

### School of Nursing, Kinesiology, and Health Sciences

### DNP STUDENT HANDBOOK

This handbook is located on our homepage at https://health-education-human-services.wright.edu/nursing-kinesiology-and-healthsciences

The School of Nursing, Kinesiology, and Health Sciences faculty reserves the right to revise the nursing requirements or the sequence necessary to prepare students for new and emerging roles in nursing. Course requirements or sequence scheduling may be changed.

The information contained in this handbook is informational only and not intended to be contractual.



On behalf of the School of Nursing and Doctor of Nursing Practice (DNP) Program, Welcome to Wright State University!

Thank you for choosing the Doctor of Nursing Practice Program at Wright State University (WSU); everyone is thrilled you selected WSU to advance your nursing career. As a Doctor of Nursing Practice-prepared registered nurse, you will develop the skills to transform organizations, systems, and healthcare by utilizing and implementing evidence.

The DNP Curriculum at WSU is comprehensive, accelerated, challenging, engaging, and enriching. The knowledge you will gain from doctoral nursing education will prepare you to lead initiatives and influence change to improve health outcomes for people in the community, region, country, and world. Experienced graduate faculty from the School of Nursing are excited to work with you on this educational journey. The faculty have a variety of nursing leadership, research, and practice backgrounds. The student-faculty mentoring and advising relationship is welcoming, collegial, and professional.

You have now joined a community of scholars devoted to improving health globally. You will develop relationships with your academic colleagues and faculty throughout the program. As WSU alumni, you will join the Wright State University Alumni Association, which provides networks worldwide. I am excited to meet and work with you on your DNP adventure. Please feel free to ask questions about WSU and navigating the DNP Program.

Sincerely,

Tonya Schmitt DNP CPNP-PC, APRN

#### **Program Description**

The AACN published *The Essentials of Doctoral Education for Advanced Nursing Practice* (*DNP Essentials*) in 2006 as a guide for developing and implementing DNP programs nationwide (AACN, 2006). Graduates of our DNP program will demonstrate Competencies I-VIII and incorporate a curricular specialty focus.

This program focuses on evidence-based advanced nursing practice in providing direct or indirect care nursing services and nursing leadership, particularly on three pillars: Informatics, Population Health, and interprofessional education and collaboration. Central to the DNP at WSU is applying evidence-based practices utilizing data mining and population and global health systems strategies to assess, analyze, and manage complex health environments through innovative interprofessional practicum experience.

Specifically, our graduates will be equipped with the following advanced skills:

- Organizational focus on population health, health care systems (including information systems), and state, national, or global health policies.
- Ability to define actual and emerging problems through population-based disease surveillance
- Ability to design targeted population and systems-level health interventions.
- Competency in advanced practice in combination with expert-level understanding of nursing and related biological and behavioral sciences.
- Ability to work with diverse stakeholders for inter or intra-organizational achievement of health-related organizational or public policy goals and designing patient-centered care delivery systems or policy-level delivery models.

The curriculum includes courses that lead to advanced competencies for understanding and managing the complexities of healthcare systems, population health, and health policy. These competencies advance knowledge and leadership skills for improving healthcare delivery outcomes, progressing the systematic use of research evidence in health policymaking to strengthen health systems and get the right programs, services, and drugs to those who need them.

A foundational experience for all DNP programs is a doctoral project designed to translate the current evidence into a practice setting. The doctoral project begins with identifying a gap, problem, or challenge in a healthcare system or population aggregate. The project is addressed each semester and woven through each course in the program. The project requires a proposal defense, supervision during the practicum hours of project implementation, and a rigorous final defense. Projects are expected to impact defined systems and population health outcomes positively.

#### Significance of the DNP

The DNP degree is a practice degree, not a research degree, designed to enhance evidence-based practice in health care by providing expert nurse leaders with skills to rapidly translate current and relevant research evidence into practice. The DNP program aims to develop nursing expert nurse leaders by providing advanced nursing knowledge and skills. Graduates will blend discipline-specific scientific knowledge with leadership, informatics, fiscal, policy, and organizational and systems theory to meet the healthcare needs of the 21<sup>st</sup> century and contribute to improved population health and health systems outcomes.

According to the American Association of Colleges of Nursing (2006), the essentials below outline the curricular elements and competencies in the WSUDNP program. These DNP essentials address the core foundational competencies of all advanced nursing practice roles. These foundational outcomes competencies are essential for all WSU DNP graduates regardless of the DNP students' specialty or functional focus:

- I. Scientific underpinnings of practice
- II. Organization and Systems Leadership for Quality Improvement
- III. Clinical Scholarship and Analytical Methods for Evidence-Based Practice
- IV. Information Systems, technology, and patient care technology
- V. Healthcare policy for advocacy in healthcare
- VI. Interprofessional collaboration
- VII. Clinical prevention and population health
- VIII. Advanced nursing practice

#### Characteristics of the Graduate

The characteristics of the graduate reflect the *Essentials for Doctoral Education in Advanced Nursing Practice* (http://www.aacn.nche.edu/publications/position/DNPEssentials.pdf) (AACN, 2006, pg. 8-17). These essentials focus on eight areas of advanced nursing practice. The areas are as follows:

#### **Essential #1: Scientific Underpinnings for Practice**

The DNP program prepares the graduate to:

- 1. Integrate nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice.
- Use science-based theories and concepts to:
   Determine the nature and significance of health and healthcare delivery phenomena;
   Describe the actions and advanced strategies to enhance, alleviate, and facilitate health and healthcare delivery phenomena as appropriate and evaluate outcomes.
- 3. Develop and evaluate new practice approaches based on nursing theories and other disciplines.

