

EC AS PIE: FIVE CRITERIA FOR EXECUTING A SUCCESSFUL DNP FINAL PROJECT

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The goal of doctor of nursing practice (DNP) programs should be to produce nurses that are uniquely prepared to bridge the gap between the discovery of new knowledge and the scholarship of translation, application, and integration of this new knowledge in practice (American Association of Colleges of Nursing [AACN], 2006). However, there is concern over the variability in DNP programs and expected outcomes. The aim of this article is to describe a 5-point system of evaluation to determine whether a DNP final project meets the outcomes of the AACN Essentials of Doctoral Education in Advanced Nursing Practice (2006) in a comprehensive and rigorous way. In brief, the five criteria that must be met are represented by the acronym EC as PIE (E = Enhances; C = Culmination; P = Partnerships; I = Implements; E = Evaluates). Each criterion must be present and come together to form one complete “pie” representing evidence-based practice that is robust and innovative, culminating in a rigorous doctoral level DNP final project. In addition, we provide detailed examples of how these standards are currently being successfully implemented and discuss additional possibilities. (Index words: Doctor of nursing practice; DNP; Final project) *J Prof Nurs* 30:300–306, 2014. © 2014 Elsevier Inc. All rights reserved.

THE AMERICAN ASSOCIATION of Colleges of Nursing's (AACN) Position Statement on the Practice Doctorate (2004) proposed that the practice doctorate be the terminal degree for clinical nurse specialists, nurse anesthetists, nurse midwives, and nurse practitioners (AACN, 2004). Other reports (Institute of Medicine [IOM], 2003a, 2003b; National Academy of Sciences [NAS], 2005) have also called for increasing the educational level of nurses, and most recently, the Institute of Medicine report on the future of nursing (2010) called for doubling the number of doctorally prepared nurses by the year 2012. In response to the demands imposed by these reports, doctor of nursing practice (DNP) programs are being implemented

in schools across the country. However, these programs are not standardized and vary widely in requirements for earning this doctoral degree (Dunbar-Jacob, Nativio, & Khalil, 2013; Udalis & Mancuso, 2012). Recent reports (Dennison, Payne, & Farrell, 2012; Edwardson, 2010; Minnick, Norman, & Donaghey, 2013; Mundinger, Starck, Hathaway, Shaver, & Fugate Woods, 2009) provide some general guidance on developing these new educational programs but do not provide a means of standardizing the rigor of this degree or give practical benchmarks for success. One area especially variable is the DNP final project (Gray, 2013; Kirkpatrick & Weaver, 2013).

DNP programs' goal are to produce nurses that are uniquely prepared to bridge the gap between the discovery of new knowledge and the scholarship of translation, application, and integration of this new knowledge in practice (AACN, 2006). The aim of this article is to describe a method to determine whether a DNP final project meets the outcomes of the AACN Essentials of Doctoral Education in Advanced Nursing Practice (EDEANP)(2006) in a comprehensive and rigorous way using five criteria. In addition, we provide specific examples of how these standards can be implemented.

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Background and Review of the Literature

The recent transformation in nursing education is apparent by significant growth in programs and enrollment. In 2006, there were only 20 DNP programs in the U.S.; by 2011, there were 184 programs. Enrollment has grown 10-fold from 892 students in 2006 to 8,973 in 2011 (AACN, 2012). These numbers show that nursing educators have taken AACN's (2004) and the IOM's recommendations to heart and are trying to meet the goal of increasing the educational level of nurses (IOM, 2010; NAS, 2005).

