create and lead an innovative change for populations at the local, regional, national, and/or international systems level. During the DNP scholarly project and practicum, students will develop, implement, and evaluate an, ethical, evidence-based solution to a problem or issue encountered in the students' clinical practice. Regular seminars will be held during each semester that students are enrolled in the Scholarly/Capstone Project courses in order to provide a forum for students and faculty to discuss role development and plans/progress for the DNP project. If additional time is needed to complete the project, students will need to register for 1 credit of NUR XXX per semester until the project is successfully completed up to a maximum of 3 semesters.

Term I	
Course Work	Intro to Doctoral Studies (3CH) Quality and Safety (3CH)
DNP Student Expectations	Familiarize yourself with EMU systems Meet with DNP Adviser* Determine practice area of interest Develop phenomenon of interest**
Term 2	
Coursework	Research Methods I (3CH) Epidemiology/Health Disparity in the US and Global (3CH)
DNP Student Expectations	Clinical practicum hours may be earned as you begin to identify your research problem You may need to meet with people in the organization that you plan to conduct your research You may need to develop relationships with people both in and outside the organization to help facilitate your research Your clinical mentor should be identified and contract signed and a plan in place for goals of clinical practicum
Term 3	
Coursework	Research Methods II (3CH) Scholarly/Capstone Project I: Proposal Development
DNP Student Expectations	Your project proposal will be **complete** by the end of this term Meet with your DNP advisor Ongoing meetings with your clinical mentor should be occurring Clinical practicum hours may be earned as you work on your project. For example, if you attended a conference, or you are rounding with a clinical team that relates directly to your project
Term 4	
Coursework	Health Policy and Advocacy (3CH) Scholarly/Capstone Project II (2 CH)
DNP Student Expectations	Project design, data collection procedure, sample identified, consents and IRB approvals completed. You will need to obtain IRB approval other than EMU if you are collecting data in another

	institution.**Please prepare for this as this may take additional time. You CANNOT collect your data without IRB approval** Data collection to begin if all above areas are met. Meet with DNP Adviser Ongoing meetings with Clinical Mentor Clinical practicum hours may be earned here as you work on your project
Term 5	
Coursework	Health Systems Theory, Informatics, Policy and Practice (3CH) DNP Practicum (1-6 CH)
DNP Student Expectations	Complete data collection Complete clinical activity for Scholarly project Begin analysis of your results This term is light for coursework so you are expected to complete the clinical hours needed to graduate.
Term 6	
Coursework	Developing DNP Faculty(3CH) Scholarly/Capstone Project III: Project Completion/Dissemination
DNP Student Expectations	Complete analysis of project Scholarly Capstone Project is completed Present/Dissemination of project

*Post MSN DNP students will be assigned a doctorally-prepared faculty advisor upon admission into the program. The identification of the doctorally-prepared faculty chair and clinical mentor should occur by the completion of Term 2 in the program. Determination will be based on the student's past and present clinical practice population experience and interests.

**Post MSN DNP students will be expected to have already identified the probable topic of their project upon admission into the program while BSN DNP students will collaborate with DNP/NP program faculty chair in identification of their project topic early on in their plan of study.

***The timeline for part-time students will be adjusted accordingly.

	Terms 1-6
Course Work	NURS 500: Advanced Pathophysiology (3 CH) NURS 502: Advanced Health Assessment (3 CH) NURS 506: Nursing Theory (3 CH) NURS 611: Advanced Pharmacology (3 CH) NURS 505: Health Status Trends & Health Care Delivery Systems(3 CH) NURS 606: Advanced Practice Role Development (3 CH) NURS 640: Research for Evidence Based Nursing Practice I (3 CH) NURS 642: Research for Evidence Based Nursing Practice II (3 CH) NURS 691: Advanced Practice Registered Nurse Capstone (3 CH) **Clinical Courses: Adult-Gerontology Health Clinical Nurse Specialist (16 cr):** NURS 653: Advanced Adult-Gero Health Nursing CNS I (5 CH) NURS 663: Advanced Adult Health-Gero Nursing CNS II (5 CH) NURS 668: Practicum in Advanced Adult-Gero Health Nursing for CNS Track (6 CH) OR **Clinical Courses: Adult-Gerontology Health Primary Care Nurse Practitioner (16 cr):** NURS 664: Advanced Adult Health Nursing NP I (5 CH) NURS 666: Advanced Adult Health Nursing NP II (5 CH) NURS 669: Practicum in Advanced Adult Health Nursing for NP Track (5 CH)
DNP Student Expectations	Meet with DNP Adviser[1] Familiarize yourself with EMU systems Complete 27 CH of Advanced Practice Clinical Core Complete 16 CH of Advanced practice Role specialty (CNS or NP) Complete 500 clinical practicum hours in role specialty area (CNS or NP)
	Term 7
Course Work	Intro to Doctoral Studies (3CH) Quality and Safety (3CH)
DNP Student Expectations	Familiarize yourself with EMU systems Meet with DNP Adviser[2] Determine practice area of interest Develop phenomenon of interest**
	Term 8
Coursework	Research Methods I (3CH) Epidemiology/Health Disparity in the US and Global (3CH)
DNP Student Expectations	Clinical practicum hours may be earned as you begin to identify your research problem (Suggested: 1 CH Clinical Practicum) You may need to meet with people in the organization that you plan to conduct your research You may need to develop relationships with people both in and outside the organization to help facilitate your research Your clinical mentor should be identified and contract signed and a plan in place for goals of clinical practicum[2]
	Term 9
Coursework	Research Methods II (3CH)