## Essential #2: Organizational and Systems Leadership for Quality Improvement and Systems Thinking

The DNP program prepares the graduate to:

- 1. Develop and evaluate care delivery approaches that meet patient populations' current and future needs based on scientific findings in nursing and other clinical, organizational, political, and economic sciences.
- 2. Ensure accountability for the quality of health care and patient safety for populations with whom they work:
  - a. Use advanced communication skills/processes to lead quality improvement and patient safety initiatives in health care systems.
  - b. Employ business, finance, economics, and health policy principles to develop and implement effective plans for practice-level and system-wide practice initiatives to improve the quality-of-care delivery.
  - c. Develop and monitor budgets for practice initiatives.
  - d. Analyze the cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes.
  - e. Demonstrate sensitivity to diverse organizational cultures and populations, including patients and providers.
- 3. Develop and evaluate effective strategies for managing the ethical dilemmas inherent in in-patient care, health care organization, and research.

# Essential #3: Clinical Scholarship and Analytical Methods for Evidence-Based Practice The DNP program prepares the graduate to:

- 1. Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for practice.
- 2. Design and implement processes to evaluate outcomes of practice, practice patterns, and care systems within a practice setting, healthcare organization, or community against national benchmarks to determine variances in practice outcomes and population trends.
- 3. Design, direct, and evaluate quality improvement methodologies to promote safe, timely, effective, efficient, equitable, and patient-centered care.
- 4. Apply relevant findings to develop guidelines and improve practice and the practice environment.
- 5. Use information technology and research methods appropriately to:
  - a. Collect appropriate and accurate data to generate evidence for nursing practice
  - b. Inform and guide the design of databases that generate meaningful evidence for nursing practice
  - c. Analyze data from practice
  - d. Design evidence-based interventions
  - e. Predict and analyze outcomes
  - f. Examine patterns of behavior and outcomes

- g. Identify gaps in evidence for practice
- 6. Function as a practice specialist/consultant in collaborative knowledge-generating research.
- 7. Disseminate findings from evidence-based practice and study to improve healthcare outcomes.

## Essential #4: Information Systems /Technology and Patient Care Technology for the Improvement and Transformation of Health Care

The DNP program prepares the graduate to:

- 1. Design, select, use, and evaluate programs that evaluate and monitor outcomes of care, care systems, and quality improvement, including consumer use of health care information systems.
- 2. Analyze and communicate critical elements to selecting, using, and evaluating health care information systems and technology.
- 3. Demonstrate the conceptual ability and technical skills to develop and execute an evaluation plan involving data extraction from practice information systems and databases.
- 4. Provide leadership in evaluating and resolving ethical and legal issues within healthcare systems relating to information, information technology, communication networks, and patient care technology.
- 5. Evaluate consumer health information sources for accuracy, timeliness, and appropriateness.

### Essential #5: Health Care Policy for Advocacy in Health Care

The DNP program prepares the graduate to:

- 1. Critically analyze health policy proposals, policies, and related issues from the perspective of consumers, nurses, other health professions, and other stakeholders in policy and public forums.
- 2. Demonstrate leadership in developing and implementing institutional, local, state, federal, or international health policy.
- 3. To improve healthcare delivery and outcomes, influence policymakers through active participation on committees, boards, or task forces at the institutional, local, state, regional, national, or international levels.
- 4. Educate others, including policymakers at all levels, regarding nursing, health policy, and patient care outcomes.
- 5. Advocate for the nursing profession within the policy and health care communities.
- 6. Develop, evaluate, and provide leadership for health care policy that shapes financing, regulation, and delivery.
- 7. Advocate for social justice, equity, and ethical policies within all healthcare arenas.

## Essential #6: Interprofessional Collaboration for Improving Patient and Population Health Outcomes

The DNP program prepares the graduate to:

- 1. Employ effective communication and collaborative skills in developing and implementing practice models, peer review, practice guidelines, health policy, standards of care, or other scholarly products.
- 2. Lead interprofessional teams in the analysis of complex practice and organizational issues.
- 3. Employ consultative and leadership skills with interprofessional and interprofessional teams to create change in healthcare and complex healthcare delivery systems.

### Essential # 7: Clinical Prevention and Population Health for Improving the Nation's Health

The DNP program prepares the graduate to:

- 1. Analyze epidemiological, biostatistical, environmental, and other appropriate scientific data on individual, aggregate, and population health.
- 2. Synthesize concepts, including psychosocial dimensions and cultural diversity, related to clinical prevention and population health in developing, implementing, and evaluating interventions to address health promotion/disease prevention efforts, improve health status/access patterns, and address gaps in the care of individuals, aggregates, or populations.
- 3. Evaluate care delivery models and strategies using concepts related to community, environmental and occupational health, and cultural and socioeconomic dimensions of health.