It must be a high priority for nursing faculty to insist on comparable quality in DNP and nursing doctor of philosophy (PhD) programs (Edwardson, 2010). Nursing leaders have called for building a culture of clinical scholarship to distinguish nurses who graduate with a practice doctorate (Mundinger et al., 2009) from a research doctorate. Arguments have been made that the DNP and the nursing PhD are complementary degrees (Hathaway, Jacob, Stegbauer, Thompson & Graff, 2006; Edwardson, 2010). A review of the doctorate in nursing practice briefly describes the DNP final project as "the implementation of research or other evidence into practice" (Dennison et al., 2012; p. 233) but does not provide specific examples or guidelines on how this project should be devised or implemented. Chism (2009) offers many DNP project options but offers no discussion of rigor or guidance to the educational institution or program on this issue. These inconsistencies pose several problems. In the absence of discrete guidelines, institutions are employing widely disparate interpretations of what a DNP doctoral project entails. Portfolios of case study narratives, logs, and short writing projects are some of the only descriptions in the literature of the final DNP project (Smolowitz & Honig, 2008). A DNP final project that is not clearly differentiated from competencies required of nurse practitioner students currently graduating at the master's level is also problematic. These deliverables are the current standards in courses in master's programs that prepare nurse practitioners and do not seem adequate for the level of achievement assumed when earning a doctoral degree. The (EDEAPN) describe an advanced practice nurse who is able to do much more than provide direct patient care (AACN, 2006).

The (AACN, 2006) provides some explanation on the final DNP project and gives various examples; however, there are concerns that these example projects do not require the DNP graduate to demonstrate doctoral-level knowledge and skills. One of the examples provided of a final DNP doctoral project is an integrative review of the literature. This type of article is a common outcome for an undergraduate honor student or the culminating paper in many master's programs. If such an integrative review is all that is expected of a DNP graduate, then how does that demonstrate the DNP's ability to translate and integrate evidence-based research into practice and become a leader in today's health care environment?

Some critics question how the Commission on Collegiate Nursing Education (CCNE) can accredit programs with few required credit hours and no evidence of a project that is at the doctoral level. However, this critique is misplaced. The CCNE can only determine if a program meets the guiding criteria (AACN, 2006; National Organization of Nurse Practitioner Faculties [NONPF], 2007). We propose that if discrepancies have caused this confusion, then changes need to be put into place to clarify the standards. Until these changes occur, the critique and the responsibility will lie with the DNP-granting institution's faculty. The faculty must decide that the program and the graduates that they are responsible for will obtain a doctoral degree with rigor and quality (Edwardson, 2010).

This variability and nonstandard implementation across the country makes it very difficult to judge the quality or to compare the DNP degrees being conferred. Our aim is to introduce a system to clarify how faculty can evaluate the final DNP project to determine if the outcomes described in the EDEAPN (AACN, 2006) have been met by the graduate.

EC as PIE

The five criteria that must be fulfilled by the final DNP project are based on the definition of the project put forth and agreed upon by AACN (2006) and NONPF (2007). This definition states that the project should address a complex practice, process, or systems problem in the practice setting, (and) use evidence to improve practice, process, or outcomes. This makes it clear that the DNP graduate must actually complete a project in the practice setting and must evaluate what was implemented to determine the outcomes.

The five criteria that we propose are represented by the acronym EC as PIE (E = Enhances; C = Culmination; P = Partnerships; I = Implements; E = Evaluates). Each criterion must be present and come together to form one complete "pie" representing evidence-based practice that is robust and innovative, culminating in a DNP final project that makes a difference (Figure 1).

The DNP project must do the following:

1. Enhance health outcomes, practice outcomes, or health care policy. The DNP project can be

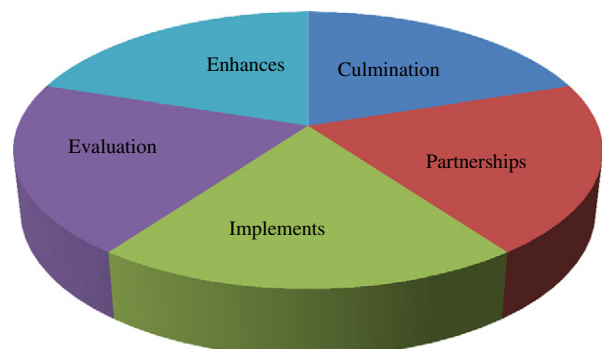


Figure 1. EC as PIE: Five criteria for executing a successful DNP final project.

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