	Scholarly/Capstone Project I: Proposal Development
DNP Student Expectations	Your project proposal will be **complete** by the end of this term Meet with your DNP advisor Ongoing meetings with your clinical mentor should be occurring Clinical practicum hours will be earned as you work on your project. For example, if you attended a conference, or you are rounding with a clinical team that relates directly to your project (Suggested: 2 CH Clinical Practicum)
Term 10	
Coursework	Health Policy and Advocacy (3CH) Leadership (3CH) Scholarly/Capstone Project II (2 CH)
DNP Student Expectations	Project design, data collection procedure, sample identified, consents and IRB approvals completed. You will need to obtain IRB approval other than EMU if you are collecting data in another institution. Please prepare for this as this may take additional time. You CANNOT collect your data without IRB approval** Data collection will begin when all the above areas are met. Meet with DNP Adviser Ongoing meetings with Clinical Mentor Clinical practicum hours will be earned here as you work on your project (Suggested 1CH Clinical Practicum)
Term 11	
Coursework	Health Systems Theory, Informatics, Policy and Practice (3CH) DNP Practicum (1-6 CH)
DNP Student Expectations	Complete data collection Complete clinical activity for Scholarly project Begin analysis of your results This term is light for coursework so you are expected to complete the clinical hours needed to graduate. (Suggested: 2 CH Clinical Practicum although you will register for more to complete the practicum requirement if you will not have 6 CH by the end of this term)
Term 12	
Coursework	Developing DNP Faculty (3CH) Scholarly/Capstone Project III: Project Completion/Dissemination
DNP Student Expectations	Complete analysis of project Scholarly Capstone Project is completed Present/Dissemination of project

Note: The timeline for part-time students will be adjusted accordingly.
[1]All DNP students will be assigned a doctorally prepared faculty advisor upon admission into the program.
[2]The identification of the doctorally prepared faculty chair and clinical mentor for their Capstone project should occur by the completion of Term 8 in the program. Determination will be based on the student's past and present clinical practice population experience and interests.

All DNP students will be expected to identify the probable topic of their Capstone project by Term 7; which may be on admission for students that Terms 1-6 are waived.

Appendix B
The DNP Scholarly/Capstone Project Timeline

Term 1	Term 2	Term 3
NURS 500 Advanced Pathophysiology (3) **NURS 506** Nursing Theory (3)	**NURS 502** Advanced Health Assessment (3) **NURS 606** Advanced Practice Role Development (3)	**NURS 611** Pharmacology for Advance Practice Nurses (3) **NURS 505** Health Status and Trends (3)
Term 4	Term 5 *(Apply for MSN graduation)*	Term 6 *(MSN Graduation and degree conferral)*
NURS 640 Evidence Based Practice (3) **NURS 653/664** Advanced Clinical Course I CNS or NP (5) [1]	**NURS 608** Health Promotion and Disease Prevention (3) **NURS 663/666** Advanced Clinical Course II CNS or NP (5) [1]	**NURS 691** Advanced Practice Registered Nurse Capstone CNS and NP (3) **NURS 668/669** Advanced Clinical Course III CNS or NP (6) [1]
Term 7 *(Start of DNP for students entering with a MSN, Dept. permission required for all others).*	Term 8	Term 9
NURS 810 Intro to Doctoral Studies (3) **NURS 830** Quality & Safety (3)	**NURS 851** Adv Nurs Research (3) **NURS 840** Epidemiology/Health Disparity in the U.S and Global (3)	**NURS 852** Adv Nurs Research (3) **NURS 891** Capstone Project I: Proposal Development (3)
Term 10	Term 11	Term 12
NURS 860 Health Policy & Advocacy (3) **NURS 831** Leadership (3) **NURS 892** Capstone Project II: Project Development (2)	**NURS 870** Health Systems Theory, Informatics, Policy & Practice (3) **NURS 880** DNP Practicum (1-6) [2,3]	**NURS 811** Nursing Education: The Faculty Role (3) **NURS 893** Capstone project III: Dissemination (3)

[1] MSN candidates must have a minimum of 500 clinical hours to apply for national certification exams.

[2] DNP candidates must have 1000 practicum hours for graduation (500 may be applied from their MSN program).

[3] DNP Practicum hours may be taken in any term for a total of 6 CH completed by end of program.