#### **Essential #8: Advanced Nursing Practice**

The DNP program prepares the graduate to:

- 1. Conduct a comprehensive and systematic health and illness parameters assessment in complex situations, incorporating diverse and culturally sensitive approaches.
- 2. Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences.
- 3. Develop and sustain therapeutic relationships and partnerships with patients (individual, family, or group) and other professionals to facilitate optimal care and patient outcomes. Demonstrate advanced clinical judgment, systems thinking, and accountability levels in designing, delivering, and evaluating evidence-based care to improve patient outcomes.
- 4. Guide, mentor, and support other nurses to achieve excellence in nursing practice.
- 5. Educate and guide individuals and groups through complex health and situational transitions.
- 6. Use conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal, and policy issues.

#### **Description of the Curriculum**

The entire curriculum is guided by *The DNP Essentials* (AACN, 2006). The curriculum builds on *The Essentials: Core Competencies for Professional Nursing* (AACN, 2021), the *APRN Consensus Model* (APRN Consensus Group and National Council of State Boards of Nursing, 2008), and other documents required by our accrediting body, Commission on Collegiate Nursing Education (CCNE). The *DNP Essentials* document recommends "1,000 clock hours of practice post-baccalaureate as part of a supervised academic program" (AANC, 2006, p. 19). Most applicants will already have completed 500+ clock hours through their master's degree programs. For those students who have not achieved a minimum of 500 practicum hours, additional practicum hours will be provided to get to the required DNP of 1,000 supervised clock hours. The post-master's DNP curriculum will consist of 33 semester credit hours and 60 credits (or more) from a previous master's in nursing degree.

#### Specifically, our graduates will be equipped with the following advanced skills:

- Organizational focus on population health, health care systems (including information systems), and state, national, or global health policies.
- Ability to define actual and emerging problems through population-based disease surveillance
- Ability to design targeted population and systems-level health interventions.
- Competency in advanced practice in combination with expert-level understanding of nursing and related biological and behavioral sciences.
- Ability to work with diverse stakeholders for inter- or intra-organizational achievement of health-related organizational or public policy goals and designing patient-centered care delivery systems or policy-level delivery models (AACN, 2006, p. 18).

#### Six Program Outcomes guide the newly proposed DNP Program curriculum:

- 1. Integrate science-based theories and data-based concepts for scholarly inquiry to Develop, critically appraise, and implement systems approaches that improve. Population health and health care systems.
- 2. Demonstrate systems-level leadership of the interprofessional team for quality and safety among populations in healthcare systems using current data sets.
- 3. Employ information systems/technology, clinical scholarship, and analytical methods to transform dynamic and complex healthcare systems as a basis for evidence-based practice.
- 4. Implement systems-level strategies among interprofessional teams within/across systems to impact prevention and population health.
- 5. Use advanced nursing practice to optimize health and improve the care of individuals, families, and populations in healthcare systems.
- 6. Develop, evaluate, advocate, and provide systems leadership in healthcare policy that transforms healthcare economics, regulation, access, and delivery.

#### GUIDELINES FOR DNP STUDENT PROGRESSION

The WSU Program Director and faculty will monitor the progression of DNP students through the program. For individual courses, the main responsibility for monitoring student progress is the course faculty. The DNP program director will monitor the progression of the student within the overall program.

**PURPOSE:** To facilitate student progression and increase student retention in courses and the program.

#### **PROCEDURE:**

#### A. For students at risk of failing a course:

- 1. Course faculty notify the individual student in writing as soon as the student is determined to be in jeopardy of not passing the course. The notification should precisely describe the concern(s) related to the assignment or course objective(s).
- 2. The student is responsible for developing an academic contract indicating steps they will take to remediate area(s) of concern. The contract should include identifying the location (s) of concern, actions to be taken by the student to remediate the problem (including the timeline), and deliverable products to be evaluated by the course faculty as evidence that the concern has been resolved.
- 3. The faculty and students will review the academic contract, revise it as required, and sign it.
- 4. The faculty member sends a copy of the notification to both WSU Program Directors and places a copy of the academic contract in the student file when both parties have signed the agreement.
- 5. The faculty member evaluates the student's progress at the end of the course based on the agreed-upon contract to determine if the concerns have been appropriately resolved.

#### B. For students who have failed a course:

- 1. The course faculty member notifies the WSU Program Director of a student failure by the final week of the term, regardless of whether an academic contract was previously filed.
- 2. The Program Director will contact the student within one week of final grades being posted to establish a revised program of study (POS) or notify the student in writing that they have been dismissed from the DNP program as indicated. When a revised POS is in order, the POS may include remediation activities as appropriate.

#### C. Progression Standards:

- 1. Any course with a grade of less than a "B" must be repeated.
- 2. Students must maintain a cumulative GPA of 3.0 or better.
- 3. Students receiving more than two grades of "C" or below will not be allowed to progress in the program.
- 4. Each course may be repeated only one time.
- 5. Courses prerequisites to other classes must be completed with a "B" or better grade before progressing.

- 6. In courses where the grading is "Pass/Fail" or "Satisfactory/Unsatisfactory," grades of Fail or Unsatisfactory will be required to be repeated per the policy above.
- 7. For incomplete (IN) grades, refer to the Graduate School Handbook.

**Repeat Checks:** A student must submit to a repeat criminal background record check if any of the following circumstances apply: 1) They are convicted of any offense during their enrollment. 2) There is a break of three full quarters or more in their enrollment. 3) Three years have passed since their initial criminal background record check.

The student must report any conviction that may impact their ability to participate in clinical experiences to the Associate Dean within seven days of its occurrence. Failure to do so or to comply with any other aspect of this policy may result in immediate dismissal from the program.

#### **DNP Scholarly Project**

The Program Director (WSU) will initially advise each student upon admission. Students must determine a focal area for their doctoral project during the initial term or after completing the first two semesters. In conjunction with the student and course faculty, the program director will attempt to identify potential faculty contacts for a project chair. When necessary, more than one chair may be identified, and the names will be forwarded to the student.

The student will be counseled to contact potential chairs and schedule an interview in person, by telephone, or online. The student needs to come to the meeting prepared to discuss the basic idea for the project, potential population, proposed sites for the project to be carried out, etc. The student may then contract with the faculty member who seems to be the best fit for the project. When contacted, the student must notify the Program Directors to have the chair's name added to the *Program of Study* form.

The chair will supervise the project, assist the student in identifying clinical opportunities that enhance the project, extend the student's skills, and suggest any remediation (additional electives, etc.) that may be required to facilitate the student achieving their project goals. Students are responsible for following the *Program of Study* as written, making appropriate updates to the *Program of Study* form as required, communicating with their advisor, chair, and faculty, and seeking feedback during enrollment.

Should a conflict that could be resolved between the student and the chair, a written letter to the Program Director requesting a chair change will be required. The Program Director will attempt to assist the student and chair in resolving issues when possible. If resolution is not possible, a new chair may be selected. Students must be cautioned that a change in the chair may seriously delay progress on their project. Any new chair has the authority to require changes to the student's project to bring the project in line with the new chair's determination of a quality product.

#### Curriculum

| Course Name and Number | Credits |
|------------------------|---------|
|------------------------|---------|

| NUR 8800 | Science of Systems Thinking to Advance Population Health Outcomes                  | 3   |
|----------|--|-----|
| NUR 8815 | Foundations in Scholarship of Healthcare Systems Analysis                          | 3   |
| NUR 8835 | Foundations of Systems Appraisals and Analytic Methods for Evidence-Based Practice | 3   |
| NUR 8840 | Healthcare Informatics for Collaborative Interprofessional Practice                | 3   |
| NUR 8860 | Data-Driven Business and Organizations   | 3   |
| NUR 8885 | Data-Driven Business and Organizations   | 3   |
|          | Pre-req 8840   |     |
| PPH 6500 | Health Resource Management and Policy  | 3   |
| FIN 7500 | Management of Healthcare Organizations   | 3   |
| NUR 8920 | DNP Scholarly Project Practicum  | 1-3 |
| PPH 7510 | Leading in Healthcare Systems  | 1-3 |
| NUR 8900 | Leadership Practicum   | 1-3 |
| NUR 8920 | DNP Scholarly Project Practicum  | 1-3 |
| NUR 8925 | DNP Scholarly Project  |     |
|          | (FINAL DEFENSE)  |     |
|          | Total credits  | 33  |

#### **Final Practicum or Course Associated Clinical Hours**

The DNP program builds on the typical master's educational program that focuses on preparation for beginning advanced specialty nursing practice, administrative leadership, or nursing education. The objectives of the practicum experience at the doctoral level include the preparation of advanced practice nurses, executive leaders, and educators with advanced organizational leadership skills. Students in the DNP practicum will participate in experiences that prepare them to translate evidence into various healthcare systems by implementing evidence practice, quality improvement, or policy development. The overarching goal of the DNP student is to impact the complexity of the nation's health by implementing change that positively affects the health outcomes of patients and vulnerable populations served.

DNP education requires 1000 academically supervised practice hours at the post-MSN entry level. Incoming students must have documentation of the total number of clinical hours secured in their master's program. The DNP program at WSU offers 500 clinical hours. To meet the required 1000 academically supervised hours of practice hours, programs of study may be adjusted for students who enter the program with less than 480 hours (about 3 weeks) from their master's program. The practice may take various forms, from direct patient care to organizational or public health needs analyses.

Some courses have designated practice hours incorporated in the credit hour base for that course.

Each course with designated practice hours will have a doctorly prepared faculty member assigned. The faculty member will specify what practice behaviors/activities constitute a passing level in meeting the course objectives. Students will work with their course faculty members and academic advisors to identify appropriate sites for meeting these objectives. In addition, a clinical mentor is necessary to facilitate the student's activities at the practice site. A clinical mentor is a person employed at the site who can facilitate the student's entry and progress toward meeting their objectives. The clinical mentor should be the most qualified and may not be doctorly prepared.

An intensive culminating practicum within the program provides a focused opportunity to synthesize the new doctoral skills into the student's clinical practice. As with all practice hours (see above), the student will work with a course faculty member and a clinical mentor to seek opportunities to practice and demonstrate proficiency with the new skills. The capstone practicum may or may not contribute directly to the student's project. Students should plan on taking at least three credit hours of final training in the last term before graduation. Final practicum credit hours may be taken as variable credit during the summer term (if faculty is available). Taking practicum hours requires contracting with a faculty member to act as course faculty (preferably your project advisor), a clinical mentor (located at the practicum site), and approval from the student's academic advisor/project chair if the practicum contains activities related to the doctoral project.

Early in the program, students are encouraged to select a population and clinical issue of interest to follow throughout the program as the basis for their doctoral project. Therefore, arranging practicum experiences with this population is advisable to gain first-hand knowledge of their needs. Practicum hours need not be conducted with the project population, as variety will increase the richness of the student's experiences. While students can select sites that will meet course objectives and contribute to their professional goals, their current employer is not a preferable site. All areas <u>must</u> have the approval of the faculty in the specific course. All attempts will be made to have placements within a reasonable traveling distance for student involvement and instructor follow-up/supervision.

Students must provide the course faculty member with a written plan signed by the student, the clinical mentor, and the course faculty member. This written plan should set forth the learning objectives (based on Final Practicum course objectives), specific learning activities, time commitment, and outcomes to be accomplished. The signed plan shall constitute a learning contract between WSU faculty, the student, and the mentor. However, at the request of the mentor's employing agency, a standard agreement between the agency and the University may also be completed. This contracting process can take time, so planning is strongly encouraged. In consultation with the clinical mentor, the course faculty member will determine whether the objectives have been met satisfactorily.

• Students must be identified as WSU students when conducting practicum activities. Students are to wear their official WSU nametag displayed. This enables the student to be recognized as such and may help clarify the student's role when the student performs practicum hours within their agency.

#### **Prerequisites Before Final Practicum or Associated Course Clinical**

Students will only be allowed to participate in a nursing course with a practice component involving direct patient care if all requested information is up-to-date and on file in the College of Nursing (UT) or College of Nursing and Health (WSU). There are **NO** exceptions. The requirements that need to be fulfilled before you are eligible to participate in direct patient care:

| NUR 8800                   | Science of Systems Thinking to Advance Population Health Outcomes                   |
|----------------------------|---|
| NUR 8815                   | Foundations in Scholarship of Healthcare Systems Analysis                           |
| NUR 8835                   | Foundations of Systems Appraisals and Analytic Methods for Evidence -Based Practice |
| NUR 8840                   | Healthcare Informatics for Collaborative Interprofessional Practice                 |
| NUR 8860<br>OR<br>MIS 7100 | Data Driven Business and Organizations  |
| NUR 8885                   | Systems Approaches to Program Implementation and Evaluation PROPOSAL DEFENSE        |

#### **Doctoral Evidence-Based Practice Scholarly Project**

### **Introduction**

Doctoral projects reflect the student's attainment of the characteristics of the graduate for the Doctor of Nursing Practice degree identified in the AACN (2007) *Essentials of Doctoral Education in Nursing* document and the program's objectives. As explained in the *Essentials*, Doctoral education, whether practice or research, is distinguished by completing a specific project that demonstrates the synthesis of the student's work and lays the groundwork for future scholarship. For practice doctorates, needing a dissertation or other original research is contrary to the DNP's intent. The DNP primarily involves mastery of an advanced specialty within nursing practice. Therefore, other methods must be used to distinguish the achievement of that mastery.

The following guidelines will assist you in preparing a manuscript consistent with the high standards of a scholarly doctoral project. The appearance and content of your doctoral project should represent academic excellence in nursing. Projects may take a wide variety of forms. However, all projects must clearly exemplify critical thinking at the doctoral level and appropriate use of scholarly methods to further nursing practice knowledge and impact the health outcomes of patients and populations among various organizations.

#### **Choosing a Topic**

While identifying potential doctoral projects, students are typically offered the chance to explore potential clinical issues affecting various patient populations in the first two semesters. Students need to remember their current employment situation nd their goals for future employment and

professional activities, and how the doctoral project may impact these goals. Students at the DNP level have often worked with a specific population for many years. Students may wish to continue working with this population or choose a new population if they believe their career will take a divergent path during the program or upon completion.

Any number of ideas may serve as a project's basis. Many resources are available to assist students in determining a topic for their project, including other student's projects, faculty interest lists, the University libraries, and numerous university websites that have completed DNP project abstracts listed. Suitable topics of investigation should be discussed with faculty, committee members, and chair. It is beneficial to begin a list of potential topics, clinical problems, issues, or concerns from the first day of your program. As you read and discuss topics in classes or clinical seminars or experience clinical trials within your nursing practice, write down topics that interest you. Before determining a problem, consider the following:

- Your interest in the clinical issue/problem;
- Aspects of the clinical issue/problem to be explored;
- Internal organizational data to support the existence of a clinical issue/problem and need for a practice change;
- Feasibility of completing the project (your skills, the time required, resources needed, implementation site, population, and instrument/resource availability); your professional goals;
- Local, regional, or national nursing priorities;
- Faculty availability, interest in the topic, and congruency with your specialty area.

#### **Considerations for Project Topics**

- 1. The project relates to your advanced practice specialty (Advanced practice can be in direct patient care, administrative leadership, educational leadership, or public health).
- 2. The project is evidence-based (i.e., there is a body of evidence to support the implementation of a practice change and data to support a clinical issue/problem in a designated population).
- 3. The project focuses on the identified need(s) of a group (system/organization), population, or community rather than a person. The project may be partnered with agencies or other groups (i.e., public health departments, schools, governmental agencies, or professional organizations).
- 4. The DNP student will function as the Project Director; however, identifying collaborative partnerships and supportive stakeholders is vital to the project's success—identification of a model or framework for design, implementation, and evaluation of the project outcomes.
- 5. The project meets accepted professional standards.
- 6. Opportunities are available for dissemination at professional and public forums that meet your time/financial constraints.

#### **Examples of Projects**

- 1. Creation, implementation, and evaluation of a new health initiative or program at a local or state level.
- 2. Development of a manuscript prepared for submission according to manuscript author guidelines.
- 3. Design and evaluation of a new model of care. Evaluation and revision of an existing health program.
- 4. Extensive needs assessment of a system and participation in the change process within that system.
- 5. Health policy development, evaluation, or change at the local, state, or federal level through partnering with healthcare organizations, political representatives, and community representatives.
- 6. They are developing, implementing, and evaluating quality improvement initiatives within an organization.
- 7. Develop, implement, and evaluate professional mentoring programs in a unit or within an institution.
- 8. It is developing, implementing, and evaluating programs that enhance clinical competence. Gap analysis for issues having extensive public health impacts, such as preparedness for Avian flu, bioterrorism, sexually transmitted infections, etc.
- 9. Needs assessment, planning, and evaluation of new healthcare delivery models for specific regions or populations.
- 10. Projects focusing on international health issues or the nursing profession, such as developing a collegial nursing initiative to assist an economically depressed country to improve provision or access to health care.
- 11. Development or use of databases to improve clinical decision-making, planning, or evaluation.
- 12. Implementation and evaluation of innovative uses of technology to enhance/evaluate care.
- 13. Collaborating with other professionals or researchers on problem-specific projects such as improvement of pain management, care of dementia patients, family-centered care issues, etc.
- 14. Development and evaluation of new protocols, critical pathways, practice guidelines, etc. Conduct financial analyses to compare care models and potential cost savings, etc.
- 15. Portfolios that document many in-depth case studies reflecting a synthesis of knowledge, skills, and attitudes reflective of doctoral education. Students must identify a problem amenable to nursing intervention as an umbrella concept around which to focus the case studies. Extension of the discussion to family and community impact is also appropriate.

#### **Selecting a Doctoral Project Chair**

Selecting a project chair begins with your entry into the DNP program. Interacting and networking with graduate faculty are essential components of graduate education and provide the basis for selecting a project chair and committee members. You can identify and discuss their significant areas of interest by interacting with as many graduate faculty members as possible. Usually, the final selection of your chair is made during or following NUR 8885, System Approach to Program Implementation and Evaluation course. Contact the potential chair to discuss your topic and the faculty's interest and availability. The role of the project chair:

- Guide the proposal stage through the completion of the project's final defense.
- Provide overall supervision of the project.
- Raise questions, serve as an informed critic, and provide specific recommendations for improvement. Available as faculty of record for all final practicum hours.
- Ability to meet your specified timeline for project completion (i.e., available during summer breaks).

#### **Selecting a Doctoral Project Committee**

The DNP Project Chair is a doctoral-prepared course faculty. Additionally, the student will identify a project mentor who should be a nurse with a minimum of a Master's degree; a doctoral degree is preferred. The project mentor should have expertise in the practice setting of the student's DNP project. Students should identify their project mentors by the first and second semesters' conclusion. The Project Team consists of the student, faculty chair, and committee members, at least one that will be considered a practice mentor.

The Project Committee will consist of a chair and two other graduate faculty members selected in collaboration with the chair. The DNP project committee chair needs to have Full Graduate Faculty or adjunct full Graduate Faculty status as appointed by the College of Graduate Studies. Students may have a committee member from the agency where the project is being conducted (generally a key stakeholder in the doctoral project), and the community member may be in a profession other than nursing but is considered an expert in their field. It would be best to negotiate with these individuals regarding their availability and willingness to serve on the committee. Information about eligible faculty is available through the WSU Office of Graduate Studies.

There will be at least two communication meetings (can be by distance modalities or otherwise) of the project team to discuss the project proposal and one before the final presentation and evaluation of the project when it is completed. The project is expected to be of significant rigor to lead to a publishable manuscript. It is also likely that the project will be of use to and approved in advance by the agency where the student will be conducting the project. The student is responsible for communicating with project team members concerning the project's progression, editing the written documents, routing documents or IRB forms.

#### Role of the DNP Advisory Committee:

- 1. Serve, advise, and mentor doctoral students throughout coursework, project development, implementation, and manuscript preparation.
- 2. Guide development and critique the student's work in progress.

#### Role of the Practice Mentor

- 1. Act as a resource for the student in developing the DNP project.
- 2. Participate actively in the project team meeting(s) on the DNP project.
- 3. Share in the approval process of the project
- 4. Be present for the final presentation of the project.

#### Role of the Doctoral Student

- 1. Select project practice mentor
- 2. Follow the guidelines described in this document and in the DNP Course Syllabus.
- 3. Adhere to IRB expectations.
- 3. Meet at timeframes as determined by the program and project team.
- 4. Conduct projects by professional, legal, and ethical standards.
- 5. Complete and submit appropriate forms as required.
- 6. Produce written work at the doctoral level and revise as needed with project team input

The DNP project chair must be a nursing faculty member with a degree in nursing who has full Graduate Faculty status or adjunct full Graduate Faculty status as appointed by the College of Graduate Studies. A faculty member agrees to chair your project, the two of you discuss options for committee members within and outside the WSU College of Nursing. The committee members must be acceptable to both you and the chair. You are responsible for contacting the potential committee members, assessing their interest in the topic and willingness to serve on your committee, and reporting to your project chair.

#### Forms to Sign

When students have selected a project chair and committee members, they must check with the Program Director regarding required forms.

Guidelines for the Doctoral Project Proposal: Appendix A

Guidelines for the Final Doctoral Project: Appendix B

#### **Institutional Review Board**

Following the approval of the DNP project proposal, the student must apply for IRB approval through the Office of the Provost for Research and Innovation at <a href="https://www.wright.edu/research/research-compliance/initial-application">https://www.wright.edu/research/research-compliance/initial-application</a>. After IRB and the involved agency and the chairperson's approval have been obtained, data collection may begin.

#### **DNP Project Proposal Format for Manuscript**

The student's project proposal is written in a prescribed format and submitted to the NUR 8885 course faculty and the committee chair. Together, the committee chair and faculty will review and approve. The practice mentor and the course faculty must also approve the project proposal. The student must correct any deficiencies in the proposal determined by the project team by the course's end.

#### **DNP Project Proposal Format**

#### **Selection of Journal for Manuscript**

Students will select a manuscript appropriate to their DNP Project topic during their first DNP Scholarly Project Practicum. The scholarly manuscript that represents the project shall be formatted to the chosen journal's specifications.

#### **Evidence-Based Practice Doctoral Project Proposal Guideline (Subject to Revision)**

This document is to serve as a framework for the writing of the proposal for the doctoral project. The report is in future tense and uses the 7<sup>th</sup> edition APA writing style. The information about the project should be guided by the proposed framework selected and its nature. The proposal will be completed at a level appropriate for doctoral program graduates. The proposal should clearly state the clinical issue/problem, project purpose, literature review, project methods, and projected outcomes and evaluation. The Guidelines of the Graduate Office of the home institution serve as a reference for the report's formatting.

- I. Title Page
- II. Journal Author Guidelines
- III. Abstract or Executive Summary
  - a. A concise description of the project, including the results and recommendations.
  - b. Use the format required by the university
- IV. Description of problem or clinical issue address
  - a. Prevalence of the clinical problem or issue
  - b. Significance of clinical problem or issue
    - i. Include either internal organizational data or findings from the literature to support the prevalence and significance of the clinical problem or issue.
- V. Purpose and Goals of Project
  - a. Purpose statement for the proposed project
  - b. Project Type
    - i. Evidence-based Practice (EBP)
    - ii. Clinical questions using the PICOT format
  - c. Quality Improvement (QI)
    - i. Goal/aim/purpose (as appropriate for the model selected)
  - d. Other-which could be both or as negotiated with the chair
  - e. Overall project aim statement

- i. Goals/outcomes
- VI. Guiding Framework/Model/Theory(s)
  - a. Evidence-based practice model/framework
  - b. Other frameworks/models guiding the project
    - i. i.e., PDSA, middle range theories, change theories
- VII. Review of the Literature
  - a. The content will address:
  - b. Search Strategies for Review of the Literature
  - c. Critical Appraisal and Evaluation of the Evidence
    - i. Describe appraisal methods, tools, and leveling of the body of evidence (as there are several methods).
    - ii. Evaluation of evidence will be displayed in evaluation tables
  - d. Synthesis of the body of evidence
  - e. Development of a synthesis table
  - f. Include in the synthesis any clinical expertise, internal data, and patient and family preferences and values that contribute to the body of evidence.
  - g. Implications for Practice Based on the Evidence Practice change, policy or protocol implementation recommendation
  - h. Justify practice change with rationale from the literature
- VIII. Implementation and Evaluation Plan for the doctoral project (use steps and terminology of EBP or QI model that guided the project) Content will address:
  - a. Project Setting and Population
  - b. Action or implementation plan/guide
    - i. Address team members, including roles and responsibilities
    - ii. Anticipated barriers and facilitators to implementation
      - 1. Contingency plan for any anticipated barriers
  - c. Outcome measures
    - i. What specific outcomes will be measured?
    - ii. How will the outcomes impact the overall aim/purpose of the project?
      - 1. How will the project outcomes improve health, costs, patient, family, or community outcomes?
  - d. Implementation process (using the framework for guiding implementation)
    - i. Methods
    - ii. Need for IRB
    - iii. Develop a timeline for the implementation and evaluation of the project
  - e. Evaluation Process
    - i. How will data be collected to measure the outcomes
    - ii. If using data collection tools, discuss the reliability/validity of the instrument
    - iii. How will affected data be analyzed, interpreted, and reported?
  - f. Summary Conclusion
    - i. Short conclusion showing the logical connection between the problems or needs of the institution/population, anticipated project outcomes, and feasibility.
  - g. References Appendices

- i. Review of the literature abstraction tables, rapid critical appraisal forms (if applicable), evaluation tables, and synthesis tables
- ii. Copies of measures used
  - 1. Data collection tools
- iii. Supporting materials
  - 1. Agency permission form

#### **Final DNP Project Presentation**

The final DNP project presentation will be scheduled once the project is completed and approved by the DNP project team. This DNP project presentation determines that the student has met partial requirements of the DNP project and has completed a project reflective of doctoral-level academic and practicum work. Approval of the final presentation of the DNP project by the DNP Project Team serves as documentation that the student has met all project expectations and is eligible for graduation once all academic and practicum requirements have been met.

#### Preparing the Final Presentation of the DNP Project

- 1. The final draft of the DNP project report must be a publishable manuscript formatted to the student's chosen journal. The manuscript must be completed before *the DNP project presentation*.
- 2. The date and time of the final project presentation will be arranged by the student and/or faculty after approval from the DNP Project Team. The final presentation may be on campus (in person) or via a virtual platform. The project is presented as a public venue regardless of presentation format; the College of Health and Human Services (Department of Nursing) will announce the presentation and invite interested parties to attend.
- 3. Students should be prepared to take general questions after the presentation regarding the DNP evidence-based practice project process and outcomes. The presentation should represent the project in the final form as approved by the DNP Project Team.
- 4. All appropriate forms will be signed when the DNP Project Team approves the final project, the publishable manuscript, and the presentation.
- 5. The faculty project chair returns all signed documents to the program director. All required documents will be submitted to the Graduate School according to WSU policy.
- 6. The student is responsible for completing a graduation check and submitting a request to graduate with the Registrar's Office according to WSU policy.
- 7. It is the student's responsibility to meet all WSU deadline requirements for submitting project forms.

8. Students must provide all committee members with a copy of the final manuscript submitted for publication.

#### **Comprehensive Defense Questions**

Students should expect to incorporate all aspects of their curriculum into the final defense of their project. To evaluate students' ability to apply their newly gained knowledge and skills, they should expect to be asked several comprehensive final defense questions. Student committee members might ask a wide variety of questions. The committee chair will give the student specific guidance on this issue. However, for planning purposes, several sample questions are listed below. To demonstrate proficiency in their final defense, students should be prepared to address the following questions as appropriate to their project.

#### **Questions Specific to the Doctoral Project:**

- Differentiate between evidence-based practice, research utilization, and quality improvement. Explain how your project exemplifies these concepts.
- You used theory/model to guide the content of your project. Could you have used another theory or model that would have been just as appropriate? If so, why?
- You used the EBP/QI model to guide the implementation of your project. What other EBP/QI model could you have used to refer to your project? How would that have influenced the design of your project?
- What guidelines did you use to design your project, and how did you prioritize them? How did you determine if the guidelines are appropriate to your population?
- Are there other evaluation strategies you could have used to evaluate your outcomes? If so, what might they be?
- Explain how change was facilitated in your project using a change theory.
- Explain the leadership style used when implementing your project utilizing a leadership theory.
- Now that you have completed implementing your project, what other interventions might have worked to get a similar or different outcome?
- Based on the results of your project, what would be the next logical step?

#### **Process Following the Defense**

- Obtain signatures of the committee at defense on two forms:
  - o The signature page and the final defense form are on archive-quality paper.
  - o NOTE: Archive-quality paper is white, 20-25#, cotton, or rag paper. When held up to light, this paper has a distinguishing watermark.
- Obtain the signature of the Dean of the College of Nursing and Health. Take a copy of the completed signature form to the Office of Student Affairs.
- Revise the document as directed by the committee and submit it to the chair for final approval. Revise if needed.
- Send the IRB a memo that the project was completed if necessary.

- Submit final copies for binding (one each for the chair, self, and if giving bound copies to committee members) to the CONH Office of Student Affairs.
  - Submit a bound or completed final copy to the chair and <u>all</u> committee